



EDEN HOUSING ASSOCIATION LIMITED

GAS SAFETY POLICY

Document Reference Number:	PROP04
Document Owner:	Director of Operations
Approved By:	Executive Team
Approved Date:	March 2024
Policy Implementation Date:	September 2009
Revision Cycle:	3 years

This policy applies to Eden Housing Association and all its wholly owned subsidiaries (including Mitre Housing Association)

1. POLICY STATEMENT

1.1 We are committed to the safety of our tenants and ensure that all of our appliances are serviced every 12 months. As a landlord we will ensure the following:

- Gas fittings and flues installed /owned by us are maintained and in a safe condition
- All installations, maintenance and gas servicing are carried out by Gas Safe registered engineers
- Flue or chimney are checked when we carry out the gas appliances' annual service.

2. REFERENCES

Internal

2.1 This Policy is supported by a suite of modular gas safety procedures which cover the following areas:

- a) 2.1 - Qualifying Contractors and Operatives
- b) 2.2 - Uniformity of Documentation
- c) 2.3 - Unsafe Situations
- d) 2.4 - Gas Escapes
- e) 2.5 - Gaining Access
- f) 2.6 - Voids and Mutual Exchanges
- g) 2.7 - Quality Control
- h) 2.8 - Document Storage and Retrieval
- i) 2.9 - Database Management
- j) 2.10 - Gas Safety Awareness Training
- k) 2.11 - Vulnerability Assessment
- l) 2.12 - Properties with No Gas Supply

External

- a) Gas Safety (Installation and Use) Regulations 1998
- b) The Regulator of Social Housing (RSH) and the outcomes of the Regulatory Framework for Social Housing in England

3. POLICY CONTENT

3.1 The overall aim of this Policy, and its associated procedures, is to ensure the safety of people living and working in properties, containing gas-fuelled heating appliances, owned or managed by Eden Housing Association (EHA).

3.2 EHA aims to protect the occupiers of its properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with gas so far as is reasonably practicable.

3.3 This document sets out key policy objectives, control measures and accountabilities for ensuring the safety of gas heating and hot water installations.

3.4 This purpose of this Policy is to ensure EHA meets its obligations under the Gas Safety (Installation and Use) Regulations 1998

3.5 The application of this Policy ensures that EHA meets compliance with The Regulator of Social Housing (RSH) and the outcomes of the Regulatory Framework for Social Housing in England, previously introduced by the Homes and Communities Agency as outlined below:

3.6 *(Registered Providers must) meet all applicable statutory requirements that provide for the health and safety of the occupants in their homes*

This Policy applies to all properties owned or managed by EHA containing gas-fuelled appliances. The Policy also covers properties that may have a gas supply; but where this is not used, a duty of care still applies.

On a regular basis, reconcile the Association's Housing Stock list with the gas servicing database to ensure all installations are accounted for. Any material changes will be recorded by both EHA and the service provider

3.7 Carry out a programme of annual gas safety checks, at each property which has a gas supply (not just those where it is believed there are appliances connected to a metered supply). The target is to carry out every Gas Safety Check within 365 days of the previous check or new installation date.

3.8 Ensure that where repairs and/or maintenance is required to gas appliances, pipe work and flues, this is completed to approved standards.

3.9 Only use suitably qualified and Gas Safe registered contractors and Operatives to carry out such work.

3.10 Ensure that detailed records are kept and administered, and residents are provided with gas safety certificates on completion of safety checks.

4. RESPONSIBILITIES

4.1 Gas Safety Checks

4.1.1 Records of checks will be retained for a period of two years from the date they were carried out. An electronic copy will be filed to the appropriate address on the housing management system.

4.1.2 Each resident (or the Scheme Co-ordinator) shall also be supplied with a copy of the gas safety record (also referred to as a LGSR) within 28 days of the inspection being completed. New tenants will be provided with a copy on occupation.

4.1.3 Contractors will carry out visual checks on residents' own appliances such as gas cookers and gas fires. Any problems identified will be recorded on the safety certificate and issued to the resident. Where the problem is potentially dangerous, the appliance will be disconnected and the supply capped off. Suitable advice on health and safety will be provided to the resident in this event.

4.2 Access for Gas Safety Checks

4.2.1 The process to gain access will commence 10 months after the issue of the most recent LGSR. It is a condition of individual tenancy agreements that residents must provide access to their properties for a gas safety check. EHA are obligated to make every possible effort to gain access to carry out the safety check and will, as a minimum (via its contractors or otherwise):

- 1) Issue a letter offering an appointment or a convenient alternative
- 2) Issue a 1st warning letter on failure to gain access
- 3) Issue a 2nd warning letter on failure to gain access
- 4) Issue a final warning letter advising of legal action
- 5) Take legal action to gain an injunction for access

4.2.2 EHA will at all times act appropriately and in accordance with regulatory and legal requirements in gaining access to the premises to undertake necessary servicing. In doing so it will consider any specific special needs or vulnerability issues before initiating legal action against a resident who fails to allow access for this purpose.

4.3 Value for Money

4.3.1 It is our aim to achieve 100% compliance with the required legislation and we will ensure that there are adequate resources provided to support that aim.

4.4 Monitoring and Quality Control

4.4.1 EHA will monitor implementation of this Policy using a set of performance measures as below:

Measure	Target	Interval	Monitored by
Properties with valid LGSR	100%	Monthly	Property Compliance & Facilities Manager
LGSR certificates completed on time	100%		
LGSR certificates of appropriate quality (desktop check)	100%	At least monthly	Property Compliance & Facilities Officer
Gas safety checks carried out to standard (site audit)	100%		Third party contractor overseen by Property Compliance & Facilities Officer

- Karbon (CSV) will carry out a 100% check on all LGSRs before being sent to EHA.
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- The Property Compliance & Facilities Officer will review 10% of LGSR Certificates sent daily for completeness and quality as they are returned by the contractor.

- To ensure that gas safety checks have been carried out to the required standard, a 5-10% audit of completed checks will be undertaken. The onsite checks will be carried out by a suitably qualified and accredited third-party.

5. EQUALITY IMPACT ASSESSMENT (EIA)

- 5.1 All activities undertaken as part of this Policy will take full account of EHA's Equality and Diversity Policy, with focus on the following points.
- 5.2 Through the annual servicing of our gas appliances we aim to treat all customers fairly and with respect regardless of their gender, race, age, disability, religion, sexual orientation and marital status.
- 5.3 We will make all reasonable efforts to ensure that information regarding gas safety and our service standards are communicated in a way that meets diverse needs identified by any individual tenant or household.
- 5.4 The Association will apply these standards flexibly in the case of vulnerable and disabled tenants and may, at their discretion, choose to exceed or amend the standard to meet the needs of a particular individual or family.

6. MONITORING & REVIEW

- 6.1 Policy implementation will be reviewed:

1. Monthly by the Director of Operations
2. Quarterly by the Board of Directors
3. By independent auditors, as required; with a report provided to the Executive Management Team and Board of Directors

6.2 Policy Implementation

- 6.2.1 The accountabilities for implementation of this Policy are as set out below:
- 6.2.2 The Chief Executive retains overall accountability for the implementation of this Policy.
- 6.2.3 The Director of Operations is responsible for overall Policy implementation and ensuring that adequate resources are made available to enable the objectives of the Policy to be met.
- 6.2.4 The Director of Operations is responsible for delivery of the key Policy objectives as set out herein including designing and implementing procedures, staff training, and communication to customers.
- 6.2.5 The Director of Operations is responsible for ensuring the Policy is kept up to date with prevailing legislation and statutory obligations.
- 6.2.6 The Property Compliance & Facilities Manager is accountable for achieving the targets associated with the key Policy objectives

- 6.2.7 The Property Compliance & Facilities Officer is responsible for operational delivery, including the management of contractors, of servicing and maintenance and annual gas safety checks
- 6.2.8 Housing Officers and Scheme Co-ordinators shall support asset management and contractors in gaining access to carry out Gas Safety Checks.
- 6.2.9 This Policy shall be implemented through a set of procedures and control documents. All staff are responsible for following the requirements of these documents.

Equality Impact Assessment

Question	Response
1. Name of the policy/practice/activity being assessed	Gas Safety Policy
2. Summary of aims and objectives of the policy/practice/activity	We are committed to the safety of our tenants and ensure that all of our appliances are serviced every 12 months. As a landlord we will ensure the following. <ul style="list-style-type: none"> • Gas fittings and flues installed /owned by us are maintained and in a safe condition. • All installations, maintenance and gas servicing are carried out by Gas Safe registered engineers. • Flue or chimney are checked when we carry out the gas appliances' annual service.
3. What involvement, consultation, engagement has taken place for the policy/practice/activity (e.g relevant groups/stakeholders)	n/a as legislative/regulatory
4. Who is affected by the policy/practice/activity	Tenants, residents and staff
5. What are the arrangements for monitoring and reviewing the impact of the policy/practice/activity	Policy review date

Protected Group	Is there a potential for a positive or negative impact	Explain and provide evidence/data used	Action to address the negative impact
Disability	No*	See Explanation below*	See Explanation below*
Gender reassignment	No		
Marriage or civil partnership	No		
Pregnancy or maternity	No		
Race	No		
Religion or belief	No		
Sexual orientation	No		

Sex (gender)	No		
Age	No*	See Explanation below*	See Explanation below*

Evaluation

Question	Explanation*	
Is it possible the proposed policy/practice/activity could discriminate or unfairly disadvantage people	Although, the EIA shows potential risks to the business and individuals, there are no adverse impacts for any group with protected characteristics. Any differential impacts identified are adequately mitigated by existing procedures and operational practice (e.g. additional support for tenants with known mental health issues, when arranging the Gas Safety checks. It is also recognised that there could potentially be differential impacts for elderly and disabled service users (in the event of gas service failures or breakdown), the measures EHA puts in place to provide additional support for these groups sufficiently mitigates any additional risks). See Item 5.3 of the Policy	
Decision	Tick the relevant box	Include any justification required
1. No barriers identified – proceed	✓	
2. Barriers identified towards one (or more) protected groups – stop		
3. Barriers identified towards one (or more) protected groups – adapt or change the policy/practice/activity		
4. Barriers identified towards one (or more) protected groups – no proportionate way to amend the policy/practice/activity so proceed with caution		

Completed by – and date	Joanne Crone 15.1.24		
Reviewed by – and date	Executive Team March 2024		
Review Date (if applicable)			
Will this EIA be published	Yes	No	Not Required

Action (To be completed as required)

If the Evaluation has resulted in Decision 4, complete a risk assessment and record on Operational Risk Register	Date Completed:
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Change Log

Name	Date	Version	Change
	When published	1	