ST LEGER HOMES OF DONCASTER LIMITED BOARD MEETING

To be held at 2pm on Thursday 7 April 2022 Boardroom at SLC or via MS Teams (Hybrid Meeting)

AGENDA

<u> 1pm – 1.45pm Pre-Board Training – Cyber Security</u>

1	Apologies and Quorum – Stuart Booth, Susan Jones, Dave Richmond.		Verbal
2	Declarations of Interest by Board Members		Verbal
3	Minutes of the meeting held on 3 February 2021 and matters arising		Enclosed
4	Chair and Chief Executive's update	D Wilkinson	To be circulated
Policy an	d Strategy Items		
5	Tenant Voice Strategy	M McEgan	Enclosed
6	Equality, Diversity and Inclusion Strategy 2022 - 2026	M McEgan	Enclosed
Financial	and Performance		
7	Budget Approval	J Crook	Enclosed
8	2022/23 Annual Development Plan and KPI's	J Crook	Enclosed
9	KPI Performance	J Crook	Enclosed
10	Strategic Risk Register	J Crook	Enclosed

For Information

- **11** Committee Minutes
 - Building Safety & Compliance Committee 27 Jan 2022
 - Employment & People Committee 8 Feb 2022
 - Performance & Improvement Committee 3 March 2022
 - Audit & Risk Committee 4 March 2022
- **12** Any Other Business
- **13** Date of next meeting 26 May 2022

Company Number 05564649 A Company Limited by Guarantee Registered in England

St. Leger Homes of Doncaster Limited BOARD MEETING Hybrid meeting

3 February 2022

Present:

Dave Wilkinson (Chair), Trevor Mason, Susan Jones, Steve Lyons, Richard Allan Jones, Dave Richmond, and Joe Blackham.

Action

Also In Attendance

Julie Crook (Director of Corporate Services), Chris Margrave (Director of Property Services), Mark McEgan (Director of Housing and Customer Services), Anne Tighe (minutes).

1	Apologies and Quorum	Action
1.1	Apologies were received from Stuart Booth and Sam Bartle.	
2	Declarations of Interest by Board Members	
2.1	There were no declarations of interest.	
3	Minutes of the meeting held on 2 December 2021 and matters arising	
	The minutes were agreed as a true reflection with matters arising detailed within the table at the end of the minutes. The following minor amendments were made:	
	Paragraph 5.2 – change free to fee	
	Paragraph 7.5 – change Corporation to Corporate	
	Paragraph 9.7 – second line, made up of to replace made of up	
4	Chair and Chief Executive's Update	
4.1	The Chair advised that he would provide a verbal update prior to the Chief Executive's update going forward.	
4.2	<u>Christmas Cover Arrangements</u> Members were asked to note that the festive cover Emergency Call Out Repairs (ECO) did not work as well as it could; this will be picked	

up through Repairs Excellence and could possibly be made contractual in the future.

4.3 Office Arrangements – The move to the Civic Building

Members noted that the fine detail of the planned move to Civic Building was going well. Although no concerns had been raised during staff consultation, concerns had subsequently been raised over parking availability and costs. The Head of Human Resources and Organisational Development was exploring possible options such as subsidised parking fees for a short period of time to address these concerns. A member asked if staff would be encouraged to use public transport if possible, and were advised this would be considered as the Civic Building was nearer to public transport links.

4.4 <u>Health and Wellbeing – Covid</u>

The Board were informed that the majority of the staff were well enough to return to work after their initial required self-solation period. In the main the staff off on sick leave were trade operatives as most office staff were able to work from home. It was further noted that although the national position had changed, local figures on transmission of the Covid variant remained high therefore staff were still being asked to wear masks when visiting clients.

4.5 Organisational Re-alignments

The update around re-alignment proposals for the Building Safety Team and Asset Management Team were noted.

4.6 <u>Budget 2022/23</u>

Board members noted that an update was on the agenda for member's comments. In response to a query from a member around required savings, the Director of Corporate Services confirmed the business has to make savings of £1m over the next three financial years. There were some areas of increased cost, for examples software, compliance and voicescape, however projected savings were going to be achieved by moving to the Civic Office and working in an agile way. More detailed information would be supplied in the report to Board in April 2022. The Chair queried if there had been any feedback from the Procurement Team moving to DMBC. It was explained that they had settled in well and it was anticipated that local spend would increase and shared contracts would be better value.

4.7 <u>Board Member Appraisals</u> Members noted they would be contracted over the coming weeks to arrange their annual appraisal meeting.

5 Communications Strategy

5.1 The Director of Housing and Customer Services presented this item and explained that the Communications Strategy linked into other Strategies therefore had been kept short so was not a long, unwieldly document.

MMc

- 5.2 The Chair referred to Page 11 of the Strategy which listed how we measure success and names them, however he couldn't see how the channel switch would be measured. It was agreed that this would be added to the document.
- 5.3 A member commented that the Strategy was a good document, however noted the consultation response total was low, therefore he would like assurances on working towards engaging tenants and the need to take tenants forward with the company and increase digital interactions. It was explained that the Tenant's Voice Strategy was scheduled to be presented to Board in April 2022. It was acknowledged that some face to face feedback could be really good, however the pandemic has moved the organisation more towards digital and staff were now using text messaging for feedback. Traditional methods would not be completely abandoned however different audiences and demographics could answer consultations in different ways.
- 5.4 The Board referred to the cost of contracts and in particular the cost of printing HouseProud which was £300k; as this was a significant amount of money members asked how this could be reduced for example would it be possible for those that are not engaging to optout of receiving HouseProud. The Director of Corporate Services advised that the cost referred to was over a four year term, and that the Communications Strategy was working towards gathering information and changing communications going forward. It was noted that feedback had shown that some tenants looked forward to reading the document, however the use of Facebook, twitter and other online communications were increasingly being used.
- 5.5 Members asked what would be the biggest barrier to delivering Year 1 actions and what would be the biggest opportunity. The Director of Housing and Customer Services advised the biggest opportunity would be using Voicescape fully as it could not only text people but provide an opportunity for them to message back. The biggest concern would be the rapid plan for the next 12-18 months to boost engagement then keep the engagement; it was acknowledged that keeping tenants interested could be really challenging. In response to a further question around how the success of actions would be communicated to wider workforce, it was explained that management had a number of regular communications with staff including pulse surveys, weekly emails and staff newsletters.
- 5.6 A member commented that the document does cover a lot, with a massive emphasis on involvement and influence of stakeholders (tenants). He was, however much more concerned that the emphasis was on satisfaction. To him satisfaction would mean:

- Upon calling the business tenants would get helpful members of staff
- Communications with no jargon
- Text before and after repair staff visited for an appointment; the latter would be an immediate opportunity for constructive feedback
- Calls within 24 hours of repair/contact was good practice not selecting tenants for calls within a week
- Value for money service

If all of the above was met, tenants would be satisfied.

- 5.7 The member also referred to Paragraph 5.9 in the covering report which referenced improving communications with diverse groups such as LBGT+, disabled and BAME groups. Concern was raised that there should be no difference in communicating with different sexes, tenants such as elderly and those that had disabilities should be concentrated on as they were practical equality measures addressing real needs.
- 5.8 The Director of Housing and Customer Services agreed that the outcome was the most important thing for tenants and this would be focussed on throughout; every 'touch point' would be scrutinised. The issue around specific groups and equality was that in the main we don't have substantive information around how we communicate with each group and this required further analysis.

5.9 The Board approved the Communication Strategy 2022 – 2026 and agreed that updates should be scrutinised by the AT Performance and Information Committee.

6. Strategic Risk Register

- 6.1 The Director of Corporate Services presented the Strategic Risk Register and advised that a full review would be undertaken for the new financial year, following the approval of the annual development plan, KPIs and budgets. The key ones to note were issues around Information and Communications Technology (ICT) and issues around the work force.
- 6.2 The Chair suggested that the risk around preparedness for inspection and outcome could be included in the Register and it was explained that a lot of future risk could be managed throughout process.
- 6.3 A member pointed out that the residual forecast had not changed and did this align with Executive Management Team (EMT) risk appetite. The Director of Corporate Services reported that the risks had been updated to show updated and completed actions. It was appreciated

that members thought EMT were risk averse, however provided the risks had been identified and plans were in place to mitigate the risks this was appropriately recorded.

6.4 **The Board noted the updated Strategic Risk Register.**

7. Our Organisational Culture and Corporate Plan

- 7.1 The Chief Executive presented the Organisational Culture and Corporate Plan and asked members to agree to a facilitated session early in the summer as part of an away day to look at broader issues and drill down to finer details.
- 7.2 A member who had been involved with reviewing similar reports endorsed the contents of the report and advised the methods used gave good views of the current climate and also what your desired culture to strive for; it also gives good analysis to move towards the desired culture.
- 7.3 The Chair requested that the results of discussions be further **AT**/ discussed at the Employment and People Committee. **LGH**
- 7.4 The Board noted the contents of the briefing note and agreed to a facilitated session as part of the Strategic Planning process in early summer of 2022.

8. St Leger Homes of Doncaster (SLHD) Sub Committees Report

- 8.1 The Chief Executive reminded members of previous discussion around retaining four sub-committees.
- 8.2 It was agreed that the current status quo of sub-committee meetings would be retained for 2022 with the intention to collapse the work of the Building Safety and Compliance Committee into the work of the other sub-committees at the start of 2023. It was further agreed that flexibility would be agreed for a shorter/longer period.

9. Board Diversity

- 9.1 The Chief Executive presented the above report and advised that the contents were sensitive in that the report set out issues related to the background of the organisation and clientele we serve and employ. It was acknowledged that the Board was not very diverse and the recommendations contained a number of ways forward. The Director of Corporate Services cautioned that any changes to the number of Board Members would be a shareholder decision.
- 9.2 Members welcomed the review however pointed out that although it was recognised it would be preferable to have a more diverse Board

it should not be at the expense of the loss of experienced and functioning Board.

- 9.3 A member pointed out that since his appointment to Board he had seen 5 new members of EMT, and new Council Board Members appointed and he was aware of a mixed membership of the Tenant and Resident's Involvement Panel (TRIP). It would be interesting to know if there was a record of applications for any of the aforementioned positions from a minority background.
- 9.4 The Chief Executive advised that the issue of diversity wasn't just about Board but the whole organisation. He referred to a member's previous comments that the most important thing was to have a functioning Board with the right skills therefore it may take a slight change to be more diverse.
- 9.5 Members agreed that anything that could be done to alter the Board composition to make it more representative was good, however acknowledged that the Council appointed Board Members and this could be reviewed. It was further noted that in a high number of Doncaster villages residents were made up of former mining communities and did not contain a diverse population so the Board may have to be creative in gaining diverse voices.
- 9.6 Members asked if there was any discretion on co-opted Board Members, and were informed that the Council can grant authority for this to be considered. The Chair asked members to note that in coopting members this would mean that the Board could become larger and unwieldy.
- 9.7 The Board agreed that consideration would be given to undertaking a recruitment process using 'positive action techniques' to promote board diversity. They also agreed that the issue be brought to the attention of DMBC for their consideration as part of the nomination process for board members.
 - DR

10. Annual Development Plan – Current Year

10.1 The Board received and noted that the Red Actions in the Annual Delivery Plan briefing would not be completed in this financial year.

11. **KPI Performance**

- 11.1 The Director of Corporate Services presented the update on the Key Performance Indicators (KPI's).
- 11.1 Members were concerned to note the increase in stress related absence for staff. It was explained that the majority of staff who were absent with personal rather than work related stress and colleagues

were being supported as much as possible and using Medicash support also.

11.2 In response to a further question around whether the 8 red targets overall and whether they were set at realistic targets, it was explained that the targets were set by the Council and outside of EMT control. EMT did negotiate but it was acknowledged that some were quite challenging.

12 Revenue Monitoring

- 12.1 The Director of Corporate Services presented the above report and highlighted the main areas of concern:
 - Salaries managers were pushing hard on vacancies and monitoring trends i.e. a small increase in pay wouldn't address recruitment issues in Property Services
 - Problems recruiting to temporary and permanent administrative roles therefore looking at job descriptions for Grade 2 posts and the list of criteria we need to be realistic
 - Not achieving our Capital Income
- 12.2 Members asked if rising electricity and gas prices impacted on budgets. It was explained that the procurement of utilities was part of the Council's contract therefore we benefit from good rates, however were are locked into the contract. It was anticipated the cost would increase in the next financial year. The largest utility bill was for District Heating and changes to the charges for tenants are being considered.

12.3 The Board noted the Revenue Monitoring Report as at 31 December and the projected outturn for the financial year 2021/22.

13. Capital Monitoring

13.1 The Board received and acknowledged the Capital Monitoring Report and the projected outturn for the financial year 2021/22.

14. Safety & Compliance Activity Report

- 14.1 The Director of Property Services presented the above report and asked members to note;
 - the C365 Compliance dashboard
 - issues around getting contractors back on site but now happening
 - in house joiners now trained on installation of fire doors which will reduce costs, however the cost of accreditation was high

14.2 The Board received and noted the Safety & Compliance Activity Report and did not suggest any changes to format.

15. Homeless Update

- 15.1 The Director of Housing and Customer Services presented an update on Homelessness and Demand Overview and invited questions from the Board.
- 15.2 Members asked about the process for prison releases and were advised that although there was a written process it was not working effectively under scrutiny.
- 15.3 The Chief Executive reported that the working relationship with the Council, particularly around the different parts which dealt with homelessness, was much improved recently. There was ongoing work with other agencies to assist people approaching the service to try and move away from 'firefighting' which was really critical. There was an acknowledged pressure on housing and unfortunately the Private Rented Sector (PRS) were risk averse and did not want to work with the organisation. Work was underway to see if there was a way to give PRS an offer to work with us and provide assurances that we would work closely with complex clients to ensure they sustained their tenancies.
- 15.4 Members expressed concern over the high use of hotels and asked if there could be an alternative, innovative way of accommodating people. The Chief Executive agreed that if the offer made was attractive it could increase demand.
- 15.5 The Director of Housing and Customer Services reiterated it wasn't just about accommodating people, it was about how people needed to sustain a tenancy and work through complex needs such as alcohol/drug issues, paying bills, household tasks and eventually gaining employment. If you took, for example, 10 rough sleepers and looked at their case history, they probably had numerous tenancies and they had all collapsed. Wrap around support was key to them succeeding and required multi-agency co-ordination.
- 15.6 Members queried if officers felt that the Council services weren't reacting appropriately. The Director of Housing and Customer Services explained that an accommodation flow meeting was held 3 times a week and it was now working better. SLHD/DMBC colleagues were drilling down to what funding and commissioning was happening and that they were in sync for the best results.
- 15.7 A member referred to the high number of private properties empty within the Borough at any one time, and asked if officers had explored the potential to take over the properties. The Chief Executive explained that officers were looking at the possibility of asking

landlords if we could manage the properties, however as explained earlier, PRS were risk averse.

15.8 The Chair and Board thanked officers for the presentation.

16. **Any Other Business**

16.1 Additional Information

Members asked if we could provide further information on the issues in the energy announcement from OFGEM and the Chancellor and **DR** the announcements around levelling up and what it would mean for SLHD as an organisation.

Matters Arising from the previous minutes

		St Leger Homes of Doncaste	r Board - Action	Log	
Month	Ref	Action	Progress	Completed Y/N	Owner
Feb-22	5.2	Communications Strategy - The Chair referred to Page 11 of the Strategy which listed how we measure success and names them, however he couldn't see how the channel switch would be measured. It was agreed that this would be added to the document.		Y	MMc
Feb-22	5.9	Communications Strategy - The Board agreed that updates should be scrutinised by the Performance and Information Committee		Y	AT
Feb-22	7.3	Our Orgnisational Culture and Corportate Plan - The Chair requested that the results of discussions be further discussed at the Employment and People Committee.		Y	AT/LGH
Feb-22	9.7	Board Diversity - The Board agreed that consideration would be given to undertaking a recruitment process using 'positive action techniques' to promote board diversity. They also agreed that the issue be brought to the attention of DMBC for their consideration as part of the nomination process for board members.	In Progress		DR

Feb-22	16.1	Any Other Business - Additional Information - Members asked if we could provide further information on the issues in the energy announcement from OFGEM and the Chancellor and the announcements around levelling up and what it would mean for SLHD as an organisation.	In Progress		DR	
--------	------	---	-------------	--	----	--

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England Company Number 05564649

Board Meeting

REPORT

Date	:	7 th April 2022
Item	:	04
Subject	:	Chief Executive and Chair's Update
Presented by	:	Chair and Directors
Prepared by	:	Dave Richmond, Chief Executive
Purpose	:	To provide an update to Board Members on recent significant activity.
D		

Recommendation:

That Board note the content of this report.

Company Number 05564649 A Company Limited by Guarantee Registered in England

To the Chair and Members of theAgendaST LEGER HOMES OF DONCASTER BOARDDate: 7

Agenda Item No. 04 Date: 7 April 2022

1. Report Title

1.1 Chief Executive and Chair's Update Report.

2. Executive Summary

2.1 This report updates Board Members on the key issues that have arisen over recent weeks.

3. Purpose

3.1 To provide an update to Board Members on recent key issues.

4. Recommendations

4.1 That Board note the content of this report.

5. Operational Issues

5.1 <u>High Rise Cladding Remediation</u>

The pre-construction phase of the High Rise Remediation Programme (HRRP) is well underway, preparations in the compound area and site facilities are being established and the foundations for the scaffolding are being prepared. All residents have been informed prior to programme of works commencing and Wates will have a dedicated Resident Liaison Officer (RLO) on hand to answer any questions.

Planning permission is being sought for the 5 blocks that are to be renewed and we are working closely with all our partners such as SYFR (South Yorkshire Fire & Rescue), DMBC planning department and Wates to ensure that we are signing off the project at designated points.

Our own building safety team will play a significant part in this project. As subject matter experts, they will support the contracts team in the technical aspects of the installation. We have also employed a facade expert to offer further assurance to the process, they will be on site to witness the installation.

As the project progresses it will inevitably become business as usual to some degree and will be monitored through the Building Safety Committee (BSC) and the Building Safety Group (BSG).

5.2 <u>Repairs Excellence</u>

The repairs excellence (RE) pilot has entered the second phase with an additional area brought into the pilot for the next 4 weeks. This will see additional data derived from additional repairs going through the RE process. We have received lots of really positive feedback from our tenants about the pilot and specifically about how we have kept in touch throughout the repairs journey and the interaction with the trade operative.

Considerations are now being given to how we scale up the pilot to all areas within the borough. The programme board want to consider a complete roll out to all areas in the following 8 weeks pilot, this will only be possible if we are able to train and on-board the rest of the team during this period. In addition, there are some improvements required in our IT systems and from a customer's perspective we need to ensure they are informed of the pilot to ensure we have the correct contact details. This is essential to ensure we are able to make contact throughout the repair journey and to guarantee access on the day of the repair.

We are analysing all of the data from the pilot so far, this will be presented to EMT in the next highlight report due in the coming weeks. This report will identify the efficiencies that have been realised in the pilot and provide an overview of the potential when the pilot goes borough wide.

5.3 Decarbonisation

2022/23 will see SLHD continue to deliver investment activity aimed at improving the energy efficiency of the housing stock as part of the 'fabric first' approach on the longer-term journey towards net zero carbon. In practical terms, this will see the provision of external wall insulation to approximately 400 'hard to treat' properties in Intake and Wheatley.

To support the delivery of these works, £2.5m of external funding from the Social Housing Decarbonisation Fund has been secured for 250 social housing properties. This is in addition to Local Authority Delivery 2 (LAD2) funding secured previously of circa. £750k to support works to 150 properties across both 2021/22 and 2022/23.

In line with the approved Environmental Strategy, 2022/23 will also involve carrying out further data gathering, analysis and research aimed at developing the longer-term net zero carbon investment programme.

5.4 SYFR Evacuation Training

SLHD working in partnership with South Yorkshire Fire and Rescue (SYFRS) are committed to keeping the residents of our high rise properties safe and ensuring that the Firefighters attending our properties are competent and safe in their day to day duties when responding to emergencies. To test this. SLHD provides opportunities for SYFRS operational crews to undertake realistic and challenging scenarios to test their skills.

In conjunction with SYFRS, SLHD hosted a training event for SYFR Operational Firefighters at Shaftsbury House Intake on April 4th 2022. During the tests there was also an opportunity for members of our SYFRS Community Safety department to provide advice and tips to residents on how to be safer in their homes. These tests ensure that crews are familiar with our properties and are prepared to handle emergency scenarios in our buildings.

5.5 Office Arrangements – The move to the Civic Building

It has now been confirmed to the workforce that we will relinquish the use of St Leger Court and transfer operations to the Civic Building from 23 May. This will allow sufficient time for the majority of the office changes at the Civic Building to be completed. Currently negotiations are underway with the intent of ending the lease on St Leger House from the end of March 2022 as this building has not been used since autumn 2021.

To support staff that will incur extra costs in this move, it has been agreed to offer a small subsidy to employees that will incur additional parking or travel costs. The proposal equates to £1 per day for each day spent in the office. The actual amount will vary dependent upon anticipated office attendance and will be paid in advance on two occasions, six months apart with a review before the second payment is made. No assistance will be offered after the first year. These arrangements will not apply to the Executive Management Team. Currently a monthly parking pass is available for the town centre costing approximately £34.

5.6 <u>2021/22 Pay Award</u>

The local government pay award for 2021/22 was agreed at: 2.75% for NJC scale 1 1.75% for scales 2 and above Leadership pay has been increased by 1.5%

The award is backdated from 1st April 20221 Because of the late settlement, it has not been possible locally to organise payment until April 2022 when it will be subject to the increased rate of national insurance.

In recognition of this and in line with payments to be made by DMBC to their directly employed colleagues, an additional payment is being considered to be paid in May to account for the (N.I.) shortfall relating to the back pay.

5.7 Board Member Allowances

Board Member allowances will be increased in line with the pay award agreed for the staff (1.75%), the allowances will be increased with effect from 1 October 2021 and the appropriate back pay will also be paid. These

changes will be implemented in the payroll for May. The new rates are shown below; Chair - $\pounds 9,158$ Vice Chair - $\pounds 3,307$ and Board Member - $\pounds 2,289$.

5.8 <u>Personal Development Plans</u>

From October 2021, we launched our first compulsory Personal Development Planning (PDP) requirement for all colleagues across the organisation to undertake and submit a manager approved personal development plan for the coming year.

This is the first time such an activity has taken place and we are pleased to report that we have achieved a 100% completion rate (with the exception of long terms absence cases where completion was not possible although this is being picked up as colleagues re-enter the work place).

PDPs have now being used to develop the annual training plan for the coming year.

5.9 Update on Vacancies

Significant work and detailed monitoring of vacancies has been undertaken over the last 6 months. As an organisation we continue to carry a higher number of vacancies as we proceed towards the implementation of the Asset Management realignment, manage a challenging recruitment market for trade based and specialist roles and head towards our annual apprenticeship intake.

Good progress has been made recently in appointing to some of our more typically hard to fill vacancies by ensuring well placed advertising, reviewing our application methods, promotion of our total rewards package to prospective applicants and where appropriate making good use of partner agencies. There is still more work to do to ensure that our processes are as easy to engage with as possible and that vacancies are promoted in the best possible way.

5.10 Environmental Pride Programme

This programme, which came out of discussions at the board away day in September, is now operational. The scheme seeks to support local groups to deliver community led projects that will enhance local environmental conditions and promote local cohesion and pride. Additional partners drawn from the Council, Doncaster Chamber, Voluntary Action Doncaster and Doncaster Colleges are also getting involved and this will enable the scheme to be delivered borough wide. It has also been agreed that DMBC will coordinate the partnership arrangements, with a significant input from SLHD. At the time of writing, fourteen proposals have been received and are being appraised. The applications represent a range of projects including the development of community gardens/ food growing initiatives, litter picking schemes and community wellbeing initiatives. These groups are seeking small amounts of finance and some practical support to deliver the projects.

5.11 <u>Staff Communications</u>

In order to increase the accessibility of the Executive Management Team, four virtual question and answer sessions were held in the week commencing 28th March. Approximately 100 members of staff logged onto the sessions.

Issues raised included cost of living related concerns; comparative pay and mileage, the relocation to the Civic Building and implications for outlying offices, technology related issues, training and development opportunities amongst other issues. Whilst we didn't ask for feedback from staff on the usefulness of such meetings, the interest shown and the issues raised would seem to indicate it is worth replicating the events, perhaps in the early summer.

6. War in Ukraine

6.1 Shortly after the war commenced the Confederation of British Industry (CBI) produced a briefing note highlighting the likely impact on the UK economy. The note was written prior to the imposition of sanctions and before the significant escalation and scale of disruption to the Ukrainian economy was known. The main anticipated impacts relate to:

<u>Commodities</u>

The most significant risk to the outlook stems from the disruption to European energy supplies which, is already resulting in a supply shock as the prices for oil, gas and other commodities move higher.

For St Leger it is expected that there will be implications relating to vehicle costs and energy prices but as yet these have not been quantified.

Fuel prices rose sharply in early March and are thought to have peaked by mid-March. Reports suggest they will start to fall but this usually takes a couple of weeks for the supply markets to adjust so this should start to be seen at the pumps in early April

Energy prices were already increasing well before the Ukraine conflict as a result of increased global demand as economies emerged from the Covid pandemic, as well as other factors such as Brexit uncertainty and the price cap removal from April 2022. Price rises and new tariffs from the energy companies have been published and there may be a few more, but prices should also be reaching a plateau now.

Non-energy commodities

Russia and Ukraine are both major exporters of non-energy commodities, particularly industrial metals and foodstuffs, as well fertilisers. There are reports that the closure of Ukrainian ports and rail is disrupting exports of agriculture and metals (with 90% of Ukrainian grain exports transported by sea, for example). Higher prices will ripple through to end users, adding to existing cost pressures for firms in a range of sectors, particularly automotive, aerospace and technology industries, as well as the construction sector.

The conflict is likely to push up foodstuff prices, which were already at multiyear highs. Russia and Ukraine are the world's largest and third largest exporters of wheat, Ukraine supplies 12% of barley exports, almost 13% of corn exports and 40% of sunflower oil exports.

The implications for St Leger arising from non-energy commodities may be less apparent than for fuel but nonetheless still exist. It is likely that vehicle costs will increase (Russia is for example the major supplier of palladium, critical for catalytic converters). Other material costs are also likely to rise and supply disruption may result, not only in connection with iron and steel but also clay and ceramics which are major Russian exports.

6.2 <u>Homes for Ukraine</u>

A number of tenants have approached SLHD asking what our stance is in respect of the Homes for Ukraine programme. Whilst we would very much wish to support people wanting to offer help to refugees, at the time of writing we were still researching the implications of tenants offering spare rooms as part of the scheme. Consideration is being given to a range of issues such as overcrowding, benefits and safeguarding etc. All applications are being subjected to property checks and also safeguarding checks.

The scheme enables Ukrainian refugees to have the same opportunities to work, live and claim benefits as British citizens for the duration of their visas (believed to be in most cases for three years).

To date only small numbers of refugees have arrived in Doncaster with all being accommodated in private homes. One tenant of SLHD has been matched with a refugee family and whilst the living arrangements are cramped, consent from SLHD has been given to the arrangement.

Due to the entitlement to apply for social housing, there is a significant possibility that should anyone arrive in the country with a visa but no host family, or if the host arrangements break down, that refugees will approach SLHD for help. Currently, the homelessness system is under significant strain with high numbers of people including families being housed in temporary and bed and breakfast accommodation. Consequently we are exploring whether there is any potential to access host under the Homes for Ukraine scheme rather than utilise B & B accommodation. We have consulted the workforce to ascertain if there was a collective appetite for undertaking an organisational approach to fund raising or other forms of support. Whilst there was an interest from a small number of people, it wasn't felt sufficient to justify pursuing.

7. Board Issues

7.1 Appraisals

Board member appraisals have all been scheduled throughout April and May. Board Members will have received confirmation of their appraisal appointment and have been asked to complete the Self-Assessment Questionnaire by a specific deadline. Meetings will take place either virtually or in person as requested by the Board Member.

7.2 Board Training

We have developed a comprehensive training programme which is attached to this report at Appendix A.

Mandatory Training and Development

The programme covers both mandatory training which we will expect all Board Members to complete over a 2/3 year period. This 3 year cycle will run continuously through to 2031, and can be added to as and when required.

Awareness Raising Training

We have also drawn up a programme of awareness raising training sessions which cover corporate areas of the business such as performance and finance information, procurement and information about our assets together with a scheduled stock tour. Each specific topic will have its own cycle of when it will be delivered which is detailed on the plan.

All training sessions in both of the categories will be delivered in a number of different ways. This includes face to face (via MS Teams and in person) along with utilising the organisation's training portal 'FLO' and there is potential for some lunch and learn drop in sessions.

We would welcome Board's comments and suggestions on the training and awareness topics that we have suggested.

Additional Development Opportunities

On a quarterly basis, we will be compiling a detailed list of events hosted by Housing Industry Organisations of which we are a member of. If any are of interest, just respond to the email advising of your selections.

Training coming out of Appraisals

As part of the Appraisal process, the paperwork includes an 'Additional Training Offer', this is where Board Members have an opportunity to request some bespoke areas where they want to develop further. Board Members are asked to select any training they think may be worthwhile which can be explored further as part of their appraisal conversation.

Pre-board Sessions

Over the past 12 months we have been holding 'pre-board sessions' before the start of our Board Meetings. In the main, these sessions are used for information sharing, but on occasions, like today, we will use them as training sessions. We will list these sessions on this training programme so we capture the information.

Members are asked to consider the proposed training plan. Where possible consideration will be given to delivering mandatory training and awareness raising sessions alongside planned board meetings or away days. It may be possible to consider some issues either as part of an e-learning package, possibly as a bespoke virtual meeting or via a direct discussion with an appropriate member of staff.

7.3 Board Member Recruitment

As agreed at the last Board, we have begun to promote the possible opportunities to join the Board later in the year as independent or tenant representatives. Any shortlisted applicants will be subject to a formal interview process.

The issue of Board diversity has also been raised with the Council for their consideration as part of their nomination of Board Members

8. **Procurement Activity**

8.1 A list of recent procurement activity is included as appendix B.

9. VFM Considerations

9.1 There are VFM implications in a number of the issues raised above, the most obvious being in respect of office accommodation, where the move to the civic will produce ongoing savings of the order of £130k p.a, but less in year one as a result of the staff travel subsidy.

10. Financial Implications

10.1 There are no financial implications arising from the replacement of high rise cladding, as all costs will be borne by our contractor. See also VFM section for additional issues.

Costs will be incurred arising out of the training plan, but have been budgeted for.

There will be small costs in respect of board member recruitment, again these have been budgeted for.

Costs relating to increasing process of fuel and materials have not yet been determined.

11. Legal Implications

11.1 The High Rise remediation issue has been subject to considerable dialogue but an agreed way forward has been reached.

There are no other significant implications of a legal nature.

Any other legal issues will be considered as projects develop.

12. Risks

12.1 There are several risks involved in a number of the issues covered in this report. These will be considered as projects are developed

13. Health, Safety & Compliance Implication

13.1 The High Rise remediation works will enable us to be compliant with the latest regulatory standards.

There are implications involved in a number of the issues covered in this report. These will be considered as projects are developed

14. IT Implications

14.1 There are implications involved in a number of the issues covered in this report. These will be considered as projects are developed

15. Consultation

15.1 There are implications involved in a number of the issues covered in this report. These will be considered as projects are developed

16. Diversity

16.1 There are implications involved in a number of the issues covered in this report. These will be considered as projects are developed

17. Communication Requirements

17.1 There are implications involved in a number of the issues covered in this report. These will be considered as projects are developed

18. Equality Analysis (new/revised Policies)

18.1 Not directly relevant for this report, with the possible exception of the environmental pride programme. Any issues will be considered as the programme is developed.

19. Environmental Impact

19.1 There are implications involved in a number of the issues covered in this report. These will be considered as projects are developed

20. Report Author, Position, Contact Details

20.1 Dave Richmond, Chief Executive <u>Dave.richmond@stlegerhomes.co.uk</u> 01302 862700

21. Background Papers

21.1 Appendix A – Board Training Plan Appendix B - Procurement Activity

Board Training Plan

Corporate Mandatory Training & Development - 2/3 yr cycle (based on Boaard Member Rotation)	Delivery Option	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031
Health & Safety (in yr 1)	ТВС		v		v		v		v		v		v	
Regulation (Compliance & fire safety) - as more detail known	трс													
(every 2 years)	IDC				\checkmark		\checkmark		\checkmark		\checkmark		\checkmark	
Risk Management (and Strategic Risk Register) (in yr 1)	ТВС				✓		✓		✓		✓		~	
Cyber Security (in yr 1)	ТВС				\checkmark		✓		✓		✓		~	
Data Protection/GDPR (in year 2)	ТВС		✓			✓		✓		\checkmark		\checkmark		✓
Equality & Diversity (in yr 2)	ТВС		✓			✓		✓		✓		✓		✓
Role of Board Member (Governance) (in yr 2)	ТВС		✓			✓		✓		✓		✓		✓
NHF Code of Governance (Governance)	ТВС			√										
Values, Culture and Behaviours (to strengthen NHF Code of														
Governance)	твс				\checkmark			\checkmark			\checkmark			\checkmark

Awareness Raising - Every 2-4 years	Delivery Option	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031
Performance / KPI's / Benchmarking (every 3 years)	ТВС					\checkmark			\checkmark			✓		
Finance and Procurement (every 3 years)	ТВС			\checkmark			\checkmark			\checkmark			✓	
Safeguarding (every 4 years)	ТВС	\checkmark				\checkmark				\checkmark				\checkmark
Asset Management / Stock (every 3 years and year after	твс													
stock tour)	TBC					\checkmark			\checkmark			\checkmark		
Stock Tour (every 3 years)	ТВС				√			\checkmark			√			\checkmark
Customer Profiling - understands the needs and concerns of	трс													
customers (every 3 years)	IDC				✓			\checkmark			✓			\checkmark

Total per year

				7	6	5	6	6	5	7	5	5	7
--	--	--	--	---	---	---	---	---	---	---	---	---	---

Deliver	y Options include - dependant on the topic
---------	--

Bespoke training session - through MS Teams

Bespoke Training session Face to Face - (Meeting room)

Online through SLHD training platform (FLO)

Pre-Board Presentation sessions through MS Teams

Lunch and learn - face to face

Additional Development Opportunities (Increasing Board Effectiveness through strategic networking and learning)	As an addition to the training sessions above, there will be a quarterly training menu circualted which sets out training and workshop events that are running across the sector and available for Board Members to attend. Bookings requests to be sent through to Leandra
---	---

Additional training offers for Board Members 2022 as part of appraisal Awareness raising - can be a session or one to one
Awareness raising - can be a session or one to one
Annual Development Plan
Internal Audit
Repairs and Maintenance
Scheduled Repairs / Repairs Excellence
Housing White Paper, Regulatory standards and compliance Anti-Social Behaviour
Tenancy Support Team
Allocations
Homelessness
Performance
Environmental and Asset Management Strategy
Board Member training Opportunities
Role of a Non-Executive Director (Board Member)
Effective meetings
Effective Scrutiny and Challenge
Effective Board oversight of Risk
Fraud Awareness
Peer Support (quarterly meetings)
An Executive Director Peer
Housing and Customer Services
Property Services
Corporate Services

Pre-Board prese	entations - some of which are awareness raising / training sessions
Jan-21	Voids
Mar-21	Agile Working
May-21	Corporate Plan
Dec-21	Key Financial Impacts affecting tenants
Feb-22	Repairs Excellence
Apr-22	

Appendix A

Арреник А				
Procurement Exercise	Estimated Contract Value Based on a 4 year Term (exc VAT)	Framework or Tender	<u>Service Area</u>	Work, Supply or Service
<u>Primarily c</u>	apital expenditure, so Co	entracting Authority to be	Doncaster Council	
Fire Stopping Works	£4,000,000	Tender	Building Safety & Compliance	Works
Windows and Doors	£1,200,000	Tender	Asset Management	Supply/Works
Fencing - Supply and Install	£800,000	Framework	Asset Management	Supply/Works
Kitchen Legacy	£240,000	Framework	Asset Management	Supply
Kitchens Interim	£177,000	Framework	Asset Management	Supply
Asbestos Management Services Lot 4 Analytical - Air monitoring	£160,000	Tender	Building Safety & Compliance	Service
	e expenditure, so Contrad	cting Authority to be St. L	eger Homes of Doncaster	
Emergency Accommodation	£6,000,000	Tender	Access To Homes	Service
Waste Management - General Waste Skips, Metal, Cardboard, Tipping Points	£1,600,000	Tender	Repairs & Maintenance	Service
Works Interim (electrical services)	TBC	ТВС	Repairs & Maintenance	Works
Gas Spares	£860,000	Framework	Asset Management	Supply
Provision of Temporary Agency Staff	£726,000	Framework	HR & OD	Service
Plant Hire & Maintenance	£590,000	Tender	Repairs & Maintenance	Service
Fire Risk Assessments	£521,000	Framework	Building Safety & Compliance	Service
Metal Fencing/Handrails Fabrication & installation	£480,000	Tender	Repairs & Maintenance	Supply/Works
Purchase of tools & equipment	£360,000	Tender	Repairs & Maintenance	Supply
PPE & Workwear (inc Stakeholder Engagement)	£332,000	Tender	Asset Management	Supply
Painting & Decorating	£300,000	Framework	Asset Management	Supply
Door Entry Systems	£300,000	Tender	Repairs & Maintenance	Service
Print Management - Houseproud Tenants Newsletter, Rent Statements & ad hoc printing	£300,000	Framework	Customer Services	Supply
Glazing	£200,000	Tender	Asset Management	Supply
Provision for the supply of Furniture and Furnished Goods	£180,000	Tender	Access To Homes	Supply
Apprenticeships	£180,000	Framework	HR & OD	Service
			-	-

Lift Consultancy	£160,000	Framework	Building Safety & Compliance	Service
Furniture Removals	£152,000	Tender	Access To Homes	Service
Intranet Maintenance and Hosting	£150,000	Framework	ICT	Service
Ecology Services	£144,000	Tender	Asset Management	Service
Communal Aerial Remedial Works	£125,000	Framework	Repairs & Maintenance	Service
Supply, Service and Repair of Garden Equipment	£120,000	Tender	Housing Management	Supply/Service
Merchant Cards	£92,000	Framework	Repairs & Maintenance	Supply
HR Performance Management System	£84,000	Tender	HR & OD	Service
Project Design & Consultancy Services	£83,000	Tender	Asset Management	Service
PPE & Workwear Interim	£83,000	Tender	Asset Management	Supply
Sprinkler Maintenance	£80,000	Framework	Building Safety & Compliance	Service
Training	£80,000	Quotation	HR & OD	Service
Chartered Surveyors - RTB Valuations	£70,000	Tender	Asset Management	Service
Bio-Mass Boilers - Maintenance and Repairs	£64,000	Quotation	Repairs & Maintenance	Service
Taxi Services Used By Homeless Accommodation Team (KX010)	£54,000	Quotation	Access To Homes	Service
Fire Alarm Servicing/Maintenance	£48,000	Quotation	Repairs & Maintenance	Service
Signage	£42,000	Quotation	Asset Management	Supply
Survey & Supply of Adapted Bathroom Equipment	£37,000	Framework	Asset Management	Service
STAR Survey plus other smaller surveys	£28,000	Quotation	Customer Services	Supply

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England

Company Number 05564649

Board Meeting

REPORT

Date	:	7 April 2022	
Item	:	05	
Subject	:	Tenant Voice Strategy 2022-2026	
Presented by	:	Mark McEgan Director of Housing and Customer Services	
Prepared by	:	Jennie Daly Acting Head of Housing Management	
Purpose	:	To present the Tenant Voice Strategy and Action Plan for comment and approval	
Recommendation		: To approve the content and direction of the Tenant Voice Strategy and Action Plan.	

Company Number 05564649 A Company Limited by Guarantee Registered in England

To the Chair and Members of theAgenda Item No. 05ST LEGER HOMES OF DONCASTER BOARDDate: 7 April 2022

1. Report Title

1.1 Tenant Voice Strategy 2022-2026.

2. Executive Summary

- 2.1 The Tenant Voice Strategy replaces the previous Customer Involvement Strategy and has been developed through consultation with tenants, residents, staff, elected members, key partners and stakeholders.
- 2.2 The Strategy is significantly different to our previous approach to tenant involvement in a number of aspects:
 - Tenant Involvement is now framed specifically around 5 key commitments developed by tenant's views
 - The creation of a new One Voice Forum gives tenants greater influence over decision-making at a strategic level and helps keep Tenant Board Members connected to the tenants they represent
 - Establishes new opportunities to scrutinise, challenge and hold us to account
 - Makes meaningful tenant engagement everyones business
 - Involvement activities will be delivered through the new Inform, Consult, Involve, and Collaborate model
- 2.3 Particular regard has also been given to the Social Housing White Paper and Building Safety Bill as well as the Tpas National Tenant Engagement Standards and the improvement actions identified through our ongoing Tpas Accreditation assessment.

3. Purpose

3.1 To present the Tenant Voice Strategy and action plan for comment and approval.

4. Recommendation

4.1 To approve the content and direction of the Tenant Voice Strategy 2022-2026 and Action Plan.

5. Background

5.1 Work to develop the Tenant Voice Strategy began early last year. Due to the disruptions of the pandemic, opportunities for consultation, particularly inperson events were naturally limited.

5.2 Despite this, consultation was conducted through as wide a variety of methods as practicable; largely involving postal, telephone, online and doorstep surveys, as well as several focus groups.

Over 550 individuals and organisations were consulted over a 6-month period. Those taking part in the consultation were tenants, staff and elected members as well as:

- DMBC Adults, Health and Wellbeing teams
- Doncaster Children's Services Trust
- DMBC Commissioning team
- Doncaster University Technical College
- Doncaster Public Health
- B'friend
- Healthwatch Doncaster
- Doncaster Chamber
- Doncaster Housing for Young People
- 5.3 The Strategy addresses the common themes that emerged from the consultation, which are;
 - To be involved and engaged by developing new, more convenient ways to keep in touch as well as the tried and tested methods
 - Having a clear picture of what is happening across the organisation as well as in their local area and in their homes
 - Access to training to equip tenants to challenge and ask the right questions
 - Being able to see the value of their contributions so more tenants can be involved, with fewer obstacles to doing so.
- 5.4 To achieve these, the Strategy sets out our **5 Key Commitments**, to:
 - 1. Widen the opportunities for more tenants to be able to be involved
 - 2. Ensure tenants are at the centre of decision-making at every level; influencing services across the organisation
 - 3. Support tenants to gain the knowledge, experience and confidence, so they feel their contribution has value and impact
 - 4. Create a culture of mutual trust and transparency so that tenants can question and challenge effectively
 - 5. Ensure the environment is right so that Involvement is everyone's business
- 5.5 These commitments encompass what tenants expect as a result of their engagement, as well as what we will offer in return for their valued contribution and to ensure we embrace tenant involvement at every level.

6. Moving Forward

6.1 The Tenant Voice Strategy will give greater influence to tenants over the way in which decisions are taken about their homes and the services provided to them, as well how they will be informed and equipped to scrutinise, challenge and hold us to account.

6.2 Developing the Tenant Voice Strategy is just the start. The Tenant Voice Action Plan *(contained in Appendix A of the Strategy)* will underpin our 5 Key Commitments; taking us initially through the next 12 months and demonstrating the scale of the work required to achieve our ambitions.

Regular consultation will be a key feature to keep the Strategy relevant and to continuously improve and develop our approach to involving tenants.

- 6.3 Consisting of Tenant Board Members and representatives from TARAs, the creation of a new One Voice Forum will ensure tenants are at the forefront of ensuring the Strategy is delivered and will help strengthen our connections at a local level; informing our understanding of local issues, giving tenants a voice about what happens in their homes and neighbourhoods.
- 6.4 The Building Safety team are currently developing how we engage with tenants about the safety of their homes through a draft Building Safety Resident Engagement Strategy contained at Appendix B of this report.

This is the first of its kind for St Leger Homes and will ensure tenants living in communal and high rise building in particular, are involved and engaged in the safety plans for their homes and buildings. This document is currently being consulted on and when completed, will fall under the Tenant Voice Strategy.

7. Procurement

7.1 There are no procurement implications contained in this report or the Tenant Voice Strategy

8. VFM Considerations

8.1 Value for Money (VFM) considerations are a key feature of the service reviews that tenants will carry out as part of their scrutiny activities throughout the year. Any VFM concerns will be highlighted in the reports which are presented by TRIP to Performance and Improvement Committee and appropriate responses will be identified. The Tenant Voice Strategy sets out the intention for tenants to play a prominent role in the procurement of services and contracts.

9. Financial Implications

9.1 The Tenant Voice action plan contains commitments to provide expenses and incentives to promote tenant engagement. This is likely to be contained within existing budgets. In the event of additional financial requirements, this would be presented to EMT as required. The introduction of the new social housing regulations and the new inspection regimes may also have financial implications, although the precise nature of these are as yet unknown.

10. Legal Implications

10.1 There are no specific legal implications arising from this report or the Tenant Voice strategy.

11. Risks

11.1 The risks of not having a fit for purpose strategy to engage with tenants and effective mechanisms for tenants to influence policies, decision-making and service delivery are obvious and have always been central to the work of St Leger Homes

Following the introduction of the Housing White Paper and the aims for greater tenant empowerment as well as stronger regulation and a more powerful Ombudsman, the need for an effective Strategy to involve tenants is greater than ever.

12. IT Implications

12.1 There are no specific IT implications arising from this report or the Tenant Voice strategy. However, digital improvements as set out in the Communication Strategy will help deliver the aims of the Tenant Voice Strategy.

13. Health, Safety & Compliance Implication

Please state if there would be any Health, Safety and Compliance impacts from any proposals detailed in the report.....

13.1 The Housing White paper sets tenant and building safety squarely within its expectations of social housing providers. Having accessible and effective methods to give and receive information to tenants, as well as opportunities to shape and inform policy and service development is critical to keeping tenants safe and secure in their homes.

The Tenancy Voice Strategy is fundamental to our success in achieving this.

14. Consultation

14.1 Consultation has been carried out on this Strategy, the details of which are contained in section 5. Further consultation will continue as the strategy and our approaches develop.

15. Diversity

15.1 The more diverse and reflective of our communities our tenant involvement activities are, will determine how productive our relationships are in the future.

The Tenancy Voice Strategy will continue to develop this ethos and seek opportunities to welcome those tenants from a range of different backgrounds and communities to enrich the services offered to our tenants now and in the future.

16. Communication Requirements

16.1 The Strategy will be communicated widely and in cooperation with our Communications colleagues at St Leger and through those of our key partners.

17. Equality Analysis (new/revised Policies)

Please ensure this section is completed and if 'Not Applicable' is used, give the reason why an Equality Analysis is not applicable.

17.1 An Equality Impact Assessment will be carried out once the content of the Strategy has been approved.

18. Environmental Impact

18.1 There are no specific environmental implications arising from this report or the Tenant Voice strategy.

19. Report Author, Position, Contact Details

19.1 Jennie Daly, Acting Head of Housing Management. Tel 62174

20. Background Papers

20.1 Appendix A Tenant Voice Action Plan Appendix B Draft Building Safety Resident Engagement Strategy.



2022 - 2026

TENANT VOICE STRATEGY St Leger Homes of Doncaster

220

Providing homes in neighbourhoods that people are proud to live in



CONTENTS

FOREWORD DAVE RICHMOND	PAGE 4
FOREWORD DAVE WILKINSON	PAGE 5
INTRODUCTION TO THE STRATEGY	PAGE 6
NATIONAL AND LOCAL CONTEXT	PAGE 7
Doncaster	Page 8
St Leger Homes	Page 9
STRATEGY OVERVIEW	PAGE 11
Why have a Strategy	
Who is it for?	
Our shared vision & Key Commitments	Page 12
Links to other Strategies	Page 13
OUR TENANT VOICE MODEL	PAGE 14
Inform, Involve, Consult, Collaborate	
How the Model Works	Page 16
Ways to be involved	Page 16
Procurement and social value	Page 19
Key Achievements so far	Page 20
Ensuring tenant involvement is attractive	
and accessible to everyone	Page 21
Training	Page 22



CONTENTS

A STRATEGY FOR EVERYONE	PAGE 23
Equality, Diversity and Inclusion	
OUR SUCCESS	PAGE 24
How will we know if it's working?	
Underpinning our 5 Key Commitments	
Monitoring and evaluating progress	
APPENDIX A	PAGE 25
1. Widen the opportunities for more of you	
to be able to be involved	
2. Ensure you are at the centre of decision-	
making at every level; influencing	
services across the organisation.	Page 26
3. Support you to gain the knowledge,	
experience and confidence, so you feel	
your contribution has value and impact.	Page 27
4. Create a culture of mutual trust and	
transparency so that you can question	
and challenge effectively.	Page 28
5. Ensure the environment is right so that	
Involvement is everyone's business.	Page 29

FOREWORD

Welcome to our new Tenant Voice Strategy. I hope you find it an interesting read – but more importantly, I hope it reassures you that St Leger Homes is totally committed to making sure that the views of our tenants are taken seriously and significantly influence our thinking and what we do in practice.

We are not here to generate a profit or produce dividends for shareholders; as a local authority owned housing company we exist to serve you; listening to your needs and doing our best to meet them is central to what we are about.



Dave Richmond - Chief Executive

As the Chief Executive, I am determined that St Leger Homes see our tenants as our first and most important priority. In part it was this mindset that helped my last employer to become the first organisation in the country to be awarded the Tenants Participation Advisory Service exemplar status in recognition of the organisations commitment to listening and acting upon tenants views. St Leger Homes will do just the same.

I have been impressed by the work that St Leger Homes do to ensure people feel safe and secure in their homes and how we engage with our tenants to seek out and consider ways to improve tenant engagement and the services that we deliver.

The best landlords engage well with their tenants and listen to them with respect and effective engagement is key to this. Tenant engagement and ensuring that there is a robust framework in place to allow all tenants to have a voice is fundamental to St Legers Homes and understanding what tenants need to help shape and improve services.

I am happy to be part of the delivery of the new Tenant Voice Strategy to enable St Leger Homes to improve the ways we ensure tenants are at the heart of what we do and that we embed tenant involvement across the whole organisation.

Dave Richman

FOREWORD

Before joining the St Leger Board in November 2019. I worked for Doncaster Council for over 36 years, retiring as an Assistant Director. I now have the privilege of Chairing the Board of Directors. I am committed to driving St Leger Homes to be an organisation that provides the best possible services to its tenants and the people of Doncaster.

The Board of St Leger Homes is made up of 11 members, an independent Chair, three tenants, three independents, three Councillors and the Chief Executive and we all share the determination to do the best we can for our tenants.



Dave Wilkinson - Chair of the Board

The Government have recently issued a White Paper which stresses the importance of landlords responding to their tenants. Whilst the Board realises we can always improve, we have always been committed to consulting tenants, listening to their views and acting on what we hear. This strategy seeks to ensure we maintain this and that we become a trusted housing provider that treats all tenants with respect.

I am happy to welcome the Tenant Voice Strategy to ensure that the mechanisms that we have in place to capture the tenants voice is strengthened, to continue to provide homes in neighbourhoods that people are proud to live in and the Board plays a key part within this role.

Dave Wilkinson



INTRODUCTION TO THE STRATEGY

This Strategy has been refreshed to set out our plans over the next 5 years as to how you will have greater influence over the way in which decisions are taken about your homes and the services provided to you, as well how you are informed and equipped to scrutinise, challenge and hold us to account.

These plans have been designed to take into account what you have told us you expect in terms of how you are involved:

- To be involved and engaged using new, more convenient ways to keep in touch as well as the tried and tested methods
- To have a clear picture of what is happening across the organisation as well as in your local area and in their homes
- Have access to training to equip you to challenge and ask the right questions
- Being able to see the value of your contributions so more tenants can be involved, with fewer obstacles to doing so



"I have been involved for quite some time now. I find this invaluable as it not only allows me the right to voice my opinion but also helps me to have a better understanding of how the business operates"

Mo - Trip Member

We have pledged to deliver these ambitions through the Tenant Voice Model to Inform, Consult, Involve, and Collaborate and by delivering on 5 Key Commitments.

Tenants have been involved throughout the development of this Strategy and the views and aspirations expressed have been reflected in it. Particular regard has also been given to the Social Housing White Paper and also the Tpas National Tenant Engagement Standards.

St Leger Homes has a long track record of involving tenants in a variety of different ways to suit individuals, as well as tenants playing a key role in the Governance arrangements of St Leger Homes. But we don't intend to stand still and so this Strategy will evolve over time; building on the good work we already do with you. To ensure continuous development, the strategy will be reviewed at least every 3 years.

NATIONAL AND LOCAL CONTEXT

Involving you in how St Leger Homes is run and services are delivered makes good business sense - it helps us plan for the future by knowing what matters most to you and by listening, we improve satisfaction and reduce complaints.

Hearing the voices of tenants has always mattered, but never more so than in the aftermath of the Grenfell tragedy. This Strategy fully embraces and will be instrumental in delivering the principles of the Government's Social Housing White paper; ensuring that you are safe, listened to, live in good quality homes, and know what to do when things go wrong.



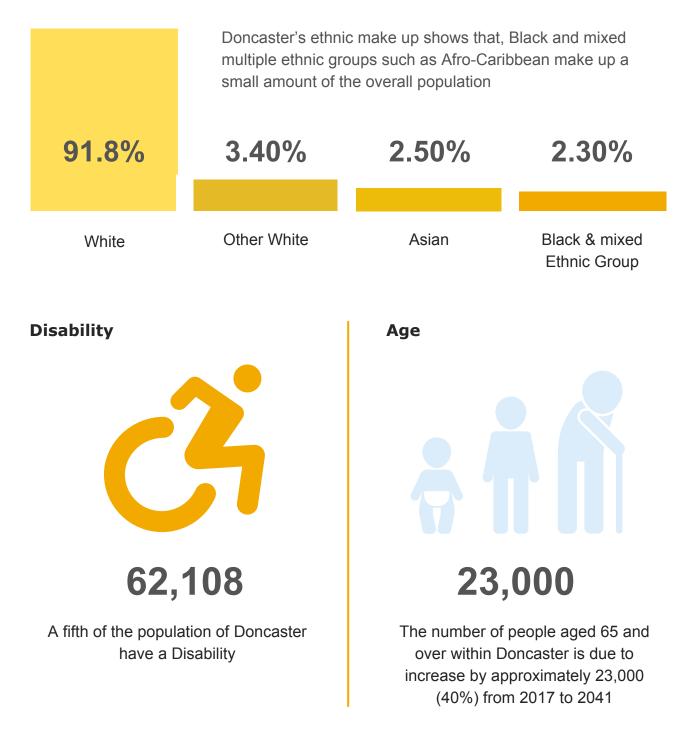
"I decided I wanted to play a bigger part and get involved, seeing things from a tenants point of view and expressing this whenever possible."

Betty - Chair TRIP

DONCASTER

Doncaster is located in the centre of South Yorkshire and with a population of 310,542 is the largest geographic metropolitan borough in England.

Ethnic Groups



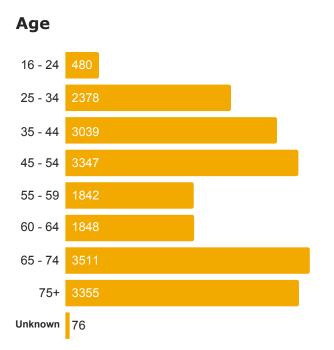
ST LEGER HOMES

St Leger Homes is an Arm's Length Management Organisation (ALMO), established in 2005 to manage the Council's housing stock.

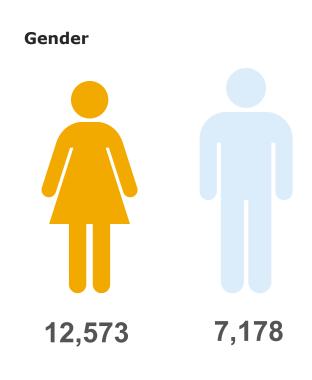
Managing a diverse portfolio of over 20,000 council homes, shops, community facilities, garages, Gypsy and Traveller sites, and other residential sites, we also manage properties on behalf of private sector landlords via our St Leger Lettings service.

St Leger Homes carries out all landlord operations as well as the Council's statutory homeless function and administering the Councils allocations policy and managing the Doncaster HomeChoice scheme, advertising Council, Housing Association (Registered Provider) and Private Rented homes.

Our Board of Directors which includes three tenant representatives ensures that St Leger Homes is well managed and takes decisions that promote the long-term success of the company, our tenants and the local area.



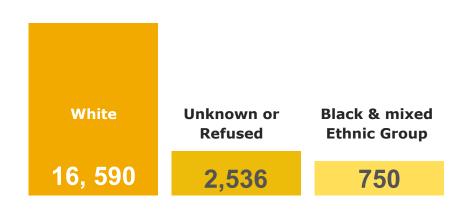
This diagram shows the age breakdown of tenants. More than a third of tenants are aged over 65 years and a further third aged 35-54. Just 2% of tenants are aged 18-24 and 44% are aged between 25 and 54 years.



Currently around two-thirds of tenants are female as shown above

Ethnic Background

The profile data we currently hold shows that our tenant ethnic make up has changed slightly with an increase in White British from 16,105 and a decrease in BAME customers. There are still 2,536 tenants who declined to answer



Disabilities

The data we currently hold shows that around 23% of tenants told us they have a disability. Around 28% of the tenants who told us they have a disability, reported issues of mental ill-health.



"Through volunteering, I have made a great circle of friends and colleagues that act as a fantastic support network."

Ron - Secretary TRIP

STRATEGY OVERVIEW

WHY HAVE A STRATEGY?

A Strategy helps us plan and set goals and priorities to get us to where you want and expect us to be. It helps us stay focussed on what is important to you and sets our vision and the direction we need to take.

WHO IS THE STRATEGY FOR?

This Strategy is primarily for you - the tenant, as well as St Leger Home's Leaseholders, prospective customers, our stakeholders and staff.

As a tenant, your involvement must be front and centre to any service development or change from the start. For this to happen effectively, we will ensure that our staff are willing to listen, explain and engage you in all aspects of their work.

OUR SHARED VISION & KEY COMMITMENTS

Our vision is that you are well informed, involved in and actively influencing the services we provide and how we provide them to you, so that we become an organisation recognised for this.

To achieve this and deliver what tenants have told us they want, this Strategy makes 5 Key Commitments to:



LINKS TO OTHER STRATEGIES

This Strategy cuts across every level of the organisation and should be the starting point of any planned change or improvement.

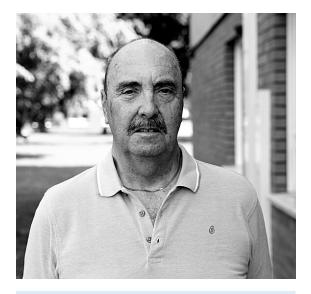
Only by actively seeking your views and listening will we make sound, well-reasoned decisions that sit well with you. It's the measure of a good business and will help us learn how to do things better, get it right first time, reduce complaints and increase the satisfaction levels you have in services provided by us.

Whilst this Strategy is fundamental to how we develop as an organisation by working with you, it is by no means the only measure of how our organisation is changing and improving. This Strategy is particularly supported by our Communications Strategy, Customer Access Strategy and Equality Strategy.

This Strategy also supports the objectives set out in our Corporate plan 2019-2024 to:

- Ensure all our homes are modern, decent and energy efficient
- Support our tenants to lead successful and fulfilling lives
- Be a nationally recognised housing services provider
- Deliver the aims of Doncaster Growing Together through innovation and partnership

This Strategy has also been significantly influenced by the aims of the Social Housing White Paper and the Tpas National Tenant Engagement Standards and framework to ensure that your voices and experiences are heard and understood to help us in providing safe, good quality homes and neighbourhoods and know how to tell us when we don't get it right.



"I wanted to be part of the changes and I knew you have to be in the meetings, not outside being critical and passing up the chances to make a difference."

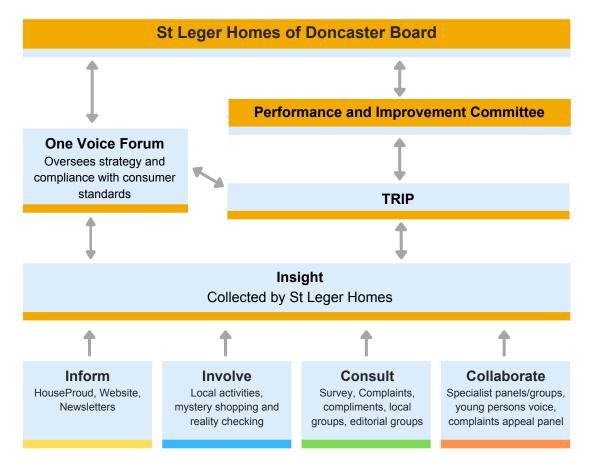
Rodger - Vice Chair TRIP



OUR TENANT VOICE MODEL *INFORM, INVOLVE, CONSULT, COLLABORATE*

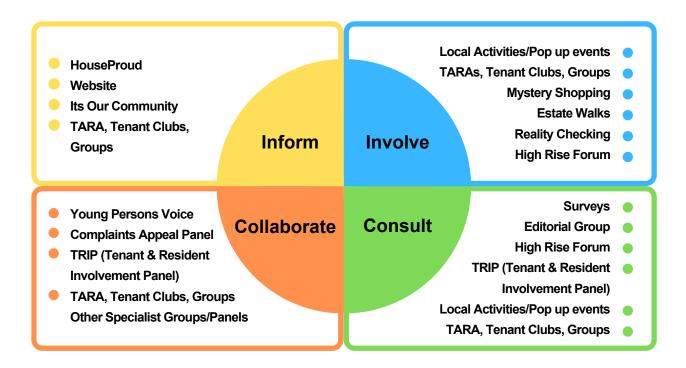
Our Tenant Voice Model is shown below and sets out the framework for you to be involved and illustrates how your views, opinions and aspirations will be used to help shape, inform and influence decisions at the highest level.

We have a dedicated Customer Involvement team to help nurture relationships with tenants who want to be involved and to ensure our positive culture of involving tenants runs through all aspect of how we develop and deliver services throughout the organisation.



HOW THE MODEL WORKS

The Tenant Voice Model shows the ways in which you will be informed, involved in, consulted on and collaborated with to have your voice heard and your views expressed in whichever way suits you.



WAYS TO BE INVOLVED

A variety of involvement opportunities form part of our Tenant Voice Model and have evolved specifically around what you, our tenants have told us. Some of you are able to give a significant and regular time commitment, while others want to be able to dip in and out on issues that affect you, when you have the time.

In addition to the range of involvement opportunities, we also listen to your voice through other ways such as surveys we carry out, the complaints and compliments we receive, the satisfaction data we collect and through our interactions on social media.

We are also committed to ensuring that those of you who become or are already involved gain wider benefits, some of which can sometimes be overlooked. These can include increasing knowledge and learning new skills, networking with other tenants and organisations, building friendships and feeling more closely connected to your communities. Above all, we want those involved to enjoy their roles, see the value of their contribution and feel their views are respected.

"I was delighted to serve on the St Leger Board for 12 years as Vice Chairman, which highlights the determination of the company to have a tenant`s voice at the highest level"

Rodger - TRIP Member

The ways in which you can be involved will evolve and change over time, but currently they include;

Tenant Board Members

The Board of St. Leger Homes is made up of 11 members; an independent Chair; three Tenants; three Independents; three Councillors and the Chief Executive. Tenant board members play a key role in providing governance and strategic oversight at an executive level, with an absolute focus on providing the best possible service to its tenants.

The public are also invited to attend all meetings of the board which are held on a hybrid basis so people can attend in person in our Boardroom, or join virtually via Microsoft teams. Papers from our Board meetings are published on our website for anyone to read.

Get Involved Group (GIG)

GIG is our core group of tenants who have volunteered to be involved as much or as little as they can commit to – from being our eyes and ears out in the community through mystery shopping to attending meetings or just doing something with a spare 5 minutes at home – a snap survey or answering a sounding board text.

In many ways, they are the engine room of our Tenant Voice Model. Volunteers usually get involved either through word of mouth, reading HouseProud or through our positive engagement events and estate walks.

The Tenants and Residents Involvement Panel (TRIP)

TRIP usually consists of around 7 members and is open to those of you who want to take a closer look at how St Leger Homes performs and delivers services to tenants and make recommendations for improvements. The group carries out service reviews to scrutinise services that we provide. The panel is run by tenants and residents and report their findings to the Executive Management team and the Performance and Improvement Committee, who in turn report to Board. The Committee may also commission TRIP to review a particular service or aspect of performance.

Young People's Voice

This group is for those of you aged up to 25 years of age who want to have a say in shaping our services. These young people may also be active in their schools and communities as well as being part of this group and also taking part in any of our other groups, newsletter writing, our community ambassador project and training and development opportunities.



"Volunteering for Young People's Voice is an amazing opportunity for young people to make their ideas and opinions heard in the wider community."

Jemima - Young Person Voice panel

One Voice Forum

Feedback from tenants has highlighted that dialogue on local issues reflective of all areas, needs to be strengthened. The Forum consists of the 3 Tenant Board members, representatives from TARAs as well as other involved tenants; ensuring that tenants are able to monitor the implementation of the Tenant Voice Strategy as well as providing links for TARAs and other tenants to directly feed into decision-making in a more direct and consistent way. The One Voice Forum would give a focus to local issues, projects and ideas,

High Rise Forum

The High Rise Forum is open to tenants and residents living in high rise properties and provides an opportunity to meet your needs and expectations. Living in high rise properties can present us with unique issues to consider and it is important that we listen closely to those of you who live there. It is also an excellent way to keep residents informed about any planned works or improvements and to share ideas amongst the group.

A **Resident Engagement Strategy** specifically designed for residents living in our high rise properties has been developed through the High Rise Forum.

Tenants and Residents Associations (TARAs) and Tenant Clubs

Our TARAs and Tenant Clubs are activists in their communities who have a common goal to improve their local area and keep people connected and are diverse in nature and purpose. TARAs are more formal groups with a committee and structured meetings, whilst Tenant Clubs are more informal groups. Both tend to be well-connected to the people and businesses in their area. St Leger currently supports 22 TARAs and 29 Tenant Clubs throughout the borough.

Editorial Panel

Consisting of around 45 members, the panel help us ensure our letters, communications and publications are accessible, jargon-free and understandable. In most cases, documents can be sent online and comments and responses passed back in the same way or by giving us a call about any changes recommended.

Consultation events & Focus Groups

Often held as pop-up or special interest events, these help shape and inform our thinking around changes to services based on what you tell us. Usually held in the form of in-person, virtual or hybrid group meetings.



"I feel my voice is important as a tenant regarding the area where I live and we should get involved in local decisions for our future."

Brenda - TRIP Member

Complaints Appeal Panel

Usually consisting of around 8 members who are interested in ensuring we use complaints as an opportunity to learn when we get it wrong. The role of the panel is to determine complaints which have reached the appeals stage of the Complaints Procedure, to ensure compliance with the Complaint Handling Code and our own policies as well as identifying themes and communicating what has been learnt. The panel members are trained and supported by the Customer Relations Team.

Surveys

Used to get your feedback on ideas, plans or services and can be done online, telephone, text message or email. Depending on the purpose, this may involve detailed surveys, a few questions or sometimes just a Yes/No answer is all that's required. If the purpose is to gain views on a specific project, then surveys will be carried out with those directly affected. Otherwise, if it's a general topic then GIG may be used.

Mystery Shopping

We use any measure of dissatisfaction or complaint as an opportunity to learn and improve. However, testing we've got it right before we get a complaint is a much better way to learn. Mystery shopping is an excellent way of understanding the customer experience. Our tenant volunteers give us feedback on their experiences when using our services, sometimes in real-life situations and sometimes undercover! Typical areas of testing includes staff conduct, repairs, call-handling etc.

Reality Checking

Similar to Mystery shopping, tenant volunteers will test reality against our service standards. For example, testing whether a property is ready for letting and meets the standards we promise for new tenants. This involves Volunteers viewing digital footage of these properties before they are let and providing feedback to our teams as to whether the standard was met with regards general standard of repair, cleanliness, décor etc. and recommendations for improvements.

Estate Walks

Estate walks take place on a regular basis across all areas of the Borough and are publicised to encourage tenants and residents to take part. These are an important way of monitoring and improving standards in our neighbourhoods and an opportunity for tenants to tell us about what is happening in their area and where improvements are needed – it's often the first rung on the ladder to being involved.

Procurement and social value

Put simply, social value is how we measure the value St Leger Homes provides to its tenants from an environmental, economic, and social perspective. We recognise the benefits that are gained from wider social value and have been involved in measuring this since 2014, publishing our Social Audit statements each year.

We plan to actively involve tenants in procurement activities, which could include shortlisting suppliers and contractors, helping to put together tenders and working on procurement policies, as well as scrutinising procurement activity.

Key Achievements so far

Whilst it is important to look ahead to the future, it's also helpful to reflect on what has been achieved so far.

Since our last Strategy was launched in 2018, we have worked with tenants to:

- Increase our digital offer to make it easier for tenants to get involved
- Increase and improve how we engage with our young people
- Develop the Get Involved Group (GIG) for tenants to get involved at a level that suits them
- Improve how we publicise and market the benefits of tenant involvement which has attracted more volunteers than ever before
- Embark on our accreditation with Tenant Participation Advisory Service (Tpas)
- Develop new themes aligned with the issues important to tenants and identify dedicated resources to support them
- Develop Tenants and Residents Involvement Panel (TRIP) to increase membership, skills and effectiveness
- Ensure TRIP service reviews are now reported to and can be commissioned by the Performance and Improvement Committee
- Set up a tenant-led Complaints Appeal Panel
- Create a High Rise Forum to engage and involve tenants living in High Rise in the management and safety of their homes
- Further develop tenant led reality checking to expand this to wider services
- Assist tenants and residents to set up new community groups and Tenants and Residents Associations (TARAs) and assist with funding bids
- Deliver positive activities with groups and volunteers, supporting a range of activities through the Positive Activities Group Funding
- Increase community cohesion and confidence through new groups and building capacity and skills to be self-sufficient

Ensuring tenant involvement is attractive and accessible to everyone

We are clear that you should be able to be involved in whichever way suits you. This may depend on how much time you can commit to giving or you may make decisions based on more practical issues such as child care, being able to travel, having a disability, having access to a computer or Wi-Fi.

Whatever the obstacle, we know this could be the difference between your voice being heard or not.

We will make sure that the range of opportunities for you to be involved can be accessed in a variety of different ways so that you are not disadvantaged and don't miss out. We will ask you how you want to be involved and whether there are any barriers to you becoming more involved.

We will also make certain that financial considerations are not an unintended barrier. We will reimburse all reasonable 'out of pocket' expenses and will publish how we can financially support you, groups and individuals to play an active role.

The Customer Involvement Team also actively promote and give practical support to groups to apply for grants and external funding opportunities to help them carry out this crucial role within their communities.

We also look for different ways in which we can generate social-value funding whether that is through our contractors or by providing staff via our St Leger Homes staff volunteer days – all converted into supporting community-led projects.

We also provide some specific financial support, including;

- Creating an incentive for you to get involved, volunteers on our Get Involved Group (GIG) can earn points proportionate to the engagement activities they take part in and to reflect the time they have given. The points are calculated over a six-month period and can be exchanged for high street gift vouchers.
- Tenant and Resident Associations (TARAs) are primarily self-funding. However, those who hold Annual General Meetings and have their accounts in order are eligible for a £50 grant help towards the running of the TARA. The majority of the groups and involvement activities are held within our communal halls, the hire and utilities are free of charge in an effort to further support these much-valued groups.
- St Leger also encourages all manner of Community Groups to access our Positive Activities Grant (PAG) where funding up to the value of £250 per group is available.
- Our Tenants and Residents Involvement panel (TRIP) has a budget to cover their training, stationary, refreshments and travel expenses.

We evaluate how this money is being spent and will discuss with tenants and groups to identify better ways in which we can provide support in the future – both practical and financial, in order to help deliver specific projects or achieve jointly-held aims in the community.

We also recognise the amazing efforts of those exceptional groups and individuals in our communities. For example, we hold an Annual Tenants Awards event to celebrate the time and effort given by individuals or groups and the pivotal role they play in creating strong, sustainable and connected communities.

We also nominate individual tenants for local and national awards in recognition of the unique contributions they have personally made both to St Leger Homes and their communities.



"Volunteering keeps me active and engaged with local issues, and gives me the chance to contribute ideas and suggestions"

Ron - TRIP Member

Training

We recognise that having the appropriate knowledge to play an active role is crucial. As well as ensuring you have access to information on how St Leger is performing, we will also develop and publish a programme of training for those of you who want to be more involved.

In addition, we also know that many of you have skills and expertise that we lack and which would be of enormous help to St Leger Homes and other tenants. We should make every effort to tap into and use these for the wider good and where possible, encourage and support these to be shared with other tenants and groups.

We currently carry out training for TARAs and community groups, for example Food Safety Level 2 training is offered to all groups using our communal halls to ensure that they are following the correct Environmental Health standards. We believe the training for groups can be broadened and will consult them on this.

We will ensure we extend our current training programme across all areas and in particular around digital and other skills that are useful and transferrable into other aspects of our lives.

"I get great satisfaction in playing a small part in improving the way tenants are viewed and heard"

Betty - Chair TRIP

A STRATEGY FOR EVERYONE

EQUALITY, DIVERSITY AND INCLUSION

We will ensure that this Strategy and our tenant involvement activities are accessible and appropriate to give each person the same chance to do well, have their voice heard and feel part of their community. We recognise that this may sometimes mean we have to do some things differently for some people.

To achieve this, we must make greater efforts to collect and make better use of the insight data we collect to learn more about our tenants and those living in our homes, so we are able to meet the diverse needs of our tenants and understand how to foster meaningful and helpful engagement.

Alongside our colleagues who are working to improve Equality and Diversity matters, our Tenant Voice Action Plan contains a number of actions to help us learn more about the barriers that some of you may experience and look for ways to overcome these. We will do this by connecting directly with a range of diverse groups and individuals.

We also expect all groups and individuals involved with tenant involvement to promote equality and encourage participation from all of parts of our communities.

Through St Leger Home's Equality Strategy and our Equality, Diversity & Inclusion Annual Report, we are able to monitor and report regularly on the equality, diversity and inclusion information we hold about our tenants, customers and workforce and our plans to use this to better meet people's needs.



OUR SUCCESS

HOW WILL WE KNOW IT IS WORKING?

Our involvement structure is designed to tell us if things are working, if we are meeting your needs and if we are keeping our promises to you. In short, we will know we are delivering, if you tell us we are and are happy with the services you receive.

PLANS TO UNDERPIN OUR 5 KEY COMMITMENTS

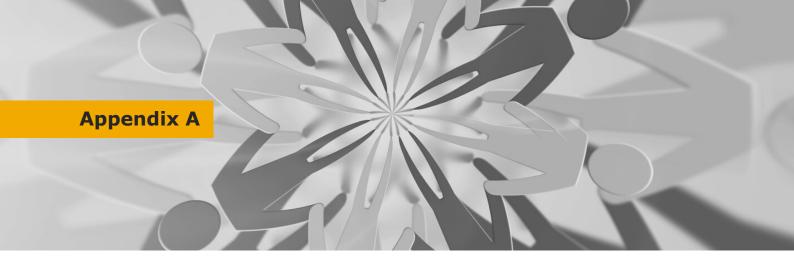
Taking into account what our tenants have told us, we have set out a number of actions to underpin the 5 Key Commitments to realise our shared ambitions. These are contained in a new **Tenant Voice Action Plan. (Appendix A)**

MONITORING AND EVALUATING PROGRESS

The implementation of this Strategy and the progress of the Tenant Voice Action Plan will be monitored by tenants through the One Voice Forum. How the Strategy translates into our performance and services being delivered to tenants will be monitored by TRIP and the Performance and Improvement Committee to demonstrate outcomes and impact, who in turn will report to our Board.

We will also develop a suite of Key Performance Indicators and Service Standards focused on service improvement outcomes and impacts, to track progress against meeting the 5 Key Commitments.

We hope that this Strategy will encourage more of you to become involved in the issues that affect you and to see the value in expressing your views and opinions to help us to be the best landlord we can.



COMMITMENT 1

WIDEN THE OPPORTUNITIES FOR MORE OF YOU TO BE ABLE TO BE INVOLVED

- Produce jargon-free, clear communications and no nonsense guides
- · Publicise how we can support tenants to be involved
- Provide a broader range of opportunities for tenants to be involved in ways that suit them avoid a `one size fits all`
- Develop modern, digital ways to stay in touch including instant polls, sounding boards, etc
- Provide regular feedback to illustrate how tenant views and contributions have been acted on
- Develop more opportunities for self-service with quick, easy ways to rate services and give us feedback
- Make tenant involvement rewarding, sociable and enjoyable -celebrating our tenants and successes
- Review the diversity of our tenants and make better connections to underrepresented tenants to understand their needs
- Carry out an Equality Impact Assessment of this Strategy and the Tenant Voice Model
- Achieve Tpas Accreditation
- Involve tenants in the production of key policies and procedures



COMMITMENT 2

ENSURE YOU ARE AT THE CENTRE OF DECISION-MAKING AT EVERY LEVEL; INFLUENCING SERVICES ACROSS THE ORGANISATION

- Develop a One Voice Forum so tenants can influence decision-making, monitor and oversee the Tenant Voice Strategy; keeping us connected to local issues
- Develop a Tenant Involvement Charter to set out what tenants and tenant groups can expect from us when they decide to be involved
- Develop the involvement arrangements to ensure tenants of High Rise properties are monitoring the delivery of the Building Safety Engagement Strategy
- Develop the role of tenants in our procurement arrangements
- Tenants genuinely involved in shaping services, setting standards, as well as monitoring and scrutinising these
- Carry out an annual survey of our tenants to keep us focussed on the issues that matter
- Develop our communications through dedicated Communications Plan and our community champions
- Tenant-led service reviews commissioned by and reporting to the Performance and Improvement Committee and Board
- Hold regular meetings with tenant groups, supported by local area teams
- Ensure tenants play a key role in our Governance and scrutiny
- Develop and facilitate special interest groups and consultation events on the issues that matter to tenants

Appendix A

COMMITMENT 3

SUPPORT YOU TO GAIN THE KNOWLEDGE, EXPERIENCE AND CONFIDENCE, SO YOU FEEL YOUR CONTRIBUTION HAS VALUE AND IMPACT

- Extend our reach by improving our website and other media channels to display useful, relevant and up to date information
- Review the annual awards and accreditation plan to support our aim of being a nationally recognised provider of housing services
- Publish the support we provide to ensure groups and individuals can play an active role
- Develop and publish a programme of training for involved tenants, TARAs, etc
- Carry out a skills audit of GIG to explore opportunities for peer mentoring and training
- Use the skills and experience of our involved tenants to optimum use and offer a programme of training, mentoring and networking opportunities to strengthen their contributions



COMMITMENT 4

CREATE A CULTURE OF MUTUAL TRUST AND TRANSPARENCY SO THAT YOU CAN QUESTION AND CHALLENGE EFFECTIVELY

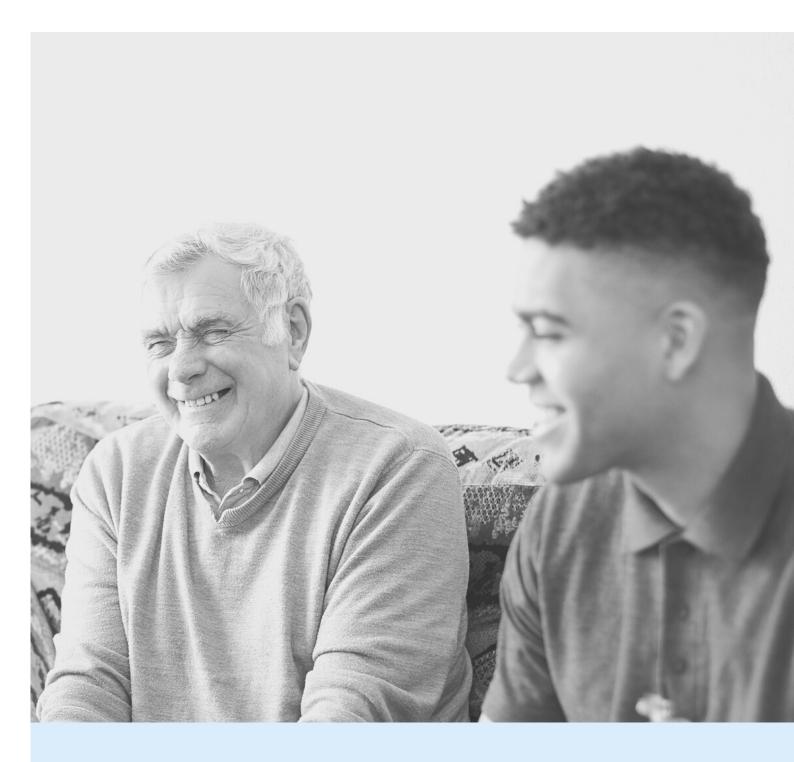
- Ensure tenants are at the heart of our Governance arrangements
- Develop a suite of Key Performance Indicators and Service Standards to deliver on the Tenant Voice Plan of Action
- Publish key performance, financial and budgetary information regularly and clearly to tenants
- Embed a culture of listening to, responding to and learning from tenants
- Meet the objectives of the Social Housing White Paper for example in safety and compliance and the Tenant Satisfaction Measures and Standards
- Ensure tenants are equipped to be able to scrutinise aspects of service delivery and report back for improvements to be actioned
- Demonstrate how we can learn from complaints when we get it wrong and how tenants are involved in this
- Consult with tenants at least every 3 years on how to govern and scrutinise the organisation
- Ensure the Tenant Voice Strategy involves meaningful monitoring by tenants through the One Voice Forum
- Consult on and develop a One Voice Forum involving representatives from TARAs and GIG



COMMITMENT 5

ENSURE THE ENVIRONMENT IS RIGHT SO THAT INVOLVEMENT IS EVERYONE'S BUSINESS

- Ensure engagement is always a respectful and helpful experience
- Ensure all staff understand how they specifically can enhance the organisation's ability to hear the tenants voice and act on it
- Encourage staff and teams to report on how they have listened and responded to tenants views
- Carry out and review feedback from tenant satisfaction surveys across all services
- Using pre-tenancy and new tenancy opportunities to promote tenant involvement
- Encourage staff to use their Volunteering Days to
- Ensure tenants are fully involved in the initial project planning, delivery and monitoring of regeneration or other changes affecting them
- · Encourage and interact with tenants on social media, acting on what they say
- Ensure staff use their Volunteering Days to support local groups and projects, taking part in community-led projects





Inform Involve Consult Collaborate

Contact Us:

St Leger Court White Rose Way Doncaster DN4 5ND Tel: 01302 862862

1. Introduction and objectives

This is St Leger Homes Doncaster (SLHD) first Building Safety Resident Engagement Strategy. It focuses on High Risk Residential Buildings¹, as following the tragic fire at Grenfell Tower a new regulatory regime is being introduced for them, many of the principles will apply to other buildings regardless of height. The strategy sets out our approach to resident engagement relating to building safety for new and existing buildings from 2022-2025 and should be considered the first steps on the path towards meaningful engagement with residents about the safety of their homes. The key aims of this strategy are to:

- Ensure residents are empowered to play an effective role in ensuring their building is, and continues to be, safe;
- Set out the ways in which residents can get involved and the benefits to them from participating in engagement on building safety;
- Identify the building safety information residents wish to be provided with;
- Identify the way in which residents wish to be provided with building safety information;
- Establish methods of improving our approach to engaging with residents in relation to the safety of their home;
- Engage staff with regards to importance of residents' rights to have a say in relation to their homes;
- Clarify our responsibilities and residents' responsibilities to ensure their homes remain safe.
- The strategy will be reviewed as part of our preparations for the Building Safety Bill (BSB) or as changes of legislation come into place, and in response to priorities identified by the building safety regulator.

2. Internal and external context

Following the tragedy at Grenfell in June 2017, the Government commissioned the Independent Review of Building Regulations and Fire Safety led by Dame Judith Hackitt, which was published in May 2018. In December 2018, the Government accepted all 53 of her recommendations.

SLHD has established the Building Safety Team with a view to implementing these recommendations. A large emphasis has been placed on how landlords engage with residents around building safety and this strategy seeks to outline the approach SLHD will take to engage with and involve residents in the safety of their homes.

In June 2019 the Government published a consultation document setting out how they plan to overhaul the system for high rise residential buildings through:

- clearer responsibilities for those building or managing these buildings;
- a stronger voice in the system and better information for residents;
- greater oversight by regulators; and
- tougher enforcement when things go wrong.

Although the timetable for the introduction of new legislation and implementation of the recommendations is not yet confirmed it is expected to be in place for March 2023 the spirit of this welcome direction of travel we have taken the decision to implement as many as possible of the recommendations in advance of their going through the legislative process.

¹A High-Risk Residential Building are those identified as in scope buildings within the Building Safety Bill, those greater than 18 meters or seven stories.

The Grenfell Inquiry – Phase 1 Report was published on the 30 of October 2019 with 16 recommendations for either landlords or the London Fire Brigade to review. SLHD has established a new Building Safety Team and we will be reviewing these recommendations and overseeing all required remedial work to our buildings.

3. Our approach

This strategy will detail our approach to engaging and involving residents in relation to building safety across all our homes. This strategy will be further supplemented by bespoke plans tailored to properties where there is deemed to be a need, setting out how the strategy will work in practice for each building.

It has been developed in conjunction with residents, adopting a culture of openness and transparency, to ensure it addresses their needs and requirements. It details what residents can expect in terms of communication and how they can get involved and raise concerns. To clarify there is a difference between building safety and building security. Issues around the security of a building may arise from the front door of the building being left open (for example). This may then impact on the safety of the building.

The following section outlines our intended approach to engaging with residents around building safety. There are three main strands:

- Information and understanding;
- Resident and landlords' responsibilities;
- Action to take in the event of a fire;

3.1 Information and understanding

3.1.1 Communication and engagement

We will use a range of ways to communicate with residents to cater for, as much as possible, the diverse needs of our residents. We will endeavour to make adequate provisions for residents, for example, who have a physical or visual impairment, have other disabilities or who do not speak Englishmrequest.

Examples of the way in which we can communicate with residents may include but is not limited to:

- At sign up
- Website
- Portal
- Notice boards
- App
- Text
- Email
- Letter
- Building Safety Forum to talk about building safety
- Video

We will also ensure we cater for residents who may prefer face-to-facemeetings to discuss the strategy and the specific action plan for their building. Following all meetings information provided will be delivered to each resident's home. If there are any significant changes to the strategy or action plan, we will update residents during their building meetings on an annual basis (or more frequently if required).

Where we have identified a serious issue with a building affecting the safety of all residents, we will keep residents updated on a regular basis in relation to any interim safety measures necessary, remedial works and further investigations that are required. These updates may be in the form of meetings and/or updates on our website and/or newsletters.

A fire action notice is installed within each building and it is our intention to provide a building safety certificate for each building (an example is provided with today's draft).

We will encourage residents to get involved in decision making relating to the safety of their building. If you would like to get involved, the Resident Engagement team welcome your input. The team can be contacted directly at <u>buildingsafety@stlegerhomes.co.uk</u>

Building safety is the responsibility of all residents, as well as SLHD as the landlord. While we will endeavour to ensure that all residents are aware of key building safety messages it is important that this is reinforced by residents. Where residents see one of their neighbours acting in a way that suggests they have not understood or remembered building safety information they should remind them of it as a matter of priority.

We will seek to work with residents to identify a process that we can implement to measure the success of this strategy and the satisfaction of our residents. One way of doing this may be a reduction in the number of occasions upon which we have to remove fire hazards left by residents in the communal parts of a building. We will commit to reviewing feedback from our residents to ensure we continuously improve the service we provide to them.

3.1.2 Clarity and accessibility of information

We will proactively provide all residents with the information they need to help them understand the protections that are in place to keep their building safe.

We will ensure that the information provided is sufficient, relevant and in a format that can be understood by residents. As a standard practice we will provide:

- The measures we have in place to mitigate potential fire and building safety risks to residents, e.g. fire precautions;
- Information for residents detailing how they can reduce the risk of fire in individual dwellings e.g. by not storing flammable materials;
- A process for reporting a fire risk and/or raising any other safety concerns;
- Procedures to follow where a fire occurs in the building, including for evacuation;
- The different roles and responsibilities of the accountable person, Building Safety Managerand residents;
- Key information such as the contact details of the accountable person and Building SafetyManager.

Residents will also be entitled to obtain further and more detailed information about the safety measures in their building if they wish and such information may include (but is not limited to):

- Full, current and historical fire risk assessments;
- Planned maintenance and repairs schedules;
- Outcome of building safety inspection checks;
- How assets in the building are managed, e.g. frequency of lift maintenance;
- Details of preventive measures, e.g. smoke alarms;
- Fire protection measures in place, e.g. sprinklers, fire dry risers ;
- Information on the maintenance of fire safety systems;
- The fire strategy for the building;
- Structural assessments;

• Planned and historical changes to the building.

We will implement a process for dealing with requests for information. We will aim to provide residents with the documents they request within 1 month.

Within this process we will provide guidelines to enable vulnerable residents to nominate an advocate, care-giver or representative who can request more detailed information on their behalf. We will not release draft reports, which by their nature are likely to be subject to change but will aimto release information as swiftly as possible.

Residents who have a concern about building safety can contact our Customer Services Team who willfollow our repairs process and arrange for a contractor to attend. Any resident who is not happy with the outcome and wishes to escalate the issue can submit a complaint. We will be looking to introduce a new role of Building Safety Manager, Officer and Surveyors, as outlined in the Hackitt report, who would / could deal with these issues.

3.1.3 How safety information should be provided at the start of the tenancy

At the start of every tenancy we will provide a fire action notice within the sign-up pack.

Within 6 weeks of a tenancy starting we will contact residents to discuss building safety and will answer any queries they may have at that point.

3.2 Resident and landlords' responsibilities

3.2.1 Supporting residents and landlords to understand their responsibilities

Residents have an obligation to work with us to keep their building safe and to let us know of any safety concerns they have identified following the process outlined in this strategy.

Residents are expected to provide reasonable access by allowing us to inspect and carry out necessary works for several types of safety inspections (such as fitting fire alarms) or undertaking fire and structural safety-related maintenance. Where information or access is required, we will provide the resident with reasonable notice. Where access is not provided, we will try several measures to gain access to the property with the final measure being legal action and forced entry. We will look to recover the costs of such legal action directly from the resident.

We have a zero-tolerance policy for residents leaving possessions in communal areas. Any items stored in communal areas may be removed and disposed without notification to the residents concerned.

Within our level one buildings which include all the high rise buildings and Milton Court, Jubillee Court and Hearstwood properties we follow specialised housing guidance which involves undertaking people-centred risk assessments to evaluate the needs of individual residents. This enables us to evaluate their specific situations, minimise risks and put in place specific measures accordingly (an example of this is to use visual fire alarms for residents who are hearing impaired).

We will establish specific vulnerabilities for residents within that scheme using a combination of data held on internal systems and questionnaires completed by each household. We will produce a PEEP (Personal Emergency Evacuation Plan) for the resident. The PEEP is held on site in a premise's information box which the fire brigade have access to in case of an emergency.

We will work with the local fire service to electronically provide any information about the

building they require.

In line with our process for reporting safety concerns, any legitimate concerns will be treated seriously, and remedial action will be taken to rectify the issue.

3.2.2 Empower residents to keep their buildings safe

We will ensure that residents are empowered to play an effective role in making sure that their building is, and remains, safe. This includes identifying and reporting hazards that may impact on the safety of the building and meeting their responsibilities to ensure their own safety and that of their neighbours.

Residents are encouraged to assess the needs of their household and any members of their family who may be vulnerable (such as young children or someone with a disability). They are encouraged to ensure they understand the action plan for their building so they know what they should do in the event of an emergency.

Upon advice from fire brigades we no longer provide fire safety equipment (such as fire blankets and fire extinguishers) within either residents' homes or in communal areas. The Fire Service advise that unless individuals have the relevant training on the use of fire safety equipment then they are encouraged not to attempt to fight the fire but to close all fire doors to contain the fire and follow the action plan for their building.

Residents are also encouraged to consider the wellbeing of their neighbours in the building and recognise that their actions may put the lives of others at risk. For example, residents should ensure they do not prop open any communal fire doors and they do not store items in the communal hallwaywhich may impede an escape route in the event of an emergency. Residents must seek permission if they wish to make any changes to their fire doors. Residents who smoke should ensure they do so in a safe place and fully extinguish their cigarettes afterwards. Barbecues and patio heaters should neverbe used inside buildings, on balconies or in close proximity to any flammable material, residents should not use wall paper strippers to close to the fire sprinkler heads in each flat. We would discourage the use of Chip pans in our buildings which if left unattended present a forseeable risk of fire and remind residents about the over use of extension leads which can present electrical safety issues.

Where residents see one of their neighbours acting in a way that suggests they have not understood or remembered building safety information they should remind them of it as a matter of priority. An example of this could be neighbours who are suspected to be hoarding, who are storing information in the communal hallway or neighbours who may be considered vulnerable. If residents are not comfortable discussing this with their neighbours, they should report it as a building safety concern to us.

3.2.3 Improving communications on safety (i.e. reporting safety concerns; works to the property)

We will work in partnership with residents to ensure that they are involved in decisions about their building's safety and, where possible, provide them with reasonable information on works due to be carried out to their property enabling them to have an opportunity to consult with us.

If any resident feels their concerns have not been addressed, they can follow our formal complaints process to escalate the issue.

3.3 Action to take in the event of fire

There is an action plan for each building with specific details for the action residents should take

in the event of a fire. This information is contained on a Fire Action Notice which are on the walls in every building.

All of our buildings are designed to keep residents safe. Buildings are compartmented which means that they are built in such a way to contain a fire within a single room or multiple rooms. This limits the spread of fire, smoke and flue gases. One of the key safety measures to aid compartmentation is fire doors. It is important that you do not make alterations to fire doors within your home and keep them free of obstruction which may prevent them from closing.

Fire Bridgades advise that it is best for residents to keep fire doors closed to contain a fire rather risking injury trying to fight a fire themselves.

Most tall buildings are designed to contain fire, smoke and heat within individual homes for a long enough period of time to enable the Fire Brigade to extinguish the fire. In such buildings it is safe for residents to remain in their home, as long as it is not affected by fire, smoke or heat, while it is extinguished. This is known as 'stay put' advice. For buildings where this is not possible we will advise of evacuation plans based on our fire risk assessments.

3.3.1 Understanding a building evacuation plan

A building evacuation plan means that all residents must leave the building and go to the assembly point for the building in the case of an emergency.

3.3.2 Understanding 'stay put' and when it should be used

All buildings which have been built in such as way as to contain a fire within one of the compartments of the building will have a stay put policy in place. Fire Brigades advise us that the best option for residents is to remain in their own homes, unless that's where the fire started or fire, heat or smoke has spread to their home, rather than trying to evacuate which may result in them being in more danger.

3.3.3 Understanding what "Next place of safety" means

Any residents required to evacuate their homes should go to the "next place of safety". This means you should move away from the building to a place of safety from a fire or any falling debris.

4.3.5 Evacuating a building safely

If residents are required to evacuate their homes, they must do so by walking to the safest and closestexit and/or stairway. Where possible, they should close any fire doors behind them. They should neveruse a lift to exit during a fire alarm activation. Once outside the building, residents must move away from the building and go nearest safest place.

The front of the building may be where the fire fighters and fire trucks will be operating. Residents must move away from the building and must not obstruct their access to the building.

If there is an incident occurring on the upper floors and glass is being blown out of the windows, the area below is the hazard zone where serious personal will happen. Residents must not remain in or near this area.

Once residents have left the building they must not re-enter until they are told to do so by the firebrigade.

4.3.6 Responding to fire alarms and contacting the fire brigade

If the fire or smoke alarm in your home sounds, call 999, ask for the fire service and follow their advice. If you hear the fire or smoke alarm sound in any communal area or a neighbour's home, call 999, askfor the fire service and follow the plan for your building.

ST LEGER HOMES OF DONCASTER LTD Company limited by guarantee registered in England Company Number 05564649		
BOARD Meeting		
REPORT		
Date	:	7 April 2022
Item	:	06
Subject	:	Equality, Diversity and Inclusion Strategy 2022 - 2026
Presented by	:	Mark McEgan, Director of Housing and Customer Services
Prepared by	:	Jackie Linacre, Head of Customer Services
Purpose	:	To approve the Equality, Diversity and Inclusion Strategy 2022 - 2026
Recommendation: That Board approve the Equality, Diversity and Inclusion Strategy 2022 – 2026.		

Company Number 05564649 A Company Limited by Guarantee Registered in England

To the Chair and Members of the ST LEGER HOMES OF DONCASTER BOARD

Agenda Item No. 06 Date: 7 April 2022

1. Report Title

1.1 Equality, Diversity and Inclusion Strategy 2022 - 2026

2. Executive Summary

- 2.1 The Strategy helps to support and renew our commitment to the delivery of the 5 overarching commitments contained in our Fairness and Equality Statement, as set out below, and includes a number of actions to deliver these by 2026:
 - To understand our customers and support their needs;
 - To ensure the organisation is a leader in inclusion and fairness;
 - To engage customers effectively, foster good relations and advance equality in our local communities;
 - To fulfil our safeguarding responsibilities to the highest standards;
 - To develop a progressive and diverse workforce, in a workplace free from discrimination and harassment;
- 2.4 From a customer perspective the focus remains on improving engagement with a range of diverse customers, working more proactively to ensure those customers from minority groups are provided with more opportunities to be involved in the services we deliver and how we deliver them.
- 2.5 From an employee perspective the Strategy sets the objectives to improve the extent to which our workforce reflects the Doncaster population by implementing positive action measures to ensure our workforce reflects the population of Doncaster and, whilst data is important to highlight the protected characteristics of our employees, to move to a more holistic view of inclusion, celebration of diversity of thought and belonging and being able to bring your 'whole self' to work.

3. Purpose

3.1 To approve the Equality, Diversity and Inclusion Strategy 2022 – 2026

4. Recommendation

4.1 That Board approve the Equality, Diversity and Inclusion Strategy 2022 – 2026.

5. Background

5.1 St Leger Homes is committed to ensuring the provision of quality services to all

our customers, ensuring we put the needs of our diverse customers at the heart of our work and that we strive to ensure our work environment is inclusive and welcoming.

- 5.2 The existing Equality, Diversity and Inclusion Strategy is due for renewal. The revised Strategy is attached at Appendix A for Board's consideration and approval.
- 5.3 The Strategy has been informed by discussions at EMT who considered a preliminary direction of travel document and by feedback from stakeholders. It takes into account our statutory obligations under the Equality Act 2010. It is linked to a number of cross cutting strategies, including the Communications Strategy, The Customer Access Strategy, The People Strategy and the Tenant Voice Strategy.
- 5.4 The Strategy contributes to the achievement of the overall objectives in our Corporate Plan that:
 - All our homes are modern, decent, safe and energy efficient;
 - Our tenants lead successful and fulfilling lives;
 - We will be a nationally recognised provider of housing services;
 - Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together.
- 5.5 The Corporate Plan specifically mentions that we will increase engagement with all the diverse communities across Doncaster and involve more people in shaping our services. Our Values and Behaviours specifically mentions treating everyone fairly and with respect.
- 5.6 The factors driving the Strategy are:
 - Fairness and Equality Statement;
 - Equality Act 2010;
 - Customer expectations;
 - Customer Involvement;
 - Social Housing White Paper (the Voice of the Customer);
 - Consumer Standards;
 - Recruitment and Retention;
 - It is the right thing to do
- 5.7 Consultation with our employees and customers has helped inform the final strategy, as has a review of our current position. This information is included at Appendix B for Board's information.
- 5.8 It is proposed that EMT receive 6 monthly update reports against actions with an annual report to Board. This will keep the reporting of this Strategy in line with the reporting of the People Strategy. The actions for delivery in Year 1 of the Strategy are attached at Appendix C.

6. Outcomes

- 6.1 The key outcomes to be achieved from the delivery of the actions in the Strategy are:
 - An organisation and Board that is more representative of the community we live in;
 - An increase in diversity of the Senior Management Team (SMT);
 - A culture where all individuals are happy and comfortable expressing their individuality and can bring their 'whole self' to work;
 - An increase in the number of diverse people making use of social housing and actively involved in influencing and shaping the services we deliver;
 - Services to all our tenants that are delivered fairly and equally to all.

7. Procurement Implications

7.1 Implications will be covered in any proposed future business case.

8. VFM Considerations

8.1 Implications will be covered in any proposed future business case. Ensuring we deliver services that meet the needs of our customers, right first time, means we will work efficiently.

9. Financial Implications

9.1 Where there are financial implications associated with the delivery of the actions in the Strategy these will be detailed in any proposed business case.

10. Legal Implications

10.1 We have a duty under the Equality Act 2010 to consider the needs of all individuals in our day to day work – in shaping policy, in delivering services, and in relation to our own employees.

11. Risks

- 11.1 Some projects may require specific funding and definite costs will not be known until after initial investigations. This may mean that notwithstanding their inclusion as an action in the strategy, some projects may not be implemented as first envisaged.
- 11.2 Some of the actions are reliant on engaging with our diverse communities who may not wish to engage. This may impact on the successful delivery of some of the actions outlined in the Strategy.

12. Health, Safety & Compliance Implications

12.1 There are no health and safety implications associated with this report.

13. IT Implications

13.1 Where there are IT implications associated with some of the proposed actions. These will be considered in more detail as and when each separate project commences and regular reports will be made to the Digital Transformation Board to update on progress.

14. Consultation

14.1 Consultation has been undertaken with internal and external stakeholders using a number of different forums including, TRIP, Young Person's group, Board strategic planning event, Heads of Service, Surveys, employee representatives, Minorities Partnership Board and Doncaster Inclusion and Fairness representatives. The feedback from consultation is attached at Appendix B and has been used to inform the final Strategy and actions to be delivered.

15. Diversity

15.1 The Strategy will support improved communication with our diverse customers.

16. Communication Requirements

16.1 Communication with employees and customers will take place as the various actions progress.

17. Equality Analysis (new/revised Policies)

17.1 Not required.

18. Environmental Impact

18.1 Not applicable for this report.

19. Report Author, Position, Contact Details

19.1 Jackie Linacre Head of Customer Services 01302 862262

20. Background Papers

20.1 Appendix A – Equality, Diversity and Inclusion Strategy 2022 – 2026 Appendix B – Feedback from consultation and current position Appendix C – Year 1 actions.



March 2022

2022 - 2026

EQUALITY, DIVERSITY AND INCLUSION STRATEGY St Leger Homes of Doncaster

Providing homes in neighbourhoods that people are proud to live in

CONTENTS

FOREWORD	Page 3
INTRODUCTION TO THE STRATEGY	Page 4
STRATEGY OVERVIEW	Page 5
ACTIONS WE WILL TAKE TO ACHIEVE	
OUR OBJECTIVES	Page 7
Commitment 1. Understand our customers and support their	
needs. (page 8)	
Commitment 2. To ensure the organisation is a leader in	
inclusion and fairness. (page 9)	
Commitment 3. Engage customers effectively, foster good	
relations and advance equality in local communities. (page 11)	
Commitment 4. To fulfil our safeguarding responsibilities to	
the highest standards; (page 12)	
Commitment 5. To develop a progressive and diverse workforce,	
in a workplace free from discrimination and harassment; (page	
13)	
OUR SUCCESS	Page 15

MONITORING OUR PROGRESS	Page '	6
MONITORING OUR PROGRESS	Page	

FOREWORD

St Leger Homes deliver services to over 20,000 homes, but housing is not just about bricks and mortar – it is about people. The people who deliver the services and the people who receive them - they matter. Over 8% of our tenants identity as being in an ethnic minority group, nearly 25% have a disability, nearly 1% identify as LGBTQ+ and over 15% of our tenants are age 75+. Our employees also come from diverse backgrounds, however we have some way to go to be truly reflective of the community we serve.



At our core we want to support and celebrate individualism and ensure no one person, employee or customer, is disadvantaged by their individuality. We can only do this if we are committed to ensuring that all our tenants and employees are treated fairly and with respect and have equal access to the services we provide, regardless of their personal characteristics.

This Equality and Diversity Strategy underpins our Fairness and Equality Statement and our values and behaviours. It reaffirms our commitment to taking into account the diversity of our tenants and employees and provides the strategic direction for the organisation over the forthcoming years, to ensure that we turn the words in this Strategy into actions that make a real difference to the lives of our Customers and Employees.

We have done some great work already, but we need to do more to ensure our organisation is more representative of the community we serve, at Board and at employee level, and that we take every opportunity to involve our diverse customers and communities in how we deliver our services. By truly engaging with all our customers we will we drive an improved customer experience.

This starts at the very top of the organisation and this Strategic Plan has been influenced and approved by the St Leger Board. I hope you feel the Strategy is taking us in the right direction, but I also hope you feel it provides the building blocks for St Leger Homes to be truly inclusive.

Dave Richman

INTRODUCTION TO THE STRATEGY

This Strategy sets out the direction St Leger Homes will take during 2022 to 2026 to support our tenants, employees and other stakeholders who access our services. It demonstrates how we will build on the work we are already doing to ensure we celebrate and embrace diversity and inclusion and are doing more than just meeting our legal obligations when supporting our employees and delivering our services.

The Strategy has been informed by feedback from our tenants and employees and is driven by the need to ensure that our tenants and stakeholders are not disadvantaged when receiving our services and that all our employees, regardless of their individuality are fully supported as an employee of St Leger Homes.

This Strategy therefore also includes actions for ensuring our employees are engaged and informed to deliver the best possible service and to put the customers at the heart of everything we do.

For the purpose of this document, employees include full-time, temporary and agency employees, and stakeholders include partner organisations and anyone who may contact us for service.

The Strategy helps to support and renews our commitment to the delivery of the 5 overarching commitments contained in our Fairness and Equality Statement.

The commitments in our Fairness Statement drive sustained and positive changes for both employees and tenants. Each of the commitments has a sponsor at the Executive level who will lead on ensuring that the actions in this strategy deliver against these commitments.



STRATEGY OVERVIEW

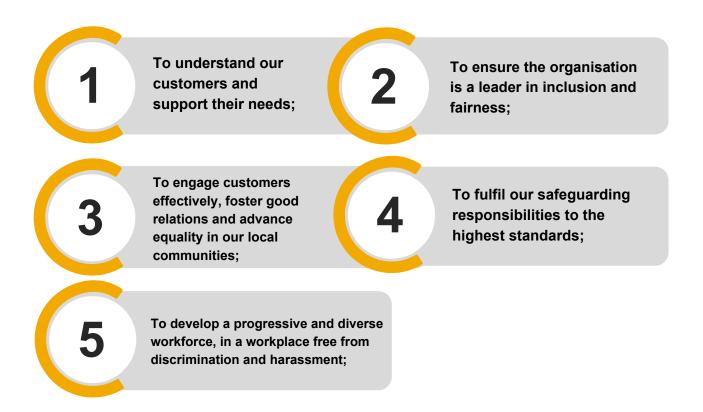
WHO IS THE STRATEGY FOR?

Predominantly tenants and employees, but also any other stakeholders who access our services.

OUR AMBITION IS TO BE

An organisation that truly reflects, respects and celebrates the diverse nature of Doncaster in our workforce, and our communities, to deliver the best outcomes for employees and customers.

OUR KEY OBJECTIVES



LINKS TO OTHER STRATEGIES

This Strategy is cross-cutting. It is closely aligned to the People Strategy and the Communications Strategy and supports the delivery of the Housing Management Strategy, the Tenant Voice Strategy and the Customer Access Strategy.



ACTIONS WE WILL TAKE TO ACHIEVE OUR OBJECTIVES

The Equality Act 2010 legally protects people from discrimination in the workplace and in wider society.

The Act details a number of characteristics personal to individuals which are protected by law. These characteristics are age, disability, gender, gender identity, marital status, pregnancy or maternity status, race, religion and belief and sexual orientation.

We have a duty under the Tenant Involvement and Empowerment Standard to ensure we treat all tenants with fairness and respect, that we demonstrate we understand the different needs of our tenants, including in relation to the equality strands, and that we understand and respond to diverse needs in the way in which we provide services and communicate to our tenants.

The publication of the Social Housing White Paper places greater emphasis on the need to listen to the voices of tenants, to ensure these do not go unheard. This Strategy includes actions to take the time to listen to and to understand the experience of all our tenants when accessing or receiving our services and our employees' experiences when working at St Leger Homes.

Above all, we want to foster good relationships, promote equal opportunities and build trust, delivering services with respect, to ensure no one feels disadvantaged by their individuality or by being themselves.

We do however want to go on meeting more than our statutory obligations to promote an inclusive culture that will deliver better engagement, employee well-being and improved service delivery.

We have therefore set ourselves a number of actions to deliver our 4 Key Objectives, to be delivered over the lifespan of this Strategy. These are shown on the next page, together with the desired outcome of each action.



UNDERSTAND OUR CUSTOMERS AND SUPPORT THEIR NEEDS

Outcome

Review local lettings policy	A policy which ensures that no one feels inhibited from applying for a council home and which takes into account our customers' diverse needs.
Improve the knowledge we have about our diverse tenants by making it easier for people to record and update their relevant personal information and will encourage them to do so	Increase in diversity data declaration rates
Review our customer diversity data down to person level to cross match with service requests to identify and engage with tenants who are not accessing our core services	Better understanding of who is not accessing our services due to diversity issues to make access easier
Carry out a number of promotional and engagement campaigns to increase the level of employee and customer data we hold	Increase in diversity data declaration rates
Investigate use of Voicescape to increase the level of diversity data we hold on our tenants and to keep this up to date	Increase in diversity data declaration rates



2

TO ENSURE THE ORGANISATION IS A LEADER IN INCLUSION AND FAIRNESS.

Outcome

Develop a coordinated internal campaign of activity, involving employee representatives to engage the workforce, cement our commitment, raise awareness and education on all areas of equality, diversity and inclusion, including the visible celebration of diversity, linking this to a similar program of external campaigns	Improved diversity in management and leadership roles
Investigate the introduction of a Board mentoring/diversity programme.	A Board that is more representative of our tenant community
Consider appropriate development activity to break barriers for colleagues from more diverse backgrounds to access leadership roles	An organisation that is more representative of our tenant community
Undertaken an internal campaign that encourages the use of pro-nouns when referring to colleagues	Culture where staff can be themselves and where this is respected by colleagues
Carry out a full diversity audit and self- assessment to gauge and challenge our current diversity status	A series of improvement actions identified as part of the self-assessment process

Action	Outcome
Celebrate our diverse employees and cultures through a series of internal events	Culture where staff can be themselves and where this is respected by colleagues
Work with the Minorities Partnership Board to increase the number of ethnic minority employees and to link this to upskilling local communities	Increase in the % of BAME employees throughout the organisation.
Apply for and achieve diversity accreditation to demonstrate our commitment to equality and diversity for our tenants and employees.	Achieve accreditation to demonstrate our commitment to equality and diversity and to ensure effective leadership and processes are in place that deliver positive outcomes for our tenants and our employees.





ENGAGE CUSTOMERS EFFECTIVELY, FOSTER GOOD RELATIONS AND ADVANCE EQUALITY IN LOCAL COMMUNITIES.

Outcome

Establish local connections with a range of diverse groups to ensure improved communication and engagement :	Better understanding of how the way in which we deliver our services impacts on tenants with protected characteristics
disability, ethnic minority, sexual orientation and older persons groups	so that we can deliver services to better meet the needs of our tenants
Review the membership of the Get Involved Group and encourage more diverse tenants to join the group	A group that is used to comment on our service delivery and to provide feedback on how we deliver our services that is more representative of our community
Carry out a series of end to end mystery shopping exercises/journey mapping exercises involving tenants from our diverse community	Better understanding of the service received by our diverse tenants when accessing our service and to ensure



TO FULFILL OUR SAFEGUARDING TO THE HIGHEST STANDARDS

Outcome

Continue to deliver our rolling programme of safeguarding training for staff and partners	Staff will feel confident about raising concerns, will be well trained and knowledgeable, and will be effective in supporting those in need of our services.
External campaign on hate incidents	Increase awareness and reporting to improve outcomes and resolutions and decrease incidents
Review the guidance documents on hate crime incidents	Provide better advice to our tenants
Domestic Abuse Housing Alliance accreditation	Improve our partnership working, processes and response to domestic abuse
Improve our approach to mental health	Provide earlier and targeted support to tenants with mental health.



TO DEVELOP A PROGRESSIVE AND DIVERSE WORKFORCE, IN A WORKPLACE FREE FROM DISCRIMINATION AND HARASSMENT

Outcome

Α	-1	-	-
Δ	(T	1()	F 1
	υı		

Become a member of the Housing Diversity Network and develop a plan to implement the benefits of the membership.	Improved awareness and consideration of equality, diversity and inclusion across the organisation.
Review the Equality and Diversity Training delivered to all employees ensuring that it is sufficient to meet our accreditation levels (for example Disability Confident Level 2) and implement a minimum 2 yearly refresher period	To ensure all employers are aware of and kept up to date on diversity issues. A more inclusive culture that embraces different perspectives measured by satisfaction scores from the Pulse Survey.
Undertake a full review of external and internal recruitment process, to ensure that it is accessible and promotes inclusion and diversity, .including introducing diversity to our interview panels, working with external agencies to expand our diverse candidate base and reviewing job descriptions to ensure they are written in a way which encourages applications from diverse backgrounds.	Increase in the number of diverse employees across, ethnic minority, people with disabilities, and LGBT+ groups.

Action	Outcome
Review development routes across the organisation ensuring that they are accessible and representative of our diverse workforce.	Increase in % of BAME employees in senior management positions.
Implement a framework for employee networks and establish a number of diversity networks across the organisation to cultivate inclusion.	Reduction in incidents of discrimination and opportunities for diverse employees to feed into decision making around service delivery and employee support.
Introduce external benchmarking for internal equality and diversity	Increased awareness of best practice, awareness of gender identification and respect for LGBT+



OUR SUCCESS

Overall outcomes we want to achieve

- An organisation and Board that is more representative of the community we live in;
- An increase in An increase in the diversity of the Senior Management Team (SMT);
- A culture where all individuals are happy and comfortable expressing their individuality and can bring their 'whole self' to work;
- An increase in the number of diverse people making use of social housing and actively involved in influencing and shaping the services we deliver.
- Services to all our tenants that are delivered fairly and equally to all.

HOW WE WILL MEASURE OUR SUCCESS?

- 6 monthly report to Employment and People Committee on progress against actions;
- Heads of Service will take ownership for updating actions where they are taking a lead role;
- Quarterly EDI Dashboard Reports detailed performance across a range of diversity indicators;
- Feedback from Pulse Surveys;
- Annual Fairness and Equality Review;
- % of complaints;
- % increase in the number of diverse employees and in senior positions;
- Feedback from customers.

HOW WE WILL KNOW WHEN WE HAVE ACHIEVED OUR AMBITIONS?

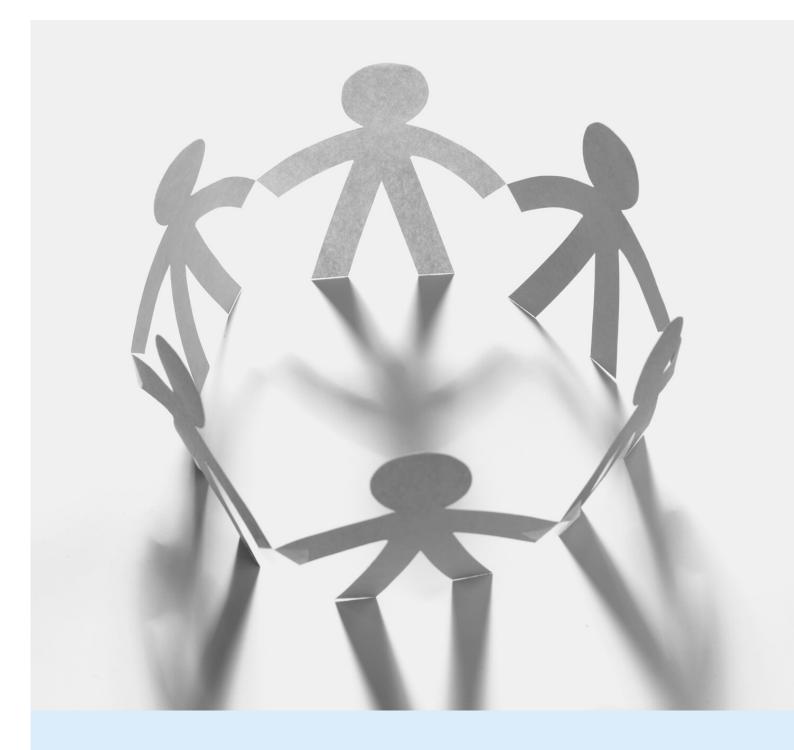
Our tenants, employees and stakeholders will continue to tell us that:

- We treat them with dignity and respect;
- We value them as individuals and respect and accept their differences;
- They do not feel disadvantaged when receiving our services;
- Our workplace culture is inclusive, welcoming and free from discrimination and harassment



MONITORING OUR PROGRESS

A yearly action plan, showing actions due for completion within the current year, our plans to deliver the Strategy and how they link to the achievement of our corporate objectives will be reported to Board and will detail specific delivery timescales. Heads of Service will take ownership for updating actions where they are taking a lead role.





Contact Us:

St Leger Court White Rose Way Doncaster DN4 5ND Tel: 01302 862862

Consultation and Current Position

External consultation

Limited responses to a customer survey carried out in 2021 - 45 response;

Not all customers answered all question.

Due to the low response to the survey we cannot take the results as a true reflection of our wider customer base but the responses received have been used to highlight where more proactive work is required to connect with our diverse communities. The feedback received showed:

- Positive feedback about employees being knowledgeable about diversity issues being treated with dignity and respect, taken into account diversity when delivering services, feeling supported on matters of discrimination and not experiencing discrimination;
- 11 customers feel there are unfair barriers to accessing services;
- 17 customers feel we could do better to engage with customers;
- 11 customers feel we could do more to take into account diverse needs when communicating with tenants;
- Need to reduce the engagement gap around ethnic minority groups;
- Engage with staff more;
- Undertake more benchmarking and engage with the experts.

Internal Consultation

164 employees responded to the survey carried out in 2021. Not all employees answered all questions, some were left blank and some indicated that they preferred not to answer the question. The questions looked at equality, diversity and inclusion from a personal and service delivery perspective.

Out of the responses provided:

5 employees identified as being in a minority ethnic group, 11 did not answer the ethnicity question and the remainder identified as White;

32 employees indicated that they had some form of disability – others indicated no disability, did not answer or preferred not to say;

98 respondents were female and 59 male;

151 identified with the gender they were assigned at birth, 6 did not or preferred not to say;

147 employees indicated they were heterosexual, 2 identified as LGBT, 8 preferred not to say

- 142 employees believe we take equality and diversity seriously; Of those who responded that they do not feel we take equality and diversity seriously (22), 2 of the respondents identified as being in a minority ethnic group, 5 indicated that they were disabled; 8 were male and 11 female. 5 employees responded negatively for reasons unrelated to equality and diversity.
- 158 employees believe we welcome employees from different backgrounds;

- 150 feel we are committed as an organisation to being an inclusive organisation with a diverse workforce;
- 138 had not experienced discrimination in the workplace. Out of the 24 who responded they had, 4 cited issues unrelated to Equality, Diversity and Inclusion (EDI), 2 cited gender related, 4 related to disability, 1 cited caring responsibilities, 2 pregnancy related issues, 2 cited part-time working.
- 132 employees indicated they had not witnessed discrimination whilst at work, 24 employees felt they had witnessed. Out of those who indicated they had witnessed discrimination, 2 were historical issues dating back several years, 4 cited issues unrelated to EDI, 12 cited a mixture of attitudes, outdated use of terminology, gender and working patterns and disability;
- 145 employees feel St Leger Homes (SLHD)promote diversity through recruitment procedures;
- 120 employees feel SLHD go the extra mile to ensure the wellbeing of colleagues. The majority of those who disagreed cited workloads and stress issues;
- 146 employees indicated they are treated with dignity and respect by colleagues and their line manager;
- 138 employees would feel confident to challenge behaviour that was not inclusive;
- 150 employees know where to report concerns about discrimination or harassment;
- 130 employees did not feel there are unfair barriers to career progression;
- 144 employees indicated they feel comfortable being themselves at work;
- 123 employees feel valued as an employee;
- 130 employees would recommend SLHD as a place to work;
- 149 employees feel they have received adequate EDI training;
- 143 employees feel SLHD go the extra mile for our customers;
- 146 employees feel that they are able to identify and support our diverse range of tenants;

Other feedback included:

- Obtain more diversity data on employees;
- Evaluate our fairness champions role and the remit of the framework for fairness group
- More communication around protected characteristics;
- Need to integrate Equality, Diversity and Inclusion within the organisation so it becomes part of the culture;
- Imbalance of gender within trade teams;
- Increase interest in apprenticeships from a diverse range of candidates;
- Widen the diversity of the Fairness Group;
- Consider accreditation

Current Position

- At the end of Q3 21/22 from those who have provided information:
 - 1.52% of our workforce identified as LGBTQ+;
 - 2.35% identified as being in an ethnic minority group. The local BAME population is around 4.8%*. *(4.8% figure from 2011 Census and 2019 Doncaster state of the Borough statistics);

- o 2.71% of employees indicated they have a disability;
- 11.5% of our tenant have not provided any diversity information;
- 2.83% of tenants require communication in a particular way including large print, braille or on coloured paper;
- The number of active tenants who have advised they suffer from mental health problems is 6.53%;
- 24.87% have disabilities;
- 8.38% of active tenants have indicated they are from an ethnic minority background;
- 0.82% of active tenants identify as LGBTQ+;
- 33% of our tenants (as at end of Q2) were over the age of 65, around 2% are age 16-25;
- Some of our employees have chosen not to provide diversity information
 204 have not provided information on their ethnicity, 98 have not provided information about whether they have a disability and 274 have not provided information about their sexuality
- The make-up of our Board, Leadership and Service Management is not representative of our diverse communities;
- We have a Fairness and Equality Statement, which sets out our commitment to advancing fairness and equality for all employees and customers;
- We produce a yearly annual Equality, Diversity and Inclusion report;
- We produce a quarterly EDI Dashboard which is reported to Employment and People Committee;
- Board have approved the adoption of the all-party parliamentary group (APPG) on British Muslims definition of Islamophobia and the International holocaust Alliance's definition of Antisemitism;
- We provide a number of support mechanisms for our diverse customers to access our services text reporting for speech impaired or hard of hearing; language translation, braille, signing service, training for front line staff on identifying customers with mental health issues;
- We have no diversity data on members of our Get Involved Group (GIG);
- From a customer perspective, we have a Young Persons' group. The Disabled Group and BAME Group no longer meet and we need to find ways of connecting with these communities;
- We need to better engage both internally and externally to ensure a wider range of views are captured.
- We work in partnership with a number of partner organisations including the Police and Victim Support and act as a Hate Crime reporting centre;
- We have piloted training with front line staff on how to recognise and support tenants with mental health issues. We need to roll this out across the wider organisation.
- We have a at Work Policy sets out our commitment to have a workplace with zero tolerance for bullying, discrimination, and harassment;
- In 2020 we achieved the Be Well at Work Silver award and are undertaking a program of activity to achieve Gold by March 2022;
- We are a "two ticks" recognised organisation;
- We are a Bronze Armed Forces Covenant member;
- Our Framework for Fairness group stopped meeting due to lack of impetus and needs replacing with a new model that will focus on a more holistic view. We need to explore different ways in which we can involve employees in a network that ensures engagement and transparency of diversity across the organisation, a network which will involve those who can bring their knowledge and experience to the group and improve engagement;

- We provide support to our employees with mental health issues through the training we provide at induction, through our ongoing health and well-being activity, through our health care provider scheme and through our First Contact group.
- All employees have been invited to join the Ethnic Culture Fusion Network;
- Our values and behaviours set out how we expect our employees to treat each other and our customers;
- The majority of employees have received Equality & Diversity training;
- We carry out regular pulse surveys with our employees;
- We recognise that we need to spend more time talking to our employees about the barriers they face due to their diversity, either carrying out their roles or working with colleagues or where they feel they have been subject to or witnessed discrimination either in the workplace or by colleagues when providing services;
- We have applied to be become a member of the Housing Diversity Network;
- We record diversity and vulnerability information on our core housing management system so that we can tailor services to our customers' needs but need to capture more of this information.

Appendix C

Year 1 Actions

Action	Headline Activities	Anticipated Completion Date
Commitment 1. Understand tenants and support their needs		
Review the local lettings policy.	 This review has commenced and various actions are included in the action plan associated with this action. 	September 2022 for sign off
Improve the knowledge we have about our diverse tenants by making it easier for people to record and update their relevant personal information.	 Update the tenant portal to capture diversity information; Consider the use of One Housing to update tenants details by visiting staff; 	August 2022 for the Portal March 2023 December for One Housing (dependent on implementation of IT)
Review our customer diversity data down to person level and cross match with service requests to identify and engage with tenants who are not accessing our core services.	 Carry out data analysis from various data sets holding core information about persons and property; Analyse and produce report identifying learning opportunities for improvements in service delivery 	December 2022
Carry out a number of promotional and engagement campaigns to increase the level of employee and customer data we hold.	 Identify communication channels to be used and frequency; Produce communications plan looking at innovative ways of increasing engagement through the use of social media and video; Implement and review effectiveness. 	1/4ly intervals throughout 2022
Investigate use of Voicescape to increase the level of diversity data we hold on our tenants and to keep this up to date	 Discussions with Voicescape; Consultation with customers and colleagues; Consider integration into Housing system Publicise to customers; Go Live with a targeted calls 	July 2022
Commitment 2. To ensure the organisation is a leader in inclusion and fairness.		
Undertaken an internal campaign that encourages the use of pro- nouns when referring to colleagues.	 Prepare a media and communication campaign; Use videos, case studies, staff focus and other communication means to promote awareness using case studies and where possible staff stories. 	June 2022
Carry out a full diversity audit and self-assessment to gauge and challenge our current diversity status.	 Consultation with colleagues; 	August 2022

Celebrate our diverse employees and cultures through a series of internal events	 Self- Assessment using the Housing Diversity Networks On-Line Assessment Tool; Report Outcomes to EMT; Develop action plan to address any gaps. Identify a series of actions to celebrate diverse employees – Staff Focus, Videos, series of staff sharing stories; Promote diversity at Staff Conference 	On-going
Work with the Minorities Partnership Board (MPB) to increase the number of ethnic minority employees and to link this to upskilling local communities.	 Continue to meet with MBP to improve connections with ethnic minority communities; Make connections with local community groups; Link to review of external recruitment actions. 	Commenced and on-going
Commitment 3. Engage custor	ners effectively, foster good relations and ad local communities	vance equality in
Establish local connections with a range of diverse groups to ensure improved communication and engagement : disability, ethnic minority, sexual orientation and older persons groups	 Benchmark to learn from other organisations; Identify partnership and diversity groups that can support local connections; Reach out to our tenant base for connections; Establish relationships and regular working groups to improve engagement; 	October 2022
Review the membership of the Get Involved Group and encourage more diverse tenants to join the group.	 Collect diversity information from existing membership to establish base position; Communications campaign to encourage diverse range of tenants to join the GIG; Promotional campaign on the benefits of being part of the GIG 	June 2022
Carry out a series of end to end mystery shopping exercises/journey mapping exercises involving tenants from our diverse community.	 Identify customers from an involvement perspective; Identify journeys to be mapped; Create scenarios and scripts for journeys; Analyse results and identify improvements in processes. 	November 2022
Commitment 4. Fulfil safeguarding responsibilities to the highest standards		
Continue to deliver our rolling programme of safeguarding training for staff and partners	 Implement training programme; 	On-going

External campaign on hate incidents	 Promotional campaigns using a range of media; Contact partner organisation for potential joint messaging. 	August 2022
Review the guidance documents on hate crime incidents	 Benchmark with other organisations; Review documents and update where appropriate; Communicate changes internally; Publicise externally. 	June 2022
Domestic Abuse Housing Alliance (DAHA) accreditation	 There is a separate action plan on achieving DAHA accreditation. The first action is to undertake a desk top review. 	Desk top review completed May 2022. Outcome date to be confirmed by DAHA
Improve our approach to mental health	 Implement a training programme for front line staff on identifying and support tenants with mental health issues; 	Series of training sessions throughout 2022. June 2022 (but linked to trainer availability)
	progressive and diverse workforce, in a work discrimination and harassment.	xplace free from
Become a member of the Housing Diversity Network and develop a plan to implement the benefits of the membership.	Apply for membership	August 2022
Training - Review the Equality and Diversity Training delivered to all employees ensuring that it is sufficient to meet our accreditation levels (for example Disability Confident Level 2) and implement a minimum 2 yearly refresher period	 Review existing training benchmarking against other available options and providers. Achieve 100% completion on Equality, Diversity and Inclusion (EDI) training Ensure 2 yearly refresher implemented Review recruitment training to ensure that this accurately reflect key elements such as disability confident level 2 requirements and unconscious bias. 	December 2022
Recruitment - Undertake a full review of external and internal recruitment process, to ensure that it is accessible and promotes inclusion and diversity, Including, introducing diversity to our interview panels, working with external agencies to expand our diverse candidate base and reviewing job descriptions to ensure they are written in a way	 Review existing internal processes; Review application, advertising, shortlisting and interview methods; Consider Job description template and wording; Consider recruitment language Review our agency worker agreements to ensure that they are robust in ensuring diversity of candidate 	December 2022

which encourages applications from diverse backgrounds.		
Inom diverse backyrounds.	Women in construction	
Development - Review development routes across the organisation ensuring that they	 Become a member of women in construction; 	September 2022
	• Devise a plan of activity to increase our application and development rates within the service area. This will include, development, succession, internal and external communication and engagement	(2023)
are accessible and representative	Housing Diversity Network Mentoring	
of our diverse workforce.	• As a new member of the HDN, introduce mentoring open to all colleagues but with particular focus upon our BAME population to seek support for career development	
	 Identify areas for focus to support our colleague development and increase Equality, Diversity and Inclusion. 	March 2023
Engagement - Implement a framework for employee networks and establish a number of diversity networks across the organisation to cultivate inclusion.	 Create a communication plan to generate interest Utilise existing known enthusiasm from the workforce and begin with developing colleague led groups open to all but with a key focus on topical areas Monitor and report on the impact of such networks ensuring that each network is supported, sponsored and has a clear purpose and outcome. 	September 2022
Introduce external benchmarking for internal equality and diversity	 Explore an appropriate benchmarking and measurement tool which may include: Stonewall Top 100 Housing Diversity Network Accreditation Inclusive employers 	March 2023

ST LEGER HOMES OF DONCASTER LTD Company limited by guarantee registered in England Company Number 05564649 **Board Meeting** REPORT Date : 7 April 2022 Item 07 : Subject SLHD Budgets 2022/23, 2023/24 & : 2024/25 Presented by : Julie Crook **Director of Corporate Services** Prepared by : Julie Crook **Director of Corporate Services Purpose** To seek Board approval for the three 2 year budgets.

Recommendation:

It is recommended that Board approve the three year budgets.

Company Number 05564649 A Company Limited by Guarantee Registered in England

To the Chair and Members of theAgenda Item No: 07ST LEGER HOMES OF DONCASTER BOARDDate: 7 April 2022

1. Report Title

1.1 SLHD Budgets 2022/23, 2023/24 and 2024/25.

2. Background

- 2.1 The Board is required to approve the Company's budget for the relevant financial year. Appendix A shows the total budget for SLHD.
- 2.2 SLHD aims to set a balanced budget each year where income equals expenditure, the income and expenditure budgets for 2022/23 are £49.5m.
- 2.3 SLHD receives five sources of income:
 - Management fee from the Housing Revenue Account (HRA);
 - Management fee from the General Fund (GF);
 - Capital management fee from the housing public sector capital programme for managing the delivery of the housing capital programme;
 - Income for the completion of capital works; and
 - Other income.
- 2.4 The Council's budgets were approved on 28 February 2022, these included the management fees, which SLHD receive from the HRA, the public sector capital programme and the General Fund.
- 2.5 The following paragraphs give more information on the main sources of income;

2.5.1 Management fee from the HRA, £34.2m (69% of total income)

This budget has increased by \pounds 1.5m, the majority of the increase is due to inflationary increases across both pay and non-pay budgets. The agreed savings figure of \pounds 333k has been netted off.

There is a four year agreement (2021/22 to 2024/25) which is reviewed annually, whereby this budget increases by inflation but that SLHD needs to make efficiencies/savings primarily to return the upfront investment to fund TOP. The agreed savings targets are £250k for 2021/22 and £333k a year for the next three financial years.

2.5.2 Management Fee from the General Fund, £2.1m (4% of total income)

This source of income is in respect of services that transferred into SLHD in April 2014. This budget has seen an increase of £557k, £81k of this is to fund inflationary costs and £476k is budget growth to fund the increased

workload of the team.

2.5.3 Income from the Capital programme, £10.6 m (22% of total income)

This income is money paid to SLHD for the completion of capital/improvement works on the council owned properties and estates. This budget has remained the same as in previous years. This budget also includes the $\pm 1.5m$ (6.5%) of management fee received from the capital programme to manage the whole of the housing capital programme ($\pm 23.2m$).

2.5.4 Other Income, £2.7m (5% of total income)

The majority of this income comes from temporary accommodation, grant income, district heating, private sector landlords and gardening services.

3. Budget 2022/23

3.1 Appendix A shows a balanced budget for 2022/23.

All budgets have been calculated in collaboration with staff from finance and budget holders (there has been a significant increase in the ownership and knowledge about budgets across the business and this has been helpful in the budget process). Non pay budgets have been calculated on a zero based approach and reflect savings and pressures that will continue from 2021/22 into 2022/23.

There has been a line by line analysis of the whole budget and areas of savings have been identified which have been offset against growth or increased costs.

3.2 After adjustments for inflation and approved growth we have been required to find real savings of £333k and in summary these savings have been found from;

	£000s
Employees	-308
Premises	-290
Supplies & Services	30
Service Level Agreements (SLAs)	186
Other Income	18
Other minor changes	31
Total	-333

Employees – a net reduction of 4 posts & increased vacancy factor Premises – Closure of St Leger Court & St Leger House Supplies and Services – Reduction in IT costs due to TOP phase 1 SLAs – Includes new Procurement & Civic Office SLAs Other Income – changes arising from removal of TOP recharge to capital and changes to fees and charges

A further detailed breakdown of the budgets is provided at Appendix B.

- 3.3 The budget has been set based on minimal changes across the organisation.
- 3.4 The estimated pay award for 2021/22 was funded at 2.75%, this has now been settled at 1.75% and this will require an adjustment to the 2022/23 budgets as they have effectively been over funded.

4. Key Risks and Potential Budget Implications 2023/24 & Future Years

4.1 The budgets for 2023/24 and 2024/25 as shown in Appendix A and assume that the management fee from the HRA will be increased for inflationary pressures and further changes to pension costs and these increases have been built into the expenditure budgets for the HRA. A saving of £333k is also built into the 2023/24 and 2024/25 budgets this reduction was agreed to repay the upfront investment required for TOP. The overall HRA budgets, both revenue and capital, are tight over the next four years, as noted earlier apx 95% of SLHD's income comes from the HRA so any significant budget implications for the HRA may have significant

implications for SLHD.

- 4.2 General Fund budgets are under extreme pressure as a result of the Covid19 pandemic and it will take time for this impact to be eradicated from the budget completely. The budget for 2022/23 has been increased for inflationary pressures and has had a bid for additional funding approved in recognition of the underlying pressures on the service. It is unlikely that the 2022/23 will be sufficient as a significant amount of work is required in 2022/23 to clear the backlog in the system and we are working to estimate a financial value for this. We are then assuming that from 1 April 2023 the service will be delivered at the "new normal" levels which will require higher funding levels than pre covid but lower than the expenditure require in 2022/23. We are also contributing to a number of grant bids which should contribute to the additional budget pressures.
- 4.3 Potential inflationary increases are a risk to the whole budget and these are constantly reviewed to ensure that they do not become unaffordable to the Council budgets that fund our management fees. Cost of living increases especially those on fuel and utilities are likely to have significant implications for our tenants. We will be working with tenants to maximise their income and reduce their outgoings in order to attempt to sustain their tenancies but there is a small risk that the rent income to the HRA may decrease.
- 4.4 At this stage we have not identified any of the savings required to balance the 2023/24 or 2024/25 budgets but all budget managers and EMT are very aware of these targets. We will include an update in each of the revenue monitoring reports to Board during the financial year on the progress towards the 2023/24 savings target with a view to identifying the majority of the savings by September and all of them by December 2022. The repairs service is the biggest single budget across the whole organisation, there have been very few changes and efficiencies delivered in

the repairs service since 2008. The repairs excellence project is currently being piloted and we are confident that these new ways of working will bring efficiencies which should enable us to have additional capacity to complete more income generating work or to delete a number of vacant posts.

5. Procurement

5.1 SLHD needs to ensure that it continues to gain maximum procurement efficiencies from all contracts.

6. VFM Considerations

6.1 Efficiency and value for money principles have been adopted throughout the budget setting process.

7. Financial Implications

7.1 All financial implications are considered in the body of the report.

8. Legal Implications

8.1 There are no legal implications arising from this report.

9. Risks

- 9.1 The budget efficiencies that may need to be identified from 2023/24 onwards are currently unknown and these will need to be managed carefully to ensure that any savings/efficiencies are delivered.
- 9.2 Robust systems are in place to monitor both expenditure and income budgets.
- 9.3 The strategic and operational risk registers for the organisation are reviewed regularly and any potential financial impact especially in relation to changes in government policy.

10. Health, Safety and Compliance Implications

10.1 All known health, safety and compliance changes have been built into the budget. We will continue to review any implications following the tragic events at Grenfell, the subsequent publication of the draft building safety bill, fire safety bill and the Housing White Paper.

11. Report Author, Position, Contact Details

11.1 Julie Crook Director of Corporate Services Tel 01302 862710

12. Background Papers

12.1 Housing Revenue Account Budget 2022/23 – Council Meeting 28 February 2022 Capital Programme 2022/23 to 2025/26 – Council Meeting 28 February 2022.

	2021/22	2022/23	Variance from 21/22 to 22/23	2023/24	2024/25
	Budget £000s	Draft Budget £000s	£000s	Draft Budget £000s	Draft Budget £000s
Management Expenditure					
Employees					
Direct Employee Expenses	28,109	28,645	536	29,465	30,094
Indirect Employee Expenses	201	198	-3	198	198
Agency Staff	101	44	-57	44	44
Training	183	246	63	246	246
Total Employees	28,594	29,133	539	29,953	30,582
Premises					
Utilities	678	920	242	920	920
Rates	134	78	-56	78	78
Furniture	16	16	0	16	16
Repairs & Maintenance	260	228	-32	228	228
Premises - Other	980	988	8	988	988
Transport					
Fuel	455	544	89	544	544
Transport & Plant	1,851	1,853	2	1,853	1,853
Transport - Other	61	65	4	65	65
Supplies and Services					
Provision for General inflation				400	800
IT Equipment	704	799	95	799	799
Printing & Stationery	103	95	-8	95	95
Postage	63	59	-4	59	59
Insurance	356	364	8	364	364
Communication	77	74	-3	74	74
Materials - Building Services	5,941	6,187	246	6,187	6,187
Supplies and Services - Other	1,856	2,824	968	2,824	2,824
Service Level Agreements	3,534	4,017	483	4,017	4,017
Savings yet to be identified				-333	-666
Total Management Expenditure	45,663	48,244	2,581	49,131	49,827
Maintenance Expenditure					
External Maintenance Contractors	1,253	1,291	38	1,291	1,291
Total Maintenance Expenditure	1,253	1,291	38	1,291	1,291
Gross Expenditure	46,916	49,535	2,619	50,422	51,118
Income					
Management Fee - HRA	-32,724	-34,206	-1,482	-35,093	-35,789
Management Fee - General Fund	-1,531	-2,088	-557	-2,088	-2,088
Recharges to Capital Schemes (In house)	-10,588	-10,585	3	-10,585	-10,585
Other Income	-2,073	-2,656	-583	-2,656	-2,656
Total Income	-46,916	-49,535	-2,619	-50,422	-51,118
Surplus(-) / Deficit	0	0	0	0	0

s of Doncaster I to Rudget 2022/22 to 2024/25 St Loc . .

Detailed Budget Changes

- 1. Details of the most significant budget changes are detailed below;
- 2. The increased funding received for the staffing budget was £844k but the overall staffing budget only increased by £536k, the net impact on the bottom line was therefore a £308k saving.

Direct employees budget, increased by £536k This increase is as a result of;

	£000s
Estimated Pay award at 2.0%	590
N.I. Increase 1.25%	195
Increments	59
Increase in Vacancy Factor from 3.0% to 4.0%	-110
Increases for specifically funded posts;	
Asset Management/Building Safety net (6.2 posts)	193
Apprentices (2.0) posts	40
Post reductions	
Procurement posts TUPE to DC (3.0 posts)	-162
T.O.P. Project Team (7.0 posts 6 months)	-137
Business Transformation Officer (2.0 posts)	-84
Learning & OD Specialist Temp (0.5 posts)	-20
Other minor adjustments	-28
Total	536

The net staffing reduction of 4.0 FTEs is made up of a number of changes the most notable ones being;

	FTEs
Asset Management/Building Safety	6.2
Apprentices	2.0
T.O.P. Project Team	-7.0
Procurement TUPE	-3.0
Business Transformation Officer	-2.0
Learning & OD Specialist	-0.5
Other minor adjustments	0.3
Total	-4.0

3. Premises budget;

The overall budget has increased by £162k in 2022/23. This is largely due to an inflationary increase of £266k for utilities offset by an expected usage reduction of £40k as a result of the closure of St Leger Court and St Leger House. The closure of these buildings is also expected to result in other premises related savings of £248k, although this will be offset by increased SLA charges for the use of the Civic Building. The budget also includes an increase of £137k for additional temporary accommodation that has been fully funded by an increase in other income (housing benefit) and management fee and therefore this does not have an overall impact on our bottom line. 4.1% inflation has also been applied to the Temporary Accommodation rental budget (£18k)

4. Transport budgets;

This overall budget has increased by £95k, due to estimated fuel price inflation of 20% (£89k) and vehicles repairs 4.9% (£6k) Our management fees are adjusted for inflation so this change does not have an impact on the bottom line.

5. Supplies and Services (excluding materials);

The overall budget has increased by £1,056k, there are a number of notable increases and decreases within the overall budget headings;

- £776k additional budget for emergency hotel accommodation, £132k for security at hotels, and £22k for temporary accommodation equipment in the Housing Options Team, which reflects increased demand in response to Covid-19. This is fully funded by an increase in other income and management fee and therefore has no impact on the bottom line.
- The ICT budget has seen an increase of £95k in relation to new software packages including Voicescape and C365. £17k of this increase has been included as inflation.
- The budgets for printing, stationery, postage and telephone costs have reduced by £8k across the whole organisation;
- 6. Materials;

The materials budget is £246k higher in 2022/23

There are largely inflationary increases of £251k in line with CPI on supplier's contracts (as inflationary changes are funded through the management fee this has no impact on our bottom line).

An additional £28k was added to the budget for the replacement of consumer units in major voids, this will increase income to the company by apx £90k. £31k of materials has been taken out of the budget due to electrical capital works no longer being carried out in house.

7. SLAs;

The SLAs budget is £483k (14%) higher than 2021/22. This includes a 3.25% increase on all contracts (£120k) and new SLAs for Procurement Services (£177k) and Civic Office Accommodation (£220k). There has also been an increase to the ICT SLA of £38k in relation to Cyber Security, and savings on the Metroclean SLA due to the planned closure of St Leger House and St Leger Court (£47k). Also a reduction of £25k on the Strategic Asset Management SLA.

- 8. External Maintenance Contractors; This budget has increased by £38k, largely due to inflation.
- 9. Other Income;

An increase in other income of £583k has been budgeted for, of which £608k is for an increase in Housing Benefit arising from temporary accommodation. The income budget for District Heating has also been increased by £47k to reflect a 20% increase in fees and charges, and an increase in our refund from South Yorkshire Pensions of £18k.

This budget also decreased by £60k to reflect the removal of the T.O.P team recharge to capital, and a reduction of Garden Service income of £8k to reflect changes to the pricing structure. The budget has been reduced by a further £15k for the removal of the recharge to the General Fund for the use of St Leger House.

ST LEGER HOMES OF DONCASTER Board Briefing Note

Title:	Annual Development Plan (ADP) and Key Performance Indicators (KPIs) for 2022/23
Action Required:	For information
Item:	08
Prepared by:	Mark Haughey - Head of ICT & Transformation Nigel Feirn - Head of Finance and Business Assurance
Date:	7 April 2022

1. Purpose

- 1.1. To provide Board members with the proposed Annual Development Plan (ADP) and Key Performance Indicators (KPIs) for 2022/23. These have been prepared following extensive review and discussion by Leadership, Senior Management Team (SMT), Board at their strategic away day and by the Mayor and DMBC.
- 1.2. The 2022/23 ADP proposes a number of key developmental activities or "actions" aligned to the strategic objectives set out in the SLHD Corporate Plan 2019 to 2024.
- 1.3. The ADP or KPIs do not include operational service developments, which are progressed through local Service Delivery Plans, or 'business as usual' service delivery.

2. Background

- 2.1. The ADP and KPIs have been developed from the Corporate Plan 2019 to 2024, which aims to deliver our vision of "providing homes in neighbourhoods that tenants are proud to live in" through four strategic objectives over the five-year period:
 - All our homes are modern, decent, and energy efficient;
 - Our tenants live successful and fulfilling lives;
 - We will be a nationally recognised provider of housing services; and
 - Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together.
- 2.2. The Corporate Plan sets out actions or plans to be delivered over the five-year period. Each year the actions set out in the original Corporate Plan are reviewed to ensure they are still relevant and to reflect any legal, legislation, political or environmental changes.
- 2.3. Board members discussed the initial draft of the 2022/23 ADP and KPIs at the Strategic Planning Board meeting in November 2021.
- 2.4. In the period since, the ADP actions have been amended slightly to reflect further discussions and consultation.

- 2.5. In developing the KPIs, previous years' methodology has been applied for 2022/23, and the KPIs are based on the measures of success for our four strategic objectives. 18 KPIs were agreed for 2022/23, four of which are annual KPIs.
- 2.6. The KPIs have been amended to reflect ongoing discussions with the Mayor and DMBC (please see 4 below).
- 2.7. The two additional SLHD employee related KPIs have been retained for 2022/23, both of which will be captured via staff survey :
 - Employee satisfaction with SLHD as an employer; and
 - How likely are you to recommend SLHD to family and friends.

3. 2022/23 ADP

- 3.1. The 2022/23 ADP at **Appendix A** contains individual actions relating to the Corporate Plan actions/plans. Some are related to current pieces of work that are already underway.
- 3.2. A member of the Leadership team is assigned responsibility for each ADP action. As with the current ADP oversight arrangements, progress will be reported to EMT quarterly, and to Board every six months.
- 3.3. It should be noted that the ADP 2021/22 continues to be monitored and following the annual review, any actions that may have slipped could be added to the ADP 2022/23 actions in **Appendix A**.

4. 2022/23 KPIs

- 4.1. The Board considered draft KPIs in January 2022 and they are largely the same KPIs as are currently in place for 2021/22, with changes as detailed below.
- 4.2. Given the challenges of the Covid19 pandemic and ongoing impact, KPI target setting considered current performance as well as the 2019/20 outturn, as in general we are aiming to return to pre-pandemic levels. It has also tried to be more outcome focussed (homelessness KPIs).
- 4.3. A number of the KPIs are extremely challenging and would represent exceptional performance in the current climate.
- 4.4. Changes are as follows :
 - KPI4 amended to report on 'Number of Households in B&B Accommodation at month end'. Previously this was 'Number of Households Placed in B&B Accommodation' and was a cumulative target;
 - Number of Full duty homelessness acceptances (previously KPI5) No Target for 2022/23;
 - Number of Homelessness preventions (previously KPI6). No Target for 2022/23;
 - Local expenditure New KPI10 (was KPI12) : amended, where we now include Capital spend as well as Revenue spend. We will continue to measure Revenue spend and comment as required in the KPI reporting.
- 4.5. Since the February 2022 Board meeting, the KPIs have been amended to reflect discussions with the Mayor and DMBC. Specifically, the targets amended were:

- Rent arrears KPI1 now 2.75%, which was also the 2020/21 outturn. A decrease from the proposed 2.79%, which was based on the 2019/20 outturn;
- Homelessness B&B KPI4 : Agreed to now be 'Number of Households in B&B Accommodation at month end' and a March 2023 year end target of 30. The month end targets will be profiled throughout the year to reflect anticipated activity;
- Homelessness preventions and acceptances previously KPIs 5 and 6 : KPI targets have not yet been proposed by DMBC;
- Tenancies sustained post support now 97.25% which was also the 2020/21 outturn. An increase from the proposed 95%, which in turn was an increase on the 2021/22 target of 90%; and
- Energy efficiency of properties Target proposed of 71%, to be confirmed.

4.6. Appendix B details :

- KPI targets for 2022/23;
- historical performance and related financial information;
- KPI targets and Q3 performance for 2022/23; and
- where applicable, SLHD's quartile peer benchmarking position and top and bottom quartile and median indicators for 2020/21.

5. Recommendation

5.1. That Board is asked to approve the ADP and suite of KPIs for 2022/23 in light of the 5-year Corporate Plan.

6. Appendices

- Appendix A 2022/23 ADP
- Appendix B 2022/23 KPIs

Appendix A

		ADP Actions				
Ref	Service area	2022/23	Plans	Date	Owner	Objective of Action
A1	Access to Homes	Implement revised Allocations Policy aligned to new IT System.	Ensure the allocations policy reflects the changing needs of tenants and residents	Dec-22	HoATH	To make best use of the Housing Stock to meet the housing needs of the borough.
A2	Access to Homes	Ensure age designated stock continues to meet the needs of the borough aligned to the review of the Allocation Policy.	Review age designation and local lettings policies	Mar-23	HoATH	To make best use of the Housing Stock to meet the housing needs of the borough and contribute to successful balanced neighbourhoods.
A3	Access to Homes	Develop and deliver an efficient and effective out of hours homelessness service.	Reduce and prevent homelessness	Mar-23	HoATH	Prevent and reduce homelessness in the borough.
A4	Access to Homes	Work with Doncaster Children's Services Trust to improve the accommodation options for care leavers through the development of a shared accommodation offer.	Living: Provide support to maximise tenancy sustainability.	Mar-22	HoAtH	Provide better and more sustainable housing options for individuals leaving care to prevent homelessness.
A5	Access to Homes	Develop our Private Rented Sector offer and service to improve housing provision in the sector.	Provide support to help improve tenancy sustainability	Dec-22	HoHM & HoATH	To encourage provision of accommodation in the Private Rented Sector for those who are homeless or at risk of homelessness by providing and publicising a package of support. To also engage with private landlords to improve sustainability, access and affordability in the sector.
A6	Housing Management	Review tenancy failure in SLHD and develop appropriate strategies. Undertake business case analysis of a social housing furnished tenancy offer.	Help tenants to sustain their tenancies	Oct-22	НоНМ	Targeted support to prevent tenancy failure.
A7	Housing Management	Review opportunities to support those tenants with low level Mental Health (MH) and associated issues and wider wellbeing needs.	Increase the range of support for tenants especially those with the greatest needs	Jul-22	НоНМ	Targeted support to prevent tenancy failure - MH Navigators and Substance Misuse Officers in Tenancy Support team.
A 8	Housing Management	Develop and implement the Tenancy Voice Strategy.	Increase the opportunities for volunteering and improving neighbourhoods	Jul-22	НоНМ	More popular and sustainable neighbourhoods objectives in the white paper.

A 9	Housing Management	Develop and implement the Domestic Abuse Housing Alliance (DAHA) Action Plan to achieve DAHA accreditation.	DAHA Increase the range of support for tenants	Aug-22	НоНМ	DA is recognised across the organisation and staff are knowledgeable and well trained, with survivors appropriately supported.
A10	Housing Management	Review of Tenancy Agreement.	Help tenants to sustain their tenancies	Mar-23	НоНМ	To ensure the Tenancy Agreement addresses issues of access for services, maintenance and welfare.
A11	Housing Management	Develop a programme of periodic visits for all tenants.	Help tenants to sustain their tenancies	Oct-22	НоНМ	To agree ways for staff across SLHD to raise concerns about property or tenants for targeted tenancy verifications to be carried out.
A12	Customer Services	Carry out a series of end to end customer journey mapping exercises across all access channels and key service delivery points.	Continuously improve our business processes	Mar-23	HoCS	Better organisational insight into understanding how customers experience our services to improve service delivery and the overall customer experience.
A13	Customer Services	Review and update the existing St Leger Homes website and review internal channels of communication to implement a single platform that promotes two-way communication for all teams and is fully accessible for all.	Improve communication with tenants and residents Use technology to modernise and transform service delivery	2023/4	HoCS/ HoICT&BT	Improved, current, user friendly website easy for customers to access information about our services and which encourages and supports channel shift and self-service and delivers improved customer service. Improved communication across the organisation and engagement with employees. Project to commence 22/23 with full delivery planned for 23/24.
A14	Repairs & Maintenance	Deliver repairs excellence project.	Deliver an efficient and effective repairs and maintenance service	Mar-23	HoRM	Modernise the repairs service.
A15	Asset Management	Complete delivery of the first phase of the External Wall Insulation Remediation Scheme.	Ensure our homes are safe and free from hazards	Jul-23	HoAM	To remediate the external wall insulation to 5 high rise blocks within Doncaster. Further phases to additional blocks may follow.
A16	Asset Management	Complete phase 2 review of communal halls.	Provide communal halls and spaces which the community value	Jun-23	HoAM	To review and confirm the longer-term future of the communal halls previously identified as having low usage.
A17	Asset Management	Develop and commence delivery of the first phase of net zero carbon feasibility work and projects.	Deliver our environmental and asset management strategy	Mar-23	НоАМ	To identify/confirm what net zero carbon measures are feasible for our housing stock. In turn this will inform our longer-term environmental strategy and net zero carbon investment plan.
A18	Asset Management	Procure and implement an asset sustainability modelling tool.	Deliver our environmental and asset management strategy	Mar-23	HoAM	To understand the viability/sustainability of the managed housing stock to inform the longer-term asset management strategy, and future investment decisions.

A19	Asset Management	Implement new accommodation requirements following review in 2021/22 to support agile working principles and approach.	Ensure our business accommodation is fit for purpose	Mar-23	НоАМ	Accommodation, including area offices, is rationalised, supports agile working and is modern, welcoming and fit for purpose.
A20	Health and Safety	All documentation for the 6 areas of compliance and subordinate areas either statutory or non statutory are assessed and available evidence is within C365 system.	Ensure our homes are safe and free from hazards	Dec-22	HoBS	SLHD can provide assurance that all areas of regulatory compliance are assessed and that there is suitably evidence to satisfy any IDA.
A21	Health and Safety	That a tenants building safety residents engagement strategy is written which explain how residents of HRRBs raise concerns over building safety.	Ensure our homes are safe and free from hazards	Sep-22	HoBS	Compliance with the Building Safety Bill (Act) and social housing white paper.
A22	Health and Safety	That all in scope buildings under the control of SLHD have a Building Safety Case and that the information is available to the Building Safety Regulator and enforcing agencies	Continue to invest in homes and neighbourhoods	Mar-23	HoBS	Compliance with the Building Safety Bill (Act).
A23	HR	Carry out a full diversity audit and self- assessment to gauge and challenge our current diversity status with a view to applying for and achieving diversity accreditation.	Work in ways which reflect our values	Aug-22	HoCS/ HoHR&OD	Identify actions to improve how we support our diverse customers and employees to ensure effective leadership and processes are in place that deliver positive outcomes for our customers and our employees.
A24	Corporate Services	Develop, implement and monitor actions and outcomes of a regulatory matrix addressing all the requirements of the regulatory framework and white paper	Ensure effective governance arrangements are in place to deliver their aims, objectives and intended outcomes for tenants and potential tenants	Mar-23	HoFBA	Inspection ready. Compliance with Regulatory Standards. Meeting White Paper outcomes.
A25	Finance	Measure efficiencies and improvements achieved through service transformation as a result of The One Project (TOP) and the Customer Access Team (CAT). Achieve top quartile benchmarking.	Deliver value for money services	Dec-22	HoFBA	Identify cashable and non cashable efficiencies gained from TOP and CAT implementation.
A26	HR	Review our wellbeing offer ensuring that we focus appropriate across all 4 wellbeing elements Physical, Mental, Social, Financial.	Embed a positive health, safety and wellbeing culture	Mar-23	HoHR&OD	Maintain our successful wellbeing offering ensuring that it is appropriate for the changing environment.
A27	HR and L&OD	Continue to develop our approach to agile working developing our managers to effectively lead and manage performance outcomes in an agile environment	Continue to develop our workforce	Dec-22	HoHR&OD	increasing confidence and skill of managers to lead our people in an agile environment.
A28	L & OD	Develop our approach to talent and succession planning	Continue to develop our workforce	Mar-23	HoHR&OD	Ensuring that SLHD has an appropriate plan for key roles to avoid business disruption, is retaining high performing talent and developing potential.

A29	L & OD	Deliver against our refreshed early careers programme.	Continue to develop our workforce	Mar-23	HoHR&OD	Ensure an increased range of opportunities for residents of Doncaster to access the world of work as well as increasing SLHD talent pool and succession into a variety of roles.
A30	L & OD	Review our organisational culture, current state and aspirations utilising external accreditation (such as liP or Best Companies) to generate rich data and information.	Continue to develop our workforce	Mar-23	HoHR&OD	Identify our current organisational culture, where we want to be and the gaps to enable a plan of action to be generated.

Appendix B

											, Mets and l	enchmarkir Jnitaries per 3/11/21	
Strategic Objective	KPI Ref	КРІ	2017/18 Outturn	2018/19 Outturn	2019/20 Outturn	2020/21 Outturn	2021/22 Targets	Q3 2021/22 Actual	2022/23 Targets (Proposed)	Quartile position 2020/21	Top Quartile 2020/21	Median 2020/21	Bottom Quartile 2020/21
Tenants live successful and fulfilling lives	KPI 1	% of current rent arrears against annual debit	2.62%	2.61%	2.79%	2.75%	3.00%	3.01%	2.75%	Quartile 2	2.10%	2.76%	3.91%
A nationally recognised provider of housing services	KPI 2	Void rent loss % (£) of rent loss through vacant dwellings	0.78%	0.49%	0.59%	1.00%	0.50%	0.79%	0.50%	Quartile 1	1.19%	1.45%	2.38%
A nationally recognised provider of housing services	KPI 3	Relet time for standard voids (days)	36.0 days (not a KPI)	20.9 days	22.7 days	46.11 days	20.0 days	32.39 days	20.0 days	Quartile 2	32.1 days	49.9 days	74.3 days
Deliver the aims of Doncaster Growing Together	KPI 4 new for 22/23	Number of Households in B&B Accommodation <u>at month end</u>			Not me	asured			30	n/a	n/a	n/a	n/a
Deliver the aims of Doncaster Growing Together	KPI 5	Full duty homelessness acceptances.	Not measured	130	228	398	No target due to Covid	292	NO TARGET YET	n/a	n/a	n/a	n/a
Deliver the aims of Doncaster Growing Together	KPI 6	Homelessness preventions	Not me	easured	965	604	No target due to Covid	439	NO TARGET YET	n/a	n/a	n/a	n/a
A nationally recognised provider of housing services	KPI 7	Percentage of complaints upheld against customer interactions	0.060%	0.070%	0.061%	0.065%	0.070%	0.118%	0.070%	n/a	n/a	n/a	n/a
Tenants live successful and fulfilling lives	KPI 8	Tenancies sustained post support	Not me	easured	93.80%	97.25%	90.00%	98.44%	97.25%	n/a	n/a	n/a	n/a
Homes are modern, decent, safe and energy efficient	KPI 9	Repairs completed at first visit	Not me	easured	90.24%	90.92%	92.00%	89.37%	92.00%	Quartile 3	95.05%	91.83%	87.90%
Homes are modern, decent, safe and energy efficient	KPI 10	Gas Servicing - % of dwellings with a valid gas safety certificate	Mea	sured, but not	t reported as a	KPI.	100.00%	100.00%	100.00%	Quartile 1	100.00%	99.96%	99.81%
A nationally recognised provider of housing services	KPI 11	Days lost through sickness per FTE	8.04 days	8.90 days	8.30 days	6.60 days	7.90 days	8.61 days (YTD)	7.90 days	Quartile 2	6.5 days	8.6 days	10.1 days
Deliver the aims of Doncaster Growing Together	KPI 12	% of local expenditure - REVENUE AND CAPITAL - new	n/a	n/a	n/a	n/a	70.00%	70.10%	70% consistent with DMBC	n/a	n/a	n/a	n/a
Tenants live successful and fulfilling lives	KPI 13	ASB % of cases resolved	Measured, but not a KPI	92.99%	95.55%	95.19%	95.00%	97.32%	95.55%	n/a	n/a	n/a	n/a
Tenants live successful and fulfilling lives	KPI 14	Number of tenants and residents helped into training or education	Not me	easured	53 (combined)	30	67	20	67	n/a	n/a	n/a	n/a
Tenants live successful and fulfilling lives	KPI 15	Number of tenants and residents helped into employment	Not me	easured	n/a	28	30	45	30	n/a	n/a	n/a	n/a
	Annual	KPIs											
Tenants live successful and	KDI 16	Tenant satisfaction levels		TAR Survey. question on	87.0%		87.0%	84.9%	87.0%	Quartile 2	87.2%	83.3%	77.0%

Tenants live successful and fulfilling lives	KPI 16	Tenant satisfaction levels	Bi-annual STAR Survey. Housemark question on satisfaction with overall satisfaction	87.0%		87.0%	84.9% 21/22 STAR	87.0%	Quartile 2	87.2%	83.3%	77.0%
Homes are modern, decent, safe and energy efficient	KPI17	Percentage of homes maintaining Decent Homes standard	Annual report based on Government decent homes standard.	100.0%	99.99%	100.0%	n/a	100.0%	Quartile 2	100.0%	99.6%	96.4%
Homes are modern, decent, safe and energy efficient	KPI 18	Level of tenant satisfaction with property condition	Bi-annual STAR Survey. Housemark question on satisfaction with condition of property.	89.4%		89.0%	86.5% 21/22 STAR	89.4%	Quartile 1	85.5%	82.6%	76.4%
Homes are modern, decent, safe and energy efficient		Energy efficiency of properties	Aim is to achieve EPC Level C by 2030 so target set 68.37% for 2022	99.96%	64.74%	68.37%	n/a	71.0%	n/a	n/a	n/a	n/a

	Annual KPIs - St Leger Homes Board												
A nationally recognised provider of housing services	KPI 20	Employee satisfaction with St Leger Homes as an employer - Staff survey question	not measured	79.8%	n/a	n/a	80.0%	n/a	80.0%	n/a	88.7%	83.5%	79.5%
A nationally recognised provider of housing services	KPI 21	How likely are you to recommend St Leger Homes to family and friends - Staff survey 'Net Promoter Score (NPS)'	not measured	21.0	n/a	n/a	25.0	n/a	25.0	n/a	n/a	n/a	n/a

ST LEGER HOMES OF DONCASTER LTD Board Briefing Note

Title:	Month ended 28 February 2022 KPI dashboard			
Action Required: For information				
Item:	09			
Prepared by:	Nigel Feirn Head of Finance and Business Assurance			
Date:	07 April 2022			

1. Purpose

1.1. To provide Board members with the KPI dashboard as at 28 February 2022 and brief commentary for those KPIs where the target is not being met. The KPI dashboard is attached at **Appendix A**.

2. Executive summary

- 2.1. There are now 20 KPIs for 2021/22 :
 - two are measured quarterly residents supported in training and residents supported in employment;
 - four are measured annually STAR survey (2), energy efficiency and Decent Homes Standard numbers. NB : It should be noted here that the annual STAR survey for 2021/22 is now complete and the two KPIs have been included in this report;
 - three KPIs relating to Homelessness do not have a target this year due to ongoing Covid19 requirements.
- 2.2. The table below summarises the KPI dashboard as at 28 February 2022. Performance comparatives have been included from 2020/21.

	Feb 21/22	Jan 21/22	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Green (meeting target)	5	5	6	5	5	8	5	6	6
Amber (within tolerance)	1	1	1	1	2	2	3	1	1
Red (not meeting target)	7	7	8	9	6	7	7	8	8
No target (homelessness)	3	3	3	3	3	0	0	0	0
Quarterly / Annual KPIs	4	4	2	2	4	0 ¹	4	4	4
Total	20	20	20	20	20	17 ¹	19	19	19

<u>NB :</u>

¹ For 2020/21, there were four annual KPIs. Two of these were related to a planned January 2021 STAR survey but this was deferred until July 2021 as part of a wider programme. This is now complete and included in this report

3. KPI commentary

3.1. KPI 2 : Void rent loss (lettable voids)

Target February 22 Y1	Target February 22 YTD Performance					E THAN	TARGE	T – REI	
	Feb 22	Jan 22	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Void rent loss YTD %	0.78%	0.78%	0.79%	0.79%	0.82%	1.00%	1.02%	0.97%	0.97%
Void numbers at month / quarter end	174	173	147	159	142	159	216	195	209

The number of voids held at the end of February shows a slight increase from January.

This figure includes eight non lettable voids, which includes five awaiting demolition and two to undergo Option Appraisal.

Month end performance at 0.79% shows a sharp increase when comparing to the previous month (January) of 0.67%. However, cumulative performance remains the same as the previous month of 0.78%.

The YTD number of terminations at remains slightly higher than the number of relets. It is imperative that the number of re-lets exceeds the number of terminations to ensure a continued improvement in performance.

A number of issues are contributing to targets not being achieved; increased delays waiting for R&D survey results, asbestos containing materials (ACM) removals, shortage of materials, delays waiting for the delivery of non stock items.

3.2. KPI 3 : Average Days to Re-let Standard Properties

Target	20.00 days	
February 22 YTD Performance	33.73 days	WORSE THAN TARGET – RED

	Feb	Jan	Q3	Q2	Q1	Q4	Q3	Q2	Q1
	22	22	21/22	21/22	21/22	20/21	20/21	20/21	20/21
Re-let days	33.73	33.19	32.39	31.62	32.72	46.11	48.27	49.32	55.05

In month performance for February stands at 37.83 days, this shows an improvement when comparing to January's of 40.36 days.

Cumulative performance shows a slight decline, standing at 33.73 days, when comparing to the previous month of 33.19 days, this remains worse than target.

A number of low demand properties are adversely impacting on performance as they become re-let.

Stringent monitoring remains in place across all teams involved in the key to key process to ensure work is completed in voids and all teams are working collectively to ensure that voids are re-let at the earliest opportunity to ensure a continued improvement in performance.

3.3. KPI 7: Number of complaints upheld as a percentage of all interactions

Target	0.07%	
31 January* YTD Performance	0.13%	WORSE THAN TARGET – RED

*Complaints are reported one month in arrears to ensure that the complaints are closed down within our service standard of 10 working days.

The table below summarises the interactions and complaints upheld in the seven months to end of October for the past three financial years

	Interactions	Complaints	Upheld	% upheld
21/22	286,718	957	363	0.13%
20/21	295,029	852	191	0.07%
19/20	289,749	957	216	0.08%

Volumes of both interactions and complaints continue to fluctuate each month, which makes comparisons to previous years unrepresentative due to restrictions placed on the organisation due to Covid-19.

In January 2022 we received 114 complaints. This is an increase of +40 compared to last month however, December is usually the quietist month. This is however +56 more than we received compared to January 2021 and is the highest volumes of complaints we have seen in January for the past 4 years, whilst also seeing a reduction in the number of interactions into the organisation compared to last year by 6,749.

50 of those 114 complaints were upheld (43.8%). The number of complaints upheld has increased by +17 compared to last month and +27, compared to January 2021.

We analyse the % of complaints upheld against all customer transactions. This provides us with a picture of our customer's dissatisfaction and enables us to drill down further into the relevant service areas.

The information for January 2021, shows that we have not achieved our 0.070% target, achieving 0.206%. Cumulatively we are also over our target, achieving 0.127%.

The main themes for upheld complaints in January 2022 continue to relate to time taken to complete a repair, lack of information / communication and staff actions. Complaints are currently being analysed in detail and plans and a presentation are being prepared to address the poor performance.

Profiled target7.2 daysYear end target7.9 daysFeb 22 YTD Performance10.9 daysWORSE THAN TARGET – RED

February saw 0.9 days' absence per employee down significantly from February (1.4 days per FTE) but still significantly higher than target of 0.7 days. The YTD position now stands at 10.9 days per FTE which as we saw last month is now above annual target for year of 7.9 days per FTE with the year end projection increasing slightly to 11.5 (from projected 11.2 days last month). This figure is significantly higher than last year or indeed previous years.

This month we have lost a total of 640.5 (compared to 976.4 in December) and the lowest since October. This represents a drop in both directorates but most notably within Housing and Customer Services.

This financial year positive Covid cases have YTD accounted for 14.9% of all absence with 1,177.9 days in total. This is significantly higher than last financial year. If we consider our total absence with the exception of Covid this would bring our YTD absence to 9.3 days per FTE and 0.8 days this month, whilst still above target this is significantly lower. We must also consider the possible indirect impact of Covid.

Positively, Covid related absence has reduced during February in line with the reduction on positive reported cases. Accounting for 67.0 days this month in comparison to 291.6 days in January and the lowest number since August 2021. Based on positive reported cases this figure is expected to continue to reduce during March.

The highest cause of absence YTD remains stress depression and anxiety accounting for a 40.1% of the absence (no significant change from last month). Non work related stress remains the biggest contributors with work related stress accounting for just 3.7% of this total and a total of 26.9 days within the month accounting for specific cases which are being directly managed. This month has seen a decrease in the actual number of days absent for all forms of stress with the exception of work related stress with remains the same and is accounted for in one individual case as at today's date.

The second highest reason for absence remains MSK accounting for 20.1% of the absence (no significant difference from last month at 19.9%) followed by Coronavirus which now accounts for 14.9% of all absence

3.4. KPI 12a and 12b : Local expenditure

It should be noted here that historically SLHD has always reported expenditure of a Revenue nature for the KPI, but following discussions with DMBC, will now report two local expenditure KPIs, the second of which will include Capital spend:

- KPI 12a % Local expenditure of a Revenue nature only (as before)
- KPI 12b % Local expenditure of a Revenue <u>and</u> Capital nature

Target	70.0%	
KPI 12a Feb 22 YTD	58.7%	WORSE THAN TARGET – RED
KPI 12b Feb 22 YTD	71.5%	BETTER THAN TARGET – GREEN

The table below summarises the total and Doncaster spend for the eleven months to end of February with comparatives from previous financial years.

			KPI 12a	KPI 12b
	Doncaster	Total		Incl Capital
	spend YTD	spend YTD	KPI%	spend %
21/22	£5,827k	£9,923k	58.7%	71.5%
20/21	£5,002k	£9,669k	51.7%	tba
19/20	£5,156k	£8,496k	60.9%	tba

Cumulatively, YTD performance for KPI12a stands at 58.7% and an underperformance of £1.12m.

For the new KPI 12b including Capital spend, cumulative performance for the year to date is 71.5% and the target met.

Changing the balance of local spend is only potentially possible at the point that contracts are renewed and if local suppliers are appointed as part of this process. This is not always possible if local suppliers do not exist, do not put forward bids or tender submissions, are not part of consortia frameworks being utilised, or are unable to demonstrate value for money through legally required, transparent procurement processes.

Based on the types of goods and services due to be procured over the coming months, it is not anticipated that SLHD will be able to increase local revenue spend much further than it is currently and the target will not be achieved by year end.

Annual KPIs

The annual STAR survey for 2021/22 is now complete and results were received in September. These are currently being analysed in detail and action plans developed as required. The two indicators have been included since Q2 reporting.

3.5. KPI 16 : Tenant satisfaction with overall service

Target	87.0%	
2021/22 Performance	84.8%	WORSE THAN TARGET – RED

3.6. KPI 18 : Tenant satisfaction with property condition %

Target	89.0%	
2021/22 Performance	86.5%	WORSE THAN TARGET – RED

Nigel Feirn Head of Finance and Business Assurance 01302 737485

Appendix A – 28 February 2022 2021/22 KPI dashboard

St Leger Homes of Doncaster Performance Dashboard 28 February 2022

Colour = Cumulative performance (Tick/Green = On Target, Triangle/Orange = Near to Target, Cross/Red = Not on Target, Blue = No Target) **NB** : Arrows = compares performance in the month with performance in the previous month (↑= Improved, ↓= Not Improved, ↔ = Remained the same)



ST LEGER HOMES OF DONCASTER LTD Company limited by guarantee registered in England Company Number 05564649 **Board Meeting** REPORT Date : 07 April 2022 10 Item : Subject Strategic Risk review 2022/23 : Presented by : Julie Crook **Director of Corporate Services** Prepared by : Nigel Feirn Head of Finance and Business Assurance Purpose To present Board with the updated : Strategic Risk Register. Recommendation: That Board note the updated Strategic Risk Register.

Agenda Item 10 Date: 7 April 2022

1. Report Title

1.1. 2022/23 Strategic Risk review

2. Executive Summary

- 2.1. Board and Audit and Risk Committee receive periodic updates on the company's Risk Registers, the most recent review being presented to Board in January 2022.
- 2.2. The purpose of the Quarter 4 review is to consider all the strategic risks facing the company during the next financial year 2022/23. A full review of the Strategic Risk Register (SRR) was undertaken by Leadership as the main agenda item at their meeting on 3 March 2022.
- 2.3. There were no new risks added to the SRR but a number of changes were made to the risk descriptions, with some combined, as summarised below:
 - Combined 'manage political and local expectations of St Leger Homes' and 'deliver on performance and value for money as measured by DMBC';
 - **Amended** 'to develop and maintain <u>a robust and secure ICT</u> framework' to reflect the increasing importance of cyber security;
 - **Amended** 'deliver the Digital transformation programme to develop, maintain <u>and optimise use</u> of ICT systems' to emphasise the need to make best use of ICT systems and operate efficient processes;
 - **Amended** 'effectively govern and manage in an increasingly regulated climate'. Removed the <u>'and uncertain economic'</u> element and moved this in to 'maintain core service delivery and business continuity under adverse external factors'. These should now reflect the emphasis on effective governance arrangements in the former and the impact of the uncertain economy with high inflation, energy prices, etc. on customers and how we deliver our core services in the latter risk.
- 2.4. There have also been updates to causes, effects, controls, assurances, and actions. The risks are again rated based on the existing and planned controls in place.
- 2.5. The SRR dashboard and risk details, attached at **Appendix A.** The summary table below show ratings for each risk on the register as follows:
 - **INHERENT** Risk the risk score on the assumption of no controls in place.
 - **CURRENT RESIDUAL** Risk the risk score taking into account the <u>current</u> controls in place to mitigate the risks.
 - **FORECAST RESIDUAL** Risk (post actions) the risk score <u>after</u> taking into account the <u>planned</u> controls are in place and actions are completed.

- 2.6. Each risk is assessed based on a 5 x 5 numerical traffic light scoring matrix, which comprises of <u>likelihood</u> and <u>impact.</u> The risk scoring matrices are attached at **Appendix B.**
- 2.7. Following the above changes, the SRR now has nine risks. The table below summarises their Inherent, Current and the new Forecast Residual ratings. Comparatives have been included where possible, but some are no longer appropriate given the changes

		Q4 March 2021/22			Q3	December 20)21/22
	Risk – Failure to :	Inherent rating	<u>Current</u> Residual Rating	<u>Forecast</u> Residual Rating	Inherer Rating		Forecast Residual Rating
1	manage Homelessness issues within the borough	20	16	12	16	12	12
2	develop and maintain a <mark>robust and secure</mark> ICT framework	20	12	8			
3	deliver the Digital transformation programme <mark>and optimise use of ICT</mark>	16	12	4			
4	manage political and local expectations of SLHD and deliver on performance and value for money as measured by DMBC	20	15	10			
5	recruit, develop and retain a skilled, efficient and effective workforce	16	16	12	6	9	6
6	manage all issues surrounding property compliance risks, including high risk residential accommodation and any emerging requirements	25	15	10	25	15	10
7	manage corporate health, safety and compliance risks	25	15	10	25	15	10
8	effectively govern and manage in an increasingly regulated climate	12	8	4	20	10	5
9	maintain core service delivery and business continuity as a result of external factors (eg. Covid19, inflation, fuel and material shortages, weather)	20	12	12	25	9	6

Risk rating score key : R A G

7 - 19

1-6

2.8. Operational Risk Registers: Service areas have previously conducted a thorough review of their Operational Risk Registers and a further review is due. This is yet to take place due to other operational priorities.

3. Purpose

3.1. To present Board with the updated Strategic Register (Appendix A).

20-25

4. Recommendation

4.1. That Board note the updated Strategic Risk Register (Appendix A).

5. Background

- 5.1. Since the last update to Board in January 2022, SLHD's main focus areas have been embedding OpenHousing and also service planning for 2022/23 including budgets, KPIs, Health, Safety and Compliance and the Social Housing White Paper.
- 5.2. In relation to the risks on the SRR, there have been few events since January, but the items to note are :
 - OpenHousing quarter 4 has focussed on any teething troubles or outstanding development;
 - Repairs Excellence Project positive results from a pilot scheme to improve no access/carded jobs performance. Plans now to roll out across the borough;
 - Office accommodation SLHD offices are open but most office-based staff continue to work from home. A project plan is in place for the move to the Civic office and this should complete by April 2022.
 - Following the emergence of a new variant in January, Covid19 infections have reduced and restrictions across the country almost all but gone;
 - DMBC approval for 2022/23 of rent increases at 4.1%, plus other increases (District Heating at 20%, Garage rents at 3%);
 - Large increases in utility and fuel prices nationally; and
 - Further economic uncertainty with conflict in Ukraine.

6. Procurement

- 6.1. The SLHD procurement function transferred to DMBC on 1 December 2021 and services are now provided under a Service Level Agreement.
- 6.2. Robust procedures are unchanged and are inherent within a number of strategic and operational risks, and are a fundamental part of SLHD's assurance framework.

7. VFM Considerations

- 7.1. The underlying principle of risk management is to identify and manage risk in a controlled and cost-effective manner, rather than react to a situation when a risk has materialised which could incur unplanned expense.
- 7.2. As referred to above, VFM is achieving the optimum balance of costs and performance, and the financial reporting and performance management frameworks in place ensure VFM is managed as effectively as possible.

8. Financial Implications

8.1. The financial implications associated with this report are referenced in the register as appropriate.

9. Legal Implications

9.1. There are no direct legal implications, however, the risk management process will enable SLHD to better identify any risks associated with non-compliance against relevant legislation.

10. Risks

10.1. Risk management should be an integral part of the business planning process and be embedded within our day to day operations. Without the implementation of a risk management framework and development of a risk management culture, there is a possibility of SLHD not delivering its strategic objectives.

11. IT Implications

11.1. The IT implications relating to this report are detailed within the specific risks within the register.

12. Consultation

12.1. The approach to risk management has been developed with consultation and input by DC's internal audit service.

13. Diversity

13.1. There are no diversity issues arising from this report.

14. Communication Requirements

14.1. There are no specific communication requirements with this report unless members wish to raise and communicate any issues.

15. Equality Impact Assessment (new/revised Policies)

15.1. Not applicable to this report.

16. Environmental Impact

16.1. Not applicable to this report.

17. Report Author, Position

Nigel Feirn Head of Finance and Business Assurance

Background Papers

Appendix A – Strategic Risk Register Appendix B – Risk scoring matrices

Strategic Risk Register - Dashboard as at Q4 2021/22

	INHERENT Risk			CURRENT RESIDUAL Risk			FORECAST RESIDUAL Risk (post actions)		
	Likelihood	Impact	Rating	Likelihood	Impact	Rating	Likelihood	Impact	Rating
Strategic Risk - Failure to :	1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	Impact score x likelihood score	1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	Impact score x likelihood score	1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	Impact score x likelihood score
1. manage the Homelessness issues within the Doncaster borough	5	4	20	4	4	16	3	4	12
2. to develop and maintain a robust and secure ICT framework	4	5	20	3	4	12	2	4	8
3. deliver the Digital transformation programme and optimise use of ICT	4	4	16	3	4	12	2	2	4
4. manage political and local expectations of St Leger Homes and deliver on performance and value for money as measured by DMBC	4	5	20	3	5	15	2	5	10
5. recruit, develop and retain a skilled, efficient and effective workforce	4	4	16	4	4	16	3	4	12
6. Manage all Building Safety related ssues surrounding High Risk Residential Building and any emerging new requirements (HRRBs)	5	5	25	3	5	15	2	5	10
7. Manage corporate health, safety and compliance risks	5	5	25	3	5	15	2	5	10
8. effectively govern and manage in an increasingly regulated climate	3	4	12	2	4	8	1	4	4
9. maintain core service delivery and business continuity under adverse external factors (eg. Covid, inflation, fuel and material shortages, weather)	5	4	20	3	4	12	3	4	12

RISK OWNER	Head of Access to Homes					
FAILURE TO	1. manage the Homelessness issues within the Doncaster	borough				
What might cause the risk to occur? 'CAUSE'	 * Impact of Universal Credit (UC) Intial transition is now business as usual, post pandemic adjustments (£20) together with inflationary pressures * Reduction in turnover of Social Housing stock and impact on demand reducing early intervention opprtunities. * Additional Grants for homeless initiatives are time limited. * Unaffordable Private Rented Sector, access to Social Housing * Review and recommissioning of Supported Housing Model * Extreme Weather Events * Increases in number of rough sleepers * Reduction in commissioned services * Workforce - structure, vacancies, pay, retention, behaviours * Pandemic affects availability of Accommodation Options 					
What are the possible consequences if the risk occurs? 'EFFECT'	Increase in demand on service beyond accepted levels Judicial Review of Homelessness cases Unable to effectively prevent Homelessness Reduction in Housing Pathways Increased demand for Temp Accom / B&B during transition to new supported housing model. Supply not meeting demand from those in greatest need Reputational damage Economic impact on Town Centre and reputational damage Insufficient supply of housing options to meet needs. Juable to deliver statutory service leading to a reduction in prevention and an increase in homelessness Government legislation amended to accommodate a wider group of people. Turnover of accommodation is reduced restricting move on options.					
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely	5					
5 = Very likely 1=Slight, 2=Moderate,	4					
3=Significant, 4=Major 5 = Critical Impact score x likelihood score	20					
What existing processes / controls are in place to manage the risk?	 * UC now business as usual and arrears under control. * Increased Management Fee to increase capacity. * Tenancy Sustainability team established * Allocation Policy reviewed * Identify and apply for additional resources through new funding streams. * Monitoring and Flexible use of DMBC stock for temp accommodation * Annual review of Severe Weather Emergency Plan (SWEP) * Revised staffing structure in development * Complex Lives Alliance * Multi agency engagement in developing a new housing support model. * New structure providing opportunity for progression and succession planning. * Multi agency monitoring in place through Complex Lives Alliance and through Gold, Silver and Br * MHCLG Funding 	onze meetings				
What are the current assurance activities around the risk?	 * Performance Management demonstrates an increase in preventions. * New software providing improved quality assurance on Data * Improved case management by Team Leaders * Homelessness Board established overseeing Strategic Action Plans * Partnerships in place * Monitoring of Allocations Policy and lettings by priority bands * New Homelessness & Rough Sleeping Strategy * Successful bids for additional resources-staff turnover has stabilised, * Recovery Plans in Place * Additional Agency staff in place to cover vacancies in the system. 					
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely	4					
5 = Very likely 1=Slight, 2=Moderate,						
3=Significant, 4=Major 5 = Critical	4					
Impact score x likelihood score						
	What further action is planned to treat the risk?	Action owner ? Home Choice	Timescale			
Action 1	Review of Allocations Policy	Service Manager Home Options	Dec-22			
Action 2	Review Home Options Structure to align with whole systems approach	Service Manager Head of Customer	Jun-22			
Action 3	Review comms planner ensuring effective internal & external comms	Services Head of Access to	On-going			
Action 4	Work in partnership to mainstream Rapid Rehousing Pathway Project	Homes / Housing Management	Jun-22			
Action 5	Deliver Homelessness and Rough Sleeping Strategy Action Plan	Head of Access to Homes	Ongoing			
Action 6	Maximise use of all Housing Options including the Private Rented Sector	Head of Access to Homes / Housing Management	Ongoing			
Action 7	MHCLG RSI round 4 funding Secured and R5 to be developed	Head of Access to Homes	Jun-22			
Action 8	Develop next steps accommodation plan to reduce the number in Hotel Accommodation.	Head of Access to Homes	On-going			
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	3					
1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	4					
5 = Critical Impact score x likelihood score	12					

RISK OWNER	Director of Corporate Services				
FAILURE TO	2. to develop and maintain a robust and secure ICT	framework			
What might cause the risk to occur? 'CAUSE'	 * Under investment in ICT systems * Inadequate IT strategy * Disparate systems * Lack of clear outcomes in service transformation / improvement * Insufficient ICT knowledge, skills and capacity * Organisational cultural resistance to change * Lack of reliable and responsive access to ICT network and solutions (eMail, Office, Teams, back office solutions etc.) * Inadequate partnering arrangments with DC and key software and hardware suppliers 				
What are the possible consequences if the risk occurs? 'EFFECT'	Security breach / cyber attack Poor/loss of service delivery and inefficient / unproductive working practices Reduction in customer satisfaction and confidence Loss of customer information / Data Protection Act breach and fine Lack of customer insight and IT systems to enable storing of information. Inaccurate and/or delayed financial and performance information Inefficiencies and duplication in data entry to maintain systems Lack of access to information/intelligence to inform the business ICT system outages (downtime). Inability to perform activities due to lack of ICT access Decision-making based on flawed or inaccurate data Poor VFM - better systems would drive efficiency savings				
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely	4				
5 = Very likely 1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	5				
Impact score x likelihood score	20				
What existing processes / controls are in place to manage the risk?	 * ICT Strategy * SLA with DC * Migration to O365 and cloud computing to improve ICT service response times and reliability * Issue of laptops and general kit to allow more flexible and remote working * Robust Business Continuity Plans with manual and paper based approaches when ICT outage occurs 				
What are the current assurance activities around the risk?	 * Investment in ICT infrastructure and security protocols. * TOP - single system to replace several disparate systems implemented October 2021. * Liaison meetings with DC. * Business transformation programme and Forward Work Plan identifying areas for improvement. * Minimal system downtime and strong performance to maintain services into and during lockdown. * Positive employee survey feedback. * Customer Access Strategy which support transformational change for channel shift * Digital Transformation Board in operation 				
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	3				
1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	4				
Impact score x likelihood score	12	1			
	What further action is planned to treat the risk?	Action owner ?	Timescale		
Action 1	Investment and development of a secure and reliable solutions and ICT network, while taking advantage of the O365 products and services.	Head of ICT & BT	on-going		
Action 2	Contribute and react to cyber security exercises	Head of ICT & BT	ongoing		
Action 3		┞─────────────────			
Action 4					
Action 5 Action 6		<u> </u>			
Action 7					
Action 8					
Action 9					
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	2				
1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	4				
Impact score x likelihood score	8				

RISK OWNER	Director of Corporate Services						
FAILURE TO	3. deliver the Digital transformation programme and optimise	e use of ICT					
	* Insufficient resources - staff, skills, knowledge, budget, to deliver projects and overal	ll programme					
	* Unclear objectives	1 5					
What might cause the	* Conflicting business priorities						
risk to occur?	* Resistance to change from employees at all levels						
TISK to occur?							
	* Resistance from DMBC and/or partner organisations						
'CAUSE'	* Low take up/demand by customers						
	* Poor project management						
	ack of product awareness/availability						
What are the possible	* Services which do not meet tenants/customers needs or expectations = dissatisfaction	on					
consequences if the	* Failure to realise savings/efficiencies which the business needs to make						
risk occurs?	* Inefficient processes						
	* Reduced employee satisfaction, motivation and engagement						
'EFFECT'							
1=Very unlikely, 2=Unlikely,							
3=Possible, 4=Likely	4						
5 = Very likely 1=Slight, 2=Moderate,							
3=Significant, 4=Major	4						
5 = Critical							
Impact score x likelihood score	16						
score							
	* Project plans in place for projects identified as part of the programme.						
M/bet evicting	* Third-party expertise brought in to increase capacity and contribute specialist knowle	dao					
What existing		uye					
processes / controls	* TOP Project manager job regraded/market supplement applied						
are in place to manage							
the risk?	* Priorities and outcomes defined and communicated.						
	* Comms plan in place to help inform/engage staff and to promote cultural as well as p	procedural changes	5				
	* Digital Transformation Board Programme chaired by Director of Corporate Services						
	* Project Managers assigned for key projects						
	* Procurement policies and procedures						
What are the current	* Communication plans in place to involve employees						
assurance activities	* Deliver redesigned processes open to new ways of working						
around the risk?	* Working with Capita to further develop the new housing system 'OpenHousing'						
	* Liaison meetings with DMBC, Capita and key suppliers.						
	* ADP / SDP development to consider corporate priorities and capacity.						
	* Development of communications plan and CRM culture.						
1=Very unlikely, 2=Unlikely,							
3=Possible, 4=Likely	3						
5 = Very likely 1=Slight, 2=Moderate,							
3=Significant, 4=Major	4						
5 = Critical Impact score x likelihood							
score	12						
	What further action is planned to treat the risk?	Action owner ?	Timescale				
		Director of					
Action 1	Deliver Digital Transformation Board programme	Corporate Services	on-going				
Action 2	Continual clarification of objectives to optimise activities and resources	Director of	on-going				
		Corporate Services Director of					
Action 3	Develop and implement a consistent approach to managing change	Corporate Services	on-going				
		All Heads of					
Action 4	Develop benefits realisation plan and timetable	Services &	on-going				
Action 5	Delivery of robust training and date capture of all learning delivered on LMS	Directors Head of ICT & BT	on-going				
Action 6	Forward Work Plan of Service Reviews and Project development	Head of ICT & BT	on-going				
Action 7	Embed Project Management culture in the Business Transformation Team	Head of ICT & BT	on-going				
Action 8	Develop and implement a new Benefits Capture process	Head of ICT & BT	on-going				
Action 9	Work with OD Colleagues in developing a 'digital culture' using intranet and webinars	Head of ICT & BT	on-going				
			Review				
			concluded. Further work				
			needed to				
	Review of Customer Insight data - what, how we collect and how we keep it up to	Head of Customer	improve				
Action 10		Services	collection rates.				
	date.	OCIVICCS	Linked to My				
			Access Portal				
			and 'One Housing'				
			December 2022				
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely	2						
5 = Very likely							
1=Slight, 2=Moderate, 3=Significant, 4=Major	2						
5 = Critical							
Impact score x likelihood score	4						

RISK OWNER FAILURE TO	Chief Executive 4. manage political and local expectations of St Leger Homes and deliver on p	performance and	value for money as				
What might cause the risk to occur? 'CAUSE'	measured by DMBC * Unrealistic expectations * Lack of understanding of role and remit * Unexpected Increases in demand for services * Comparisons with better resourced Housing Associations * Failure to react to changing demand * Failure to sell the need for change to key council members * Change in national and local political leadership * Conflicting priorities * Extensive partnership arrangements and unreasonable expectations * Change in new Chief Executive approach * Poor / inadequate operational performance * Poor / inadequate budgetary control * Failure to deliver value for money						
What are the possible consequences if the risk occurs? 'EFFECT' 1=Very unlikely, 2=Unlikely,	* Poor, lower quartile benchmarking performance	Unrealistic political expectations Services taken back 'in house' Increase in Councillor complaints Reduced customer satisfaction Failure to support strategic, operational and policy initiatives Reputational damage Excessive demands on time impacting on capacity for core service delivery Increase in complaints and members enquiries Reduced customer satisfaction Overspend and loss of trust of Board and Council, reduction in services Upheld complaints and increased fines which impact on budget and service delivery					
3=Possible, 4=Likely 5 = Very likely	4						
1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	5						
What existing processes / controls are in place to manage the risk?	20 Regular Mayoral and portfolio member briefings and attendance at relevant member and officer briefings Councillor complaints and monitoring system in place STAR customer and transactional satisfaction survey Member Consultation processes in place Proactive engagement with our customers; Ward member monthly updates by comms and area teams, and meeting attendance; Estate walk invites; Inclusive and extensive selection process Weekly / Monthly performance reporting to EMT, quarterly by Board, Cabinet and OSMC and action plans developed Monthly budget monitoring by EMT and quarterly by Board, Cabinet and OSMC and action plans developed Monthly budget monitoring by EMT and quarterly birefings and regular attendance at Cabinet and OSMC Monthly CEO/Dir of Environment and Regen meetings, Regular finance and quarterly OLB/Challenge meetings. National and service specific benchmarking arrangements in place; Annual VFM self assessment and statement Business Intelligence (BI) tool (Qlik) implemented producing real time performance information						
What are the current assurance activities around the risk?	 * OH - new integrated housing management solution which will improve operational efficiency * New 5 year M'ment Agreement in place from April 2019 * From 2019/20 new corporate plan aligned with Doncaster Growing Together / Mayoral strategic plan * Customer Involvement strategy actions being completed * Regular Portfolio Member briefings * Review of external communications completed - will be used to inform a revised communications strategy to be produced in 21/22 * STAR surveys in July each year and Transactional Surveys to take place April and October each year. * Top quartile customer satisfaction (STAR and other surveys) * Timely, accurate, regular budget monitoring, both capital and revenue * Low cost, mid to high performance benchmarking position nationally and peer group * Review of Quartiles 3 and 4 indicators and actions * Positive annual VFM statement production 16/17, 17/18, 18/19, 19/20 and 20/21 * Letter of comfort from DMBC on KPIs and budgets for Covid affected 19/20 						
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely	* Redesigned 1:1 framework linking goal setting, performance and compliance to individual 1:1s						
5 = Very likely 1=Slight, 2=Moderate,							
3=Significant, 4=Major 5 = Critical	5						
Impact score x likelihood score	15 What further action is planned to treat the risk?	Action owner?	Timescale				
Action 1	Review Customer Involvement/Tenant Voice strategy, model and structure	Head of Housing	Jul-22				
Action 2	Increase effective engagement through implementation of outcome of review of	Management Head of Housing	Jun-22				
Action 3	model and stucture Delivery of customer experience training - rolling programme. Training to be delivered in 21/22	Management Head of Customer Services/Head of HR and OD	Training to be delivered 22/23. Delayed due to Covid				
Action 4	Undertake review of 5 year Corporate Plan	EMT	Jun-22				
Action 5 Action 6	Implement bi-annual Councillor forums Undertake 360 degree appraisals of the Chief Executive	EMT Board	ongoing				
Action 7	Undertake 360 degree appraisals of the Chief Executive Board ongoing Analysis of customer transactional and STAR survey feedback Head of Customer Service Completed for 21/22 but on going each year. Report to EMT in January 2022 foctober/November 21 feedback.						
Action 8	e5 CP development for SLHD, HRA and Capital Programme budget monitoring	Head of Finance and BA	On-going				
Action 9	Re-design and deliver 1:1 and performance management training to all people managers	Head of HR and OD	Ongoing				
Action 8							
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	2						
1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	5						
5 = Critical Impact score x likelihood score	10						

RISK OWNER	Head of HR & OD					
FAILURE TO	5. recruit, develop and retain a skilled, efficient and effect	ive workforce				
What might cause the risk to occur? 'CAUSE'	 * Occupational shortages/skills shortages * Ageing workforce - lack of succession planning * Lack of management buy in to recruitment changes (behaviours v. knowledge) * Lack of manager involvement in employee engagement / change management * Failure to identify the skills needed for the future (e.g. digital) * Failure to manage people in line with policies and procedures * Policies and procedures - not aligned with strategic direction * Inappropriate targets and lack of timely performance information or management * Lack of appropriate equipment and training * Inability to fill vacancies due to economic factors or pay market rates. * Inadequate systems * Lack of career progression/ development opportunities 					
What are the possible consequences if the risk occurs? 'EFFECT'	 * Posts unfilled, impacting on ability to deliver services to our customers * Reduced employee satisfaction and engagement * Increased employee turnover *Increased sickness absence * Reputational and brand damage * Failure to comply with legislation/regulation * Unproductive and demotivated staff * Lower quartiles benchmarking * Customer dissatisfaction and increase in complaints * Health and safety risks * Poor culture 					
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	4					
1=Slight, 2=Moderate, 3=Significant, 4=Major	4					
5 = Critical Impact score x likelihood score	16					
What existing processes / controls are in place to manage the risk?	 * People Strategy in place * Behaviours framework inplace * Financial and Performance Management framework in place * Leadership development programmes completed * Strategies, Policies and Procedures framework in place * National and local benchmarking arrangements in place * Market supplement available 					
What are the current assurance activities around the risk?	 Workforce planning process in place Leadership Development completed across the business First line manager program delivery ongoing Wider range of apprenticeships across the business and career start activity Regular employee surveys undertaken A range of employee benefits, and employee health, safety and wellbeing communicated regularly Regular check in (personal review) meetings between employees and their line manager Top quartile customer satisfaction Budget monitoring and Performance Management frameworks in place People strategy in place Increased resources as required Be well at work Silver award achieved in 2020. Plan for Gold in 2022 - through wellbeing at work g Development of the future ways of working including agile, remote and flexible working Behaviours embedded in job descriptions to enhance recruitment Complaints training delivered to all Service Managers and Team Leaders. Refreshed people performance framework, linking goal setting, performance and compliance to re Implemented new industry standard Schedule of Rates (SORs); Personal Development Plans for all staff in place for 2022, with central monitoring; Repairs Excellence Board in operation Internal audit recommendations implemented 	roup				
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	4					
1=Slight, 2=Moderate, 3=Significant, 4=Major	4					
5 = Critical Impact score x likelihood score	16					
50018	What further action is planned to treat the risk?	Action owner ?	Timescale			
Action 1	Management Development Programme. First Line Managers programme commenced Jan 20	Head of HR and OD	Cohorts ongoing and planned into			
Action 2	Develop succession planning	Head of HR and OD	2022 Sep-23			
Action 3	Introduce peer group performance benchmarking specifically for tradesteam DLO	Head of Repairs and Maintenance	Oct-22			
Action 4	Deliver year 2 of the People Strategy	Head of HR and OD	Mar-22			
Action 5	Define and implement future agile ways of working	Head of HR and OD	Ongoing			
Action 6	Delivery of customer experience training - rolling programme. Training to be delivered in 21/22	Head of Customer Services/Head of HR and OD	To be delivered 22/23. Delayed due to Covid			
Action 7	Deliver Repairs Excellence Project	Head of Repairs and Maintenance	Ongoing			
Action 8	Detailed benchmarking of Trade Pay to further analyse turnover and vacancies againt the market conditions	Head of HR and OD	Apr-22			
Action 9 1=Very unlikely, 2=Unlikely,						
3=Possible, 4=Likely 5 = Very likely 1=Slight, 2=Moderate,	3					
3=Significant, 4=Major 5 = Critical	4					
Impact score x likelihood score	12					

RISK OWNER	Head of Building Safety						
FAILURE TO	6. Manage all Building Safety related ssues surrounding High Risk Residential new requirements (HRRBs)	Building and any	emerging				
What might cause the risk to occur? 'CAUSE'	 * Failure to carry out risk assessments and deliver resultant recommendations * Lack of leadership, governance, scrutiny and performance monitoring of compliance with Building Safety * Failure to adhere to legislation and keep up to date with emerging best practice and legislative changes * Lack of a responsibility and accountability culture within employee roles in the organisation * Lack of suitably trained, sufficient and competent resources to monitor/deliver compliance * Failure to understand the Building Safety agenda and subsequent legislation * Failure to conduct, review and record spectific fire strategies for each HRRBs * Lack of management of future works to buildings by ourselves and other contractors employed by tenants * Suitability of residents within HRRBS and management of the complex issues of vulnerable tenants living in HRRBs * Lack of engagement with tenants and residents * Inability to complete recommedations due to unavilability of materials or specilaist labour 						
What are the possible consequences if the risk occurs? 'EFFECT' 1=Very unlikely, 2=Unlikely,	 * Loss of life, serious physical or mental injury * Loss or serious damage to assets * Investigations and action by regulatory bodies * Legal action (criminal and civil) * Reputational damage, * Financial penalties * High risk residential buildings are deemed as unsafe and residents put at risk * Failure to secure Building Assurance Certificate due to absence of information within the building safety case. * Prohibition notice served or company prosecuted for failure to maintain safety standards * Properties become undesirable/difficult to let, estates have crime and ASB * Vulnerable tenants not receiving the support they need 						
3=Possible, 4=Likely 5 = Very likely 1=Slight, 2=Moderate, 3=Significant, 4=Major	5						
5 = Critical Impact score x likelihood	25						
score							
What existing processes / controls are in place to manage the risk?	 * H&S management framework in place, including specific policies, plans and procedures and compliance register * High Rise Forum established * Processes to ensure employees are competent (skills, knowledge, training, training, tool box talks) * Health, safety and compliance report in place. Key stakeholder scheduled reporting * Annual budget allocation * Independent surveys and audits (i.e. gas and electricity) Morgan & Lambert * Annual fire risk assessments are carried out by nationally recognised external fire engineer/expert * Working Group established to monitor progress of FRA recommendations * Compliance team in place * Head of Building Safety appointed. 						
What are the current assurance activities around the risk?	 * External experts appointed to provide advice on building safety and fire related issues * New Board reporting governace - Building Safety & Compliance Committee * Internal and external audit programme * Self assessment compliance check against legal register * On site caretaker service and CCTV monitoring reports * Fire risk assessments & type 4 surveys * Partnership working with South Yorkshire Fire and Police services * Engagement with tenants * Fire risk issues capacity in team * Structure and staffing resources in relation to Building Safety reviewed * External health check on 'fire' undertaken by independent external consultancy. * Training requirements identified across the business and training programme developed to support and manage building safety and compliance 						
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	3						
1=Slight, 2=Moderate, 3=Significant, 4=Major	5						
5 = Critical Impact score x likelihood	15						
score	What further action is planned to treat the risk?	Action owner ?	Timescale				
Action 1	Completion of recommendations arising from FRAs	Head of Building	Ongoing				
Action 2	Develop resident engagement strategies for each high risk building in consultation with HOHM (draft created and circulated to members of High Rise Forum, Building Safety Group and Housing Management Team March date scheduled for EMT approval)	Safety Head of Building Safety	Jul-22				
Action 3	Complete recommendations arising from the 'fire' external health check. Wates render system replacement comencing April 20222	Head of Building Safety	May-22				
Action 4	Fill remaining vacancies within the Building Safety Team following structure review. There are two vacancies left in the building safety team for building safety surveyors, these will be appointted following the Assets restructure	Head of Building Safety & Head of HOAM	Sep-22				
Action 5							
Action 6							
Action 7 Action 8							
Action 9 Action 10							
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely	2						
5 = Very likely 1=Slight, 2=Moderate, 3=Significant, 4=Major	5						
3=Significant, 4=Major 5 = Critical Impact score x likelihood score	5 10						

RISK OWNER	Head of Building Safety				
FAILURE TO	7. Manage corporate health, safety and compliance ri * Lack of an effective health and safety management system	SKS			
What might cause the	 * Failure to carry out suitable and sufficient risk assessments and produce safe systems of work * Failure to adequately follow corporate policies, procedures and risk assessments (culture) * Lack of a responsibility and accountability culture within the organisation - both employees and management * Lack of leadership around health, safety & compliance 				
'CAUSE'	 * Ineffective health surveillance and monitoring programmes in place * Lack of resources to manage health, safety and compliance * Failure to adhere to legislation and keep up to date with codes of practice (compliant * Lack of competent and suitably qualified staff * Failure to maintain ongoing adequate health, safety and compliance training * Lack of governance, scrutiny and performance monitoring of health, safety & comp * Failure to keep accurate compliance data, records and certification * Inadequate IT/data systems to capture key data and provide performance and assu * Lack of internal quality assurance processes and external audit and verification 	liance			
What are the possible consequences if the risk occurs? 'EFFECT'	* Loss of life, serious physical or mental injury * Increased staff sickness * Increased turnover of staff * Reduced staff motivation and engagement * Legal action (criminal and civil) * Reputational damage * Financial penalties (fines) * Investigations and action by regulatory bodies * Termination of management agreement				
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	5				
1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	5				
Impact score x likelihood score	25				
What existing processes / controls are in place to manage the risk?	 * H&S Management System framework in place - plans, policies, procedures and risl * Compliance register developed * Suitable control measures in place from risk assessments (including safe systems - Processes to ensure employees are competent (skills, knowledge, training, experie * Monitoring processes, with inspections at all levels across the organisation. * Audit programme in place for buildings and services. * Health and wellbeing promotion (incl. employee healthcare scheme) * Scheduled reporting processes in place to key stakeholders incl. fire risk assessment * New health, safety and compliance performance management framework to in place * Provision of additional capacity * Head of Building Safety appointed * Health and Safety team * Property compliance team 	of work) nce, training tool bo ent programme	ox talks		
What are the current assurance activities around the risk?	 * External Verification. * Internal/external audit programmes * Quarterly Audits through SLA by Doncaster Council * Assurance reports by Business Assurance Team specifically around fire safety * Inspection programme in place at all levels in the organisation * Be Well at Work Charter external verification every 2 years * Presence of accident and incident reporting procedure * British Safety Council 5* award * New Board reporting governance * ISO45001 accreditation * Increased team resources 				
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely	3				
5 = Very likely 1=Slight, 2=Moderate, 3=Significant, 4=Major	5				
5 = Critical Impact score x likelihood	15				
score	What further action is planned to treat the risk?	Action owner ?	Timescale		
Action 1	Further full review of all risk assessments	Heads of Service	Ongoing		
Action 2	Implementation of health surveillance programme	Head of service / Head of HR and OD	Ongoing		
Action 3	Achieve gold level in the BeWell@Work Award by March 2022 having achieved silver in March 2020	Head of HR and OD Head of Building	Jun-22		
Action 4	Retention of ISO45001 accreditation and delivery of ISO45001 project plan Complete external health check audit on key six areas of compliance Penningtons	Safety Head of Building	Completed		
Action 5 Action 6	revisit April 2022 Introduce new health, safety and compliance sub group	Safety Director of Property	May-22 Completed		
Action 7	Commence delivery of new safe, compliant, excellent model for key 6 areas of	Services Head of Building	Completed		
Action 8	compliance embedding 365 Review structures and staffing resources for Building Safety and Compliance	Safety Head of Building Safety	Ongoing		
Action 9	Implement the structure and recruit to the posisitions	Safety Head of Building Safety	Ongoing		
Action 10	Deliver recommendations arising from compliance health checks Penningtons returning April 2022.	Head of Building Safety	May-22		
Action 11 1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely	2				
5 = Very likely 1=Slight, 2=Moderate,					
3=Significant, 4=Major 5 = Critical Impact score x likelihood score	5				

RISK OWNER	Chief Executive					
FAILURE TO	8. effectively govern and manage in an increasingly regulate	d climate				
What might cause the	 * Failure to manage Brexit impact on operations * Failure to meet requirements of Social Housing White Paper * Failure to manage Covid19 impact on operations * Failure to adhere to Regulator's Consumer and Economic Standards * Failure to adhere to Financial Regulations and corporate policies 					
risk to occur? * High inflation 'CAUSE' * Contractor and materials prices increase causing budget pressures 'Labour availability * Existing contracts tied to Brexit changes * Labour availability * Property prices and subsequent impact on RTB enquiries and sales * Regional unemployment / zero hours contracts / minimum wage levels impacts on poverty * Instruction and materials prices and sales						
What are the possible consequences if the risk occurs? 'EFFECT'	* Failing to meet all Regulatory and legal requirements - adverse Regulatory Inspectio	Budget overspend, loss of trust of Board and Council, reduction in services. Poor financial and operational performance, customer dissatisfaction Insufficient customer engagement, involvement and communications Increase in complaints which impact on budget and service delivery Poor, lower quartile benchmarking performance				
1=Very unlikely, 2=Unlikely,						
3=Possible, 4=Likely 5 = Very likely 1=Slight, 2=Moderate, 3=Significant, 4=Major	3					
5 = Critical Impact score x likelihood						
score	12					
What existing processes / controls are in place to manage the risk?	Close watching brief on local and national issues affecting the borough and sector Regular attendance at Mayoral Cabinet, OSMC, member and officer briefings Team Doncaster member with close working relationships with key stakeholders. Timely Financial and Operational performance indicators and information. Robust procurement and Contractor monitoring arrangements in place. Focus on VFM to drive efficiency savings and increase capacity Alternative contractors available in the event of liquidation to prevent service disruption Member of Prevent and ASB theme groups and hate crime reporting procedures in place. Staff trained Anti-poverty steering group and financial inclusion group Food bank collections & referrals and financial inclusion services					
What are the current assurance activities around the risk?	 * Robust Governance framework in place * Performance Management monitoring and reporting framework * Reports to Leadership, Audit & Risk and Performance & Improvement Committees, Board and DC * Timely, accurate, regular budget monitoring, both capital and revenue * KPIs meeting targets and positive benchmarking * Arrears levels and tenancy sustainment good through proactive tenancy management plans * KPIs reported quarterly to Anti Poverty Steering Group * Board training plans in place * Communication on impacts of uncertainty drivers (Brexit, economy, unemployment, etc.) * EUSS requirements met for tenants and residents 					
1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely	2					
1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical	4					
Impact score x likelihood	8					
score	What further action is planned to treat the risk?	Action owner ?	Timescale			
Action 1	Maintain close watching brief of local and national economic developments	Leadership	On-going			
Action 2	Participate in council Brexit planning	Leadership	On-going			
Action 3	Review of Housing Management structure and service to ensure arrears and ASB are managed effectively	Head of Housing Management	Jun-22			
Action 4	Implement NHF Code of Governance	EMT	Jun-22			
Action 5	Review Business Assurance and Governance management arrangements	Head of Finance and Business Assurance	Mar-22			
Action 6 Action 7						
Action 7 Action 8						
Action 9 1=Very unlikely, 2=Unlikely,						
3=Possible, 4=Likely 5 = Very likely 1=Slight, 2=Moderate,	1					
3=Significant, 4=Major 5 = Critical	4					
Impact score x likelihood score	4					

	Leadership 9. maintain core service delivery and business continuity under adverse ext	ernal factors (eg.	Covid,
FAILURE TO	inflation, fuel and material shortages, weather)	- (-9	
	 * High levels of staff absence - self isolation or sickness * Reduced core services - business critical only 		
	* Reduced levels of asset investment and maintenance * Insufficient PPE for staff		
	* Inability for all staff to work from home		
	 Inadequate IT infrastructure (via DMBC) preventing system access Employee health and wellbeing - change, anxiety, isolation 		
What might across the	* Tenants in increased financial hardship - fuel poverty, etc.		
What might cause the risk to occur?	 Delays to key projects, eg TOP, CAT Supplier and contractor availability to provide goods and services 		
'CAUSE'	 Insufficient materials, good, fuel etc available to support service delivery Uncoordinated approach across borough 		
CAUCE	* Delays to planned or required recruitment and required training		
	* Disengaged / reluctant concerned workforce * Tenants refusing access for emergency repairs /statutory visits		
	* Unrealistic expectations from government / partners * Increase in crime and ASB cases in neighbourhoods		
	* Lack of visible Leadership		
	 Inability to adequately support vulnerable tenants Lack of a clear communication strategy 		
	* Excessive demands on remaining staff not sustainable		
	 * Operational and reputational risk of services not delivered * SLHD budget pressures from new, unanticipated demands and reduced income. 		
	* H&S risks. Concerned frontline staff. May need to stop services. * Some staff unable to do any work at all.		
	* Reduced productivity. Employee and customer frustrations		
	* Poor KPI performance - arrears, homelessness, gas, voids, sickness. Impact on futu * Tenants in financial pressures. Rent arrears increasing - HRA cashflow and budget		
What are the possible consequences if the	* Fuel poverty affecting property condition - damp, mould, etc.		
risk occurs?	 * Budget pressures, service changes targets not met * Unable to deliver required services due to suppliers and contractors 		
'EFFECT'	* Customer dissatisfaction and increase in complaints * Vulnerable tenants and residents 'missed' and/or efforts being duplicated		
	* Sustained gaps in key positions - H&S risks, required skills, and behaviours not met		
	* Non compliance with legislation/regulation (e.g. gas), increase in future disrepair / fi * KPI targets not met, unable to deliver core services	t for habitation cas	es
	* Customer satisfaction and increase in customer complaints linked to inability to take	enforcement action	on
	 Disenfranchised and motivated staff, lacking direction and poor organisation. Staff relations and service delivery to customers and increase in avoidable contact; 		
1=Very unlikely, 2=Unlikely,	* Staff health and well-being working from home		
3=Possible, 4=Likely 5 = Very likely	5		
1=Slight, 2=Moderate, 3=Significant, 4=Major	4		
5 = Critical Impact score x likelihood	20		
score			
	 * Robust Business Continuity and Emergency Plans * Managers reviewing health and wellbeing of staff through frequent contact 		
	* IT infrastructure for staff to enable home working. Remote working capabilities quickly embedded * Performance Management Framework in place - early identification of issues		
	 * Monthly budget monitoring by EMT and quarterly by Board * Project Boards in place to monitor progress and agree actions, eg. DTB 		
	* Daily team, HOS & EMT, weekly Leadership virtual meetings * Risk assessments and working procedures in place		
	* Increased stock holding of key items, incl parts & PPE * Contractor arrangements to maintain critical services, i.e. sprinklers, FRAs, lifts		
What existing processes / controls	* Essential services still being delivered including gas servicing and provision of homelessness su * Systems to ensure statutory training can continue. Delivery of essential training to be carried out	pport online or via software	1.
are in place to manage	* EMT Key Messages / notes from daily meetings / Sharing of information between EMT and HOS / * Offices closed. Most staff working from home effectively		
the risk?	* Gold Command, TCG Silver and Cells addressing all issues		
	* Timely, accurate budgets monitoring		
	* Recruitment processes in place, e-recruitment operational. Able to recruit using skype or other vid	eo software for interv	iews
	 * Service area Team meetings / Directors joining service area Team meetings. * Contact process in place for outbound calling to vulnerable tenants/community hub support; 	eo software for interv	iews
	* Service area Team meetings / Directors joining service area Team meetings.	eo software for interv	iews
	* Service area Team meetings / Directors joining service area Team meetings. * Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell;	eo software for interv	iews
	* Service area Team meetings / Directors joining service area Team meetings. * Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell; * Weekly updates to employees; * Medi-cash referrals	eo software for interv	iews
	* Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell; * Weekly updates to employees; * Medi-cash referrals * Staff surveys undertaken * Measures adopted to maintain community facilities for welfare * Business critical services maintained	eo software for interv	iews
	* Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell; * Weekly updates to employees; * Medi-cash referrals * Staff surveys undertaken * Measures adopted to maintain community facilities for welfare * Business critical services maintained * Offices closed and most staff working from home effectively	eo software for interv	iews
	* Service area Team meetings / Directors joining service area Team meetings. * Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell; * Weekly updates to employees; * Medi-cash referrals * Staff surveys undertaken * Measures adopted to maintain community facilities for welfare * Business critical services maintained * Offices closed and most staff working from home effectively * Consultation on impact on service delivery undertaken with customers * Gold Command, TCG Silver and active cells addressing all issues *	eo software for interv	iews
What are the current assurance activities	* Service area Team meetings / Directors joining service area Team meetings. * Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell; * Weekly updates to employees; * Medic-ash referrals * Staff surveys undertaken * Measures adopted to maintain community facilities for welfare * Business critical services maintained * Offices closed and most staff working from home effectively * Consultation on impact on service delivery undertaken with customers * Gold Command, TCG Silver and active cells addressing all issues * Timely, accurate, regular KPI and MI production	eo software for interv	iews
What are the current assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare * Business critical services maintained Offices closed and most staff working from home effectively * Consultation on impact on service delivery undertaken with customers * Gold Command, TCG Silver and active cells addressing all issues * Timely, accurate, regular KPI and MI production * Timely, accurate, regular KPI and MI production * Timely, accurate, regular budget monitoring, both capital and revenue * Options for TOP delays considered and plans put in place 	ieo software for interv	iews
assurance activities	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue 	ieo software for interv	iews
assurance activities	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare *Business critical services maintained Offices closed and most staff working from home effectively * Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues * Timely, accurate, regular KPI and MI production * Timely, accurate, regular KPI and MI production * Timely, accurate, regular kDP and plans put in place * Doptions for TOP delays considered and plans put in place 	eo software for interv	iews
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular kPI and MI production Timely, accurate, regular kDudget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 	eo software for interv	iews
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 	ieo software for interv	iews
assurance activities around the risk? 1=Very unikely, 2=Unikely, 3=Possible, 4=Likely 5 = Very likely 1=Silght, 2=Moderate, 3=Significant, 4=Major 5 = Critical	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular kPI and MI production Timely, accurate, regular kDudget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 	ieo software for interv	iews
assurance activities around the risk? 1=Very unlikely, 2=Unlikely, 3=Possible, 4=Likely 5 = Very likely 1=Slight, 2=Moderate, 3=Signif.act, 4=Mojo	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 	ieo software for interv	iews
assurance activities around the risk? 1=Very unikely, 2=Unikely, 3=Possible, 4=Likely 5 = Very likely 1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical Impact score x likelihood score	 * Service area Team meetings / Directors joining service area Team meetings. * Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell; * Weekly updates to employees; * Medi-cash referrals * Staff surveys undertaken * Offices closed and most staff working from home effectively * Consultation on impact on service delivery undertaken with customers * Gold Command, TCG Sliver and active cells addressing all issues * Timely, accurate, regular KPI and MI production * Timely, accurate, regular KPI and MI production * Tomely, accurate, regular kPI and MI production * Tomely, accurate, regular kPI and MI production * Timely, accurate, regular kPI and MI production * Timely, accurate, regular kPI and MI production * Timely, accurate, regular budget monitoring, both capital and revenue * Options for TOP delays considered and plans put in place * Existing regruitment processes in place, e-recruitment system still operational * Systems in place to ensure statutory training can continue * Tasting regime in place * Additional consultation meetings in place with Unions and JCC 3 4 12 What further action is planned to treat the risk? 	Action owner ?	Timescale
assurance activities around the risk? 1=Very unikely, 2=Unikely, 3=Possible, 4=Likely 5 = Very likely 1=Slight, 2=Moderate, 3=Signficant, 4=Major 5 = Critical Impact score x likelihood score Action 1	 * Service area Team meetings / Directors joining service area Team meetings. * Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell; * Weekly updates to employees; * Medi-cash referrals * Staff surveys undertaken * Offices closed and most staff working from home effectively * Offices closed and most staff working from home effectively * Gold Command, TCG Sliver and active cells addressing all issues * Timely, accurate, regular KPI and MI production * Timely, accurate regular budget monitoring, both capital and revenue * Options for TOP delays considered and plans put in place * Existing recruitment processes in place, e-recruitment system still operational * Systems in place to ensure statutory training can continue * Testing regime in place * Additional consultation meetings in place with Unions and JCC 3 4 	Action owner ? Leadership	Timescale As required
assurance activities around the risk? 1=Very unikely, 2=Unikely, 3=Possible, 4=Likely 5 = Very likely 1=Slight, 2=Moderate, 3=Significant, 4=Major 5 = Critical Impact score x likelihood score	 * Service area Team meetings / Directors joining service area Team meetings. * Contact process in place for outbound calling to vulnerable tenants/community hub support; * Involvement in partner communication cell; * Weekly updates to employees; * Medi-cash referrals * Staff surveys undertaken * Offices closed and most staff working from home effectively * Consultation on impact on service delivery undertaken with customers * Gold Command, TCG Sliver and active cells addressing all issues * Timely, accurate, regular KPI and MI production * Timely, accurate, regular KPI and MI production * Tomely, accurate, regular kPI and MI production * Tomely, accurate, regular kPI and MI production * Timely, accurate, regular kPI and MI production * Timely, accurate, regular kPI and MI production * Timely, accurate, regular budget monitoring, both capital and revenue * Options for TOP delays considered and plans put in place * Existing regruitment processes in place, e-recruitment system still operational * Systems in place to ensure statutory training can continue * Tasting regime in place * Additional consultation meetings in place with Unions and JCC 3 4 12 What further action is planned to treat the risk? 	Action owner ?	Timescale
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Wedi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular KPI and MI production Timely, accurate, regular kPI and MI production Staffs urveys to the service statutory training can continue Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Additional consultation meetings in place with Unions and JCC Matification meetings in place to the service as a service and plane to training can continue Additional consultation meetings in place to the service as a service and plane as a service as a ser	Action owner ? Leadership Head Of AM	Timescale As required Ongoing Uniked to the
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular KPI and MI production Timely, accurate, regular kPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 3 4 12 What further action is planned to treat the risk? Produce regular, up to date FAQs for employees Continue with business critical procurement. Including joint procurement with DMBC Produce regular, up to date information for customers Review FAQs format using drop down format on internet and intranet 	Action owner ? Leadership Head Of AM Leadership Head Of Customer	Timescale As required Ongoing Unixed to the review of the website
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC Madi current processes for employees Continue with business critical procurement. Including joint procurement with DMBC Produce regular, up to date FAQs for employees Review FAQs format using drop down format on internet and intranet Develop our role in the partnership localities model 	Action owner ? Leadership Head Of AM Leadership Head of Customer Services / Acting Head of I and BT Head of I and BT Head of I and BT	Timescale As required Ongoing Ongoing Linked to the review of the website Ongoing
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Wedi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Sliver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 3 4 Uhat further action is planned to treat the risk? Produce regular, up to date FAQs for employees Continue with business critical procurement. Including joint procurement with DMBC Produce regular, up to date information for customers Review FAQs format using drop down format on internet and intranet Develop our role in the partnership localities model Develop St Leger Roadmap to Recovery in line with the up to date government guidance 	Action owner ? Leadership Head Of AM LeaderSubp Head of IT and BT Head of IT and BT Head of HR and OD	Timescale As required Ongoing Unixed to the review of the website
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Wedi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular kPI and MI production Timely, accurate, regular kPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC Mat further action is planned to treat the risk? Produce regular, up to date FAQs for employees Continue with business critical procurement. Including joint procurement with DMBC Produce regular, up to date information for customers Review FAQs format using drop down format on internet and intranet Develop St Leger Roadmap to Recovery in line with the up to date government 	Action owner ? Leadership Head Of AM Leadership Head of Customer Services / Acting Head of I and BT Head of I and BT Head of I and BT	Timescale As required Ongoing Ongoing Linked to the review of the website Ongoing
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular KPI and MI production Timely, accurate, regular kPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 3 4 Utation on is planned to treat the risk? Produce regular, up to date FAQs for employees Continue with business critical procurement. Including joint procurement with DMBC Produce regular, up to date information for customers Review FAQs format using drop down format on internet and intranet Develop our role in the partnership localities model Develop St Leger Roadmap to Recovery in line with the up to date government guidance Review Tenancy Sustainability model to ensure we support as many tenants as	Action owner ? Leadership Head Of AM Leadership Head of Customer Services / Acting Head of Housing Management Head of HR and OD Head of Housing	Timescale As required Ongoing Dinked to the review of the website Ongoing Ongoing
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Medi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular KPI and MI production Timely, accurate, regular kPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 3 4 Utation on is planned to treat the risk? Produce regular, up to date FAQs for employees Continue with business critical procurement. Including joint procurement with DMBC Produce regular, up to date information for customers Review FAQs format using drop down format on internet and intranet Develop our role in the partnership localities model Develop St Leger Roadmap to Recovery in line with the up to date government guidance Review Tenancy Sustainability model to ensure we support as many tenants as	Action owner ? Leadership Head Of AM Leadership Head of Customer Services / Acting Head of Housing Management Head of HR and OD Head of Housing	Timescale As required Ongoing Linked to the review of the website Ongoing Ongoing
assurance activities around the risk?	 Service area Team meetings / Directors joining service area Team meetings. Contact process in place for outbound calling to vulnerable tenants/community hub support; Involvement in partner communication cell; Weekly updates to employees; Wedi-cash referrals Staff surveys undertaken Measures adopted to maintain community facilities for welfare Business critical services maintained Offices closed and most staff working from home effectively Consultation on impact on service delivery undertaken with customers Gold Command, TCG Silver and active cells addressing all issues Timely, accurate, regular KPI and MI production Timely, accurate, regular KPI and MI production Timely, accurate, regular kPI and MI production Timely, accurate, regular budget monitoring, both capital and revenue Options for TOP delays considered and plans put in place Existing recruitment processes in place, e-recruitment system still operational Systems in place to ensure statutory training can continue Testing regime in place Additional consultation meetings in place with Unions and JCC 3 4 12 What further action is planned to treat the risk? Produce regular, up to date FAQs for employees Continue with business critical procurement. Including joint procurement with DMBC Produce regular, up to date information for customers Review FAQs format using drop down format on internet and intranet Develop our role in the partnership localities model Develop St Leger Roadmap to Recovery in line with the up to date government guidance Review Tenancy Sustainability model to ensure we support as many tenants as possible in the right way 	Action owner ? Leadership Head Of AM Leadership Head of Customer Services / Acting Head of Housing Management Head of HR and OD Head of Housing	Timescale As required Ongoing Linked to the review of the website Ongoing Ongoing

Risk rating methodology

Each identified risk is assessed three times using a standard risk matrix below:-

- INHERENT Risk This is the initial assessment with the assumption of no controls in place
- *CURRENT Residual Risk* The risk score taking into account the <u>current</u> controls in place to mitigate the risks, thereby potentially reducing the likelihood or impact
- FORECAST Residual Risk The risk score <u>after</u> taking into account the <u>planned</u> controls and actions are put in place.

The risks are assessed based on a 5 x 5 numerical traffic light scoring matrix shown below, which comprises of **likelihood** and **impact**.

		ІМРАСТ					
		1 = Insignificant	2 = Low	3 = Medium	4 = High	5 = Very High	
	5 = Very Likely						
LIKELIHOOD	4 = Likely						
	3 = Possible						
LIKE	2 = Unlikely						
	1 = Very Unlikely						

Score	LIKELIHOOD bands
5 = Very Likely	50 - 100% likely to occur within 12 months
4 = Likely	40 - 49% likely to occur within 12 months
3 = Possible	21 - 39% likely to occur within 12 months
2 = Unlikely	11 - 20% likely to occur within 12 months
1 = Very Unlikely	1 - 10% likely to occur within 12 months

				ESTIMATED IM	PACT	
		1 =Slight	2 = Moderate	3 = Significant	4 = Major	5 = Critical
	Financial / Fraud	Up to £999	Financial loss of up to £10,000	Financial loss up to £100,000	Financial loss of up to £999,000	Financial loss of £1,000,000 or above
TYPE OF RISK	Legislation	No Real Impact	Limited regulatory impact Breaches of local procedures or standards	Limited regulatory consequence Breaches in regulation standards	Significant regulatory consequence Breaches in law punishable by fine only	Substantial regulatory consequence Breaches of law punishable by imprisonment
	Safety	No injuries	Injury to an employee or member of the public requiring on- site first aid	Injury to an employee or member of the public requiring medical treatment	Permanent injury to an employee or member of the public	Irreversible multiple injury or death. Major sanction by HSE and closure of a major part of the business
	Reputation	No media attention	Adverse local media attention – local newspaper report	Adverse regional media attention – televised or newspaper report	Adverse media attention – national newspaper report	Sustained negative headlines in the national press or television report
	Service Delivery	Will not impact on customer service	Unlikely to impact on customer service	Likely to impact on customer service	Very likely to impact on customer service	Certainty to impact on customer service
	Strategic	Will have a minor impact on strategic priorities	Will have a low impact on key strategic priorities	Will have an impact on key strategic priorities	Will have a major impact on key strategic priorities	Closure of major part of the business

Governance Summary Communications Template

Report from:	Building Safety & C	Building Safety & Compliance Committee		
Date of meeting:	27 January 2022			
Report author:	Dave Wilkinson			
Summary of key items discussed at the meeting, (if possible, keep these to the top three):		Decisions made and actions agreed (if possible, keep these to the top three):		
1.Health, Safety & Compl	iance update			
Members recognised the performance across all ar That included progress m asbestos re-inspection pr	eas of compliance. ade on the	Members requested each SME (subject matter expert) attend committee on a rotational basis. This was to provide an overview of their role and offer further assurance within their field of expertise.		
The Specialist Advisor to Committee had provided a series of questions in advance that were answered and debated during the meeting.		The Specialist Advisor to Committee requested a number of inclusions/deletions to future reports captured within the actions of the minutes.		
2. Fire Doors Briefing Not	<u>e</u>			
Members noted that a nu a fire door register was pu today the register is not f	roduced however,			
Recommendations contained within the report were to build a fire door register to comply with current legislation and carry out a replacement programme over the next 10 years.		Members endorsed recommendations contained within the report.		
3. Milton Court Briefing N	lote			
Members were advised of a recent fire incident at Milton Crt and actions taken to provide assurance to committee.		Members requested a site visit to the buildings discussed at Committee to give better insight. Arrangements are in place for Weds 4 May 2022.		
Discussions included futu for the building.	re considerations	Members also requested a 'Milton Crt - Future Considerations' report is taken to Board for further discussion.		
Additional notes for com	munication to gover	nance:		

St. Leger Homes of Doncaster Limited BUILDING SAFETY & COMPLIANCE COMMITTEE MEETING

Thursday 27 January 2022 at 10am

Present

Dave Wilkinson (DW) (Chair), Trevor Mason (TM), Steve Lyons (SL), Cllr Phil Cole.

In Attendance

Chris Margrave (CM) (Director of Property Services), Danny Boardman (DB) (Head of Building Safety), Maxine Johnson (MJ) (Executive Support Officer).

ACTION

Also in Attendance

Anthony Brown (AB) – Specialist Independent Advisor

1.	Apologies and Quorum	
1.1	No apologies were received and the meeting was quorate.	
2.	Declarations of Interest by Board Members	
2.1	There were no declarations made.	
3.	Minutes of the meeting held on 22 November and matters arising	
3.1	From agenda item 7.3 – Senior Independent Advisor – pre meets and introductions all pre meeting are in the diary for 2022. Action: Complete.	
3.2	 From agenda item 4.3 - Penningtons Healthcheck - members asked for the following amendments to be made: <u>Action Plan</u> a. Filter recommendations in priority order – high, med, low. b. Add column or detail to include percentage of recommendation completed. c. Target dates 'on going' need tightening up. DB explained he had taken on board the amendments requested by a filter of the second sec	
	Committee, a new action plan had been developed which includes all of the previous actions plans. This was in its final stages that will be presented to the next committee meeting.	DB
3.3	From agenda item 4.4 – Penningtons Health Check - Members also asked that the Penningtons Healthcheck report is shared and key recommendations are highlighted with high level priorities being concentrated on.	

DB confirmed the health check had been shared and will be included within the new action plan. Action: completed.

- 3.4 From agenda item 6.2 - Compliance Gap Analysis (from legal register) - Agreement was reached to amend the gap analysis at appendix 1 and use a RAG status methodology. Action: Complete
- 3.5 From agenda item 9.2 - Shaping Future Health, Safety & **Compliance updates** A lengthy discussion took place and it was agreed to:
 - a. Structure the report to include a compliance dashboard and report by exception only.
 - b. Table the report higher up the agenda.

It was agreed this revised format could be submitted to Board. Action: complete.

4. Health, Safety and Compliance update

4.1 Compliance Status – Executive Summary

DB advised, table 1 of the report accurately reflects where we are as an organisation.

AB acknowledged the excellent overall performance across all areas of compliance.

It was noted that alternative fuel sources to gas were solid fuel (93) and air source heat pumps (ASHP) (15).

PC highlighted that approximately 10–15 years ago, 15 properties within the Borough had been installed with air source heat pumps (ASHP). He thought this may have been in the Branton area.

Action: DB to request from Scott Hibbert a list of the 15 properties with ASHP.

DB

4.2 **Compliance Status Exec Summary:**

> AB asked a general question - can we be assured about the numbers of properties on each programme? He gave examples of where FRAs and gas service numbers were different from the previous committee meetings report.

> DB explained that this is a priority for all of the subject matter experts (SME's). As they investigate they can come across various issues, each SME is now constantly validating data which can affect the programme numbers.

> AB asked from a compliance perspective, if there was a way to reconcile the numbers and tease out the reasons behind the difference

	in numbers ie new stock, acquired a property or uncovering things?	
	Action: High level reconciliation of numbers on each programme to be included in future reports.	DB
4.3	Gas	
	AB commented on the excellent performance and asked; do we carry out an annual 'gas' assurance checks on the 970 properties without gas?	
	DB advised no because the infrastructure wasn't in place for gas.	
	AB asked what is the current number of properties that have been capped off - are these included in a monitoring programme?	
	It was noted a report is generated every evening listing properties 'capped off' and these properties are included as part of an annual check.	
	CM added some properties are elected to be capped off with gas, if you are electing to turn gas off and relying on an electric heater you are definitely going to have issues with damp and mould. Our housing colleagues provide a wrap round service. He said there are some properties which we need to protect and ensure they are maintained in good condition.	
	CM also highlighted once a gas supply is dormant there can be an issue within the pipework where you have to replace the incoming supply. The timeframe for replacement is considerably short ie just a small number of years.	
4.5	Bypassing Metres	
	DW asked as an organisation do we have issues with tenants bypassing metres? CM advised it is incredibly easy to bypass the supply, although very dangerous, with fuel poverty some tenants will take the risk. He said we work alongside partners and suppliers.	
	PC asked if SLH take action against a tenant who by-passes a metre? CM clarified with MMc following the meeting that SLHD do take action in these circumstances.	СМ
	PC asked if SLH could collate any evidence from tenants as to how much their fuel costs are to compare against their neighbours?	
	We will be working with a graduate from Sheffield University to look at the amount of energy needed to get a property to a comfort level (by room) and for how long this can be retained for. He said in-conjunction with the stock condition data we are collating we can then start to make some educated decisions.	

4.6 Solid Fuel

AB asked how old is the 'oldest' outstanding service?

DB advised it was 18 months out of date and is in the legal process.

PC asked of the 3-4 properties found difficult to gain access which are in the legal process – what are the reasons for 'no access'?

DB advised tenants with solid fuel don't want our staff in their homes sometimes as other things maybe identified or uncovered such as hoarding or they perceive that we want to take their solid fuel away from them. It was noted that SLH did not look to recoup court costs from 'no access' cases.

4.7 <u>Electrical Safety</u>

AB asked of the 10 EICR's outstanding [in the 10 year programme] - how old is the 'oldest' outstanding service?

DB advised this figure had reduced from 10 to 9 since the writing of the report. The oldest of the 9 was from April 2010, which is in the legal process.

4.8 Fire Safety

FRA Actions Overdue:

AB commented committee would like to see greater oversight of the issues in completing FRA actions and planning to complete the outstanding FRA actions. He referred to table 5.4 Level 1 buildings with 195 actions overdue and table 5.5 Level 2 buildings with 145 overdue.

He asked how are we mitigating any risks?

DB advised Level 1's (195) are closely monitored by the Building Safety Group managed by Doncaster Council. Of the outstanding 195, 191 have been given to Fortums to carry out with an action plan in place to have them completed by 28 April 2022. He said Fortems have been on site since 6th December 202 and carried out a lot of surveying and scoping of what needs to be done.

Action: DB to provide in the next report a one line update on DB Fortems performance against the action plan with dates.

CM reminded members that the organisations intension would be to have training delivered so that in house staff can undertake the FRA. The fire SME has been approved to attend a course specifically on conduction FRA in complicated premises including residential. He said in hindsight we would have engaged the framework differently with Fortems, however moving on from this we have engaged procurement

4.9	colleagues to find a different route to market going forward.	
	TM queried if no outstanding FRA actions was realistic?	
	DB commented it's not unrealistic to want zero; out of 9003 FRA actions 769 are overdue, which is a small number. He emphasised that the Health, Safety & Compliance team consistently challenge colleagues regarding overdue actions.	
	AB understood the practicalities of reducing the number to a zero position however, sought further assurance that the risks were being prioritised and mitigated especially level 1 category. Following a discussion it was agreed to invite individual SMEs to future meetings to provide further assurance to committee of the actions being taken around FRAs as well as give an overview of their role.	DB
	Action: SMEs to attend future Committee meetings, to provide further assurance to committee in relation to FRAs outstanding actions and also provide an overview of their role.	
4.10	AB suggested removing tables 12 and 13 until a time that the data was available.	DB
4.11	Asbestos:	
	AB asked do all of our communal areas and work premises have asbestos management surveys?	
	DB advised 72% of them had asbestos management surveys, the remaining 28% (228) will be surveyed within the next 6 months.	
	Action: AB asked if this data could be included in the next report.	DB
4.12	AB acknowledged the excellent progress with the reinspection programme and congratulated the team.	
	He went onto ask - what % of our domestic properties have an asbestos survey and are surveys uploaded to our asbestos register?	
	DB said it was difficult to say at this moment in time due to the surveying strategy being reviewed. He said 609 are due to be completed by end of April 2022.	
	CM highlighted that there was a focus on the quality of data, he said we have a lot of asbestos data which is not of the best quality in part due to the 'location/area' in which it can be found and part due to the limited information on the surveys. As an organisation we took the decision to take only the best quality data and input it into C365. Trades are clear with regards to the data we hold and are currently advised to proceed with caution and stop immediately if they suspect anything, in time we	

our inspection strategy will provide enhanced date .

4.13 <u>C365 Compliance Summary</u>

Action: Sample Table 9.1 to leave out of the next report and replace DB with a small paragraph giving an update on progress and implementation.

4.14 <u>RIDDOR, Incidents and Accident Update</u>

AB referred to the table at 10.1 and commented there has been a significant reduction in accidents from 2019/20 - is this due to Covid or have you improved your practice? There has also been a significant reduction in near misses - are you doing anything about this?

DB explained near miss submissions are really important to us as an organisation, however it's the quality of data that we are interested in rather than focusing on the numbers. Near miss reporting was currently being reviewed in an attempt to increase quality submissions.

He said overall the accident numbers can be representative of what's happening in terms of Covid and once the violence and aggression (V&A) figures are extracted this reduces the numbers further.

5. Fire Doors

5.1 DB presented the report that highlighted SLH did not hold a fire door register for all of its buildings. He said a register is important as it provides a central hub for all relevant information about the fire doors ie certification, continuous maintenance; inspection and repair etc. Recommendations contained within the report are to have a sustainable fire door replacement programme in place over the next 10 years.

CM added that a number of years ago a register was produced however, it isn't fit for purpose today. This report is highlighting that although we have a notional fire door, we may not have the required information readily available to us, to comply with current legislation.

- 5.2 It was noted that SLH were working alongside neighbouring ALMO's, who were also in a similar position. A discussion took place regarding taking the fire door replacement programme work in-house and the associated costs.
- 5.3 Committee endorsed the recommendations set out in the briefing note.

6. Joint Safety Committee minutes 19 January 2022

- 6.1 Members noted the minutes. CM highlighted we are trying to expand the agenda and purposefully include Building Safety items and Repairs Excellence.
- 7. High Rise Forum minutes 24 November 2021

7.1 AB was pleased to see the minutes from the High Rise Forum and asked whether they covered all of the high rise buildings?

CM explained his future vision of having 9 high rise forums that linked into 1 overarching high rise forum. However, due to the low level of attendees it was currently impractical. He said there is a lot more work to do to encourage participation in the group.

8. Milton Court

8.1 DB explained of the requirement to submit a report to provide assurance and actions taken to EMT and subsequent groups/committees, following any adverse incidents including fires in level one buildings.

DB explained the circumstances of the incident at Milton Court to committee and actions taken. It was noted following the incident along with the SME he had met with South Yorkshire Fire & Rescue to review the case.

TM thanked DB for the report which was useful in terms of specific actions. He requested that future reporting included; whether the building in question complied with current regulations, that the management and risk controls worked, as well as identifying whether there were any wider implications for the rest of the stock.

During the conversation it was highlighted that only 10 out of the 12 buildings had received installation of a sprinkler system. A decision had been made not to install a sprinkler system at Milton Court and Jubilee Court.

CM advised Milton Court was an ex sheltered living scheme, which has the potential to be age designated accommodation. He questioned, is that something we want to consider? Tenants don't have to come into the communal area to exit the building - to convert the building back into some kind of provision would be relatively straight forward. DW recalled the building being used for assisted living with people with mental and physical difficulties. Doncaster Council had given it up due to shared toilets and bathing facilities.

Action: It was agreed to take a report regarding Milton Court to a CM/DB future confidential Board meeting for further consideration.

9. <u>AOB</u>

Committee requested a site visit to the buildings being discussed at the **DB/CM** meeting to give greater insight.

Date and Time of Next Meeting

19 May 2022, 10am

Governance Summary Communications

Report from:Employment and it		People Committee		
Date of meeting:	8 February 2021			
Report author:	Dave Wilkinson			
Summary of key items di meeting, (if possible, kee three):		Decisions made and actions agreed (if possible, keep these to the top three):		
EDI Dashboard Committee received its position statement of information relating to tenants.	of key diversity	Committee noted the update provided and agreed that since numbers of those providing ethnicity information are low, there is only a minimal % shift. Committee also agreed there was a lot more to be done in this area some of which was detailed in the EDI strategy action plan due to be approved at Board in April 22.		
Gender Pay Report Committee reviewed to Pay Gap Report, prep analysis of the gende 2020. The report include median, and quartile fit two years.	ared following an er pay figures for des the mean and	Committee agreed that gaps are closing, however within trades specifically, there is a lot more to do. The report was noted.		
Update on Performance Process Committee were preser on the delivery of a revi Performance Managem	nted with progress sed People	Committee noted the verbal update that 99% of PDP's across the whole organisation had been completed with only 7 outstanding. Committee recognised this great achievement and thanked everyone involved.		
Additional notes for communication to governance: Committee were also presented with early headlines of the Staff Survey which was due to				
launch later that day and noted some of the areas that will be included.				

Committee were also briefed on plans for the staff conference and Q&A sessions for 2022.

St. Leger Homes of Doncaster Limited EMPLOYMENT & PEOPLE COMMITTEE

Tuesday 8 February 2022 at 9.00am

Present

Dave Wilkinson (Chair), Susan Jones, Anthony French, Councillor Joe Blackham

In Attendance

Dave Richmond (Chief Executive), Sarah Moore (Head of HR and Organisational Development), Leandra Graham-Hibling (EA to Chief Executive)

ACTION 1. Apologies and Quorum 1.1 There were no apologies received. The meeting was guorate. 2. **Declarations of Interest by Board Members** 2.1 There were no declarations made. Minutes of the previous meeting held on 3 November 2021 and 3. matters arising 3.1 The minutes of the previous meeting were agreed as a true record with the following matters arising. 3.2 From Item: 3.2 AOB Forward Plan It was noted that Board had received a discussion paper at its meeting on 3rd February and agreed further exploration in the summer as part of a strategic planning day. 4. EDI Dashboard 4.1 The Chief Executive presented Q3 EDI dashboard which had been developed and produced at the request of Board at a Strategic Planning Day in early 2021. He advised that in relation to staff data that we hold, movement between quarters has been very minimal and due to this the shift in

The Chief Executive drew Committee's attention to the last point in paragraph 2.2 where it states that the number of employees providing ethnicity information is in the region of 73-74% which demonstrates that more work is needed in this area

percentages were very small.

It was noted that we have more information and data in relation to our tenants and the action plan within the new EDI Strategy will look to enrich the information so that we can look to support these tenant groups more and also better promote diversity across the organisation.

Committee noted the Q2 analysis compared to Q3, which shows that the number of employees providing ethnicity information has slightly increased, but agreed overall the number of employees providing their ethnicity and disability information is very low.

- 4.2 Committee considered the Dashboard at appendix A to the report agreeing that there may be more people than 6.53% of those who have responded, that are suffering from a Mental Health issue and that those reporting as having a disability may be higher than 24.87%.
- 4.3 The Chair queried statistics in paragraph 6.2 '% of the workforce identifying LGBYQ+' asking where the data compared to the Doncaster census and to what we knew locally? The Head of HR and Organisational Development agreed to make enquiries about this question.

SM

4.4 A Board Member commented that one or two people providing their information can make a huge difference to the figures, however it was agreed that actions show a statement of intent.

A Board Member asked for an update on the development of a Customer Portal which was expecting to be delivered by the end of January? The Chief Executive responded he was unsure of whether this action had been completed in full due to legacy issues around Open Housing, however assured Committee that the Customer Portal was being worked on. There was agreement that giving our customers the opportunity to use this portal to provide their ethnicity information and enrich our data.

4.5 **Committee noted the update provided.**

5. <u>Gender Pay Report</u>

5.1 Committee reviewed the 2021 Gender Pay Gap Report, prepared following an analysis of the gender pay figures for 2021. The report includes the mean and median, and quartile figures for the last two years. Committee were asked to remember that the information detailed is from a day in time.

The Head of HR and Organisational Development advised that the key issues out of the report were similar to the EDI Dashboard which is around what we were doing to do with the information we have in the knowledge there is work to do, especially in relation to Senior roles.

The Head of HR and Organisational Development referred to the quartile breakdown on page 6 which shows that trades staff fall into the upper quartiles. She advised that trades are stereotypically male and there is a lot of work needed to attract females into these roles. She advised that we have already started this by trying to target our apprenticeships for 2022 intake.

5.2 A Member asked for the Male/Female split in applications for Trade apprentices. The Head of HR and Organisational Development confirmed **SM**

	that we do get significantly more applications from Males, but would provide the exact detail.	
	The Chairman raised reference to DMBC where they did some work at supervisor level within building services to target females into supervisory roles. He asked what our % of females in Supervisory/Team Leader roles were? The Head of HR and Organisational Development comment that it is extremely low, but agreed that for any young females looking into the business about their future if they cannot see females into team leader roles then it may deter them from joining us.	
	A Member suggested we may be underplaying a number of areas stating that there is no mention of our Values, Behaviours or Performance Management within the report. There was a suggestion that this is considered for future reports.	
5.3	The Head of HR and Organisational Development agreed to check document for spelling and rouge word on page 7 before it is published.	SM
5.4	On review of the report, Committee agreed that gaps are closing, however within trades specifically, there is a lot more to do.	
	Committee noted the information provided.	
6.	Update on Agile Performance Management Process	
6.1	The Head of HR and Organisational Development provided an update on progress on the delivery of a revised People Performance Management process.	
6.2	PDP's – Board set KPI The Head of HR and Organisational Development advised that at the time of writing the report, 82% of the workforce had had a PDP, and proudly updated on this figure advising that we were now 99% complete with only 7 PDP's outstanding.	
	She reminded Committee that this is the first time in many years where we have asked for this process to be completed and this is a huge step for both managers and staff.	
	have asked for this process to be completed and this is a huge step for	
6.3	have asked for this process to be completed and this is a huge step for both managers and staff. The Chief Executive advised he was particularly pleased with this	
6.3	have asked for this process to be completed and this is a huge step for both managers and staff.The Chief Executive advised he was particularly pleased with this performance and the focus by our Senior Management Team.A Member asked how effective the PDP process was and what we were	

- 6.4 A member stated the importance of making sure we communicate back to the workforce about what have done this year as a consequence of the annual PDP process to give a sense that we are actioning content and doing something with the information
- 6.5 **Committee noted the information provided and thanked all involved in the process to ensure every member of the workforce had a chance to discuss their own development and needs.**

7. <u>Net Promoter Score</u>

7.1 The Head of HR and Organisational Development advised that we record our net promotor score (NPS) on an annual basis, and for 2021, we were reporting a minus net promoter score.

The Head of HR and Organisational Development explained that when asked the question about whether the workforce was happy with SLHD as an employer, the majority were answering between 6-7, as though they were passive, therefore giving up as minus figure as a passive answer is not taken into account.

Given the answer in 2021, it has led to raising the question of whether we continue with the NPS in future years or if we do something differently, with lots of other options currently available to us.

It was noted that the organisation was already considering liP status and what that brings, however NPS is the only Housemark indicator that we can use to benchmark how our workforce rates us as an employer.

7.2 After careful consideration Committee agreed to retain NPS until the work around Culture is completed alongside further exploration of liP and then consider what works best of us.

8. <u>Staff Survey – early headlines</u>

8.1 The Head of HR and Organisational Development advised that we are due to launch the next pulse survey that day. She advised that alongside the standard questions we will also be looking to drill down into areas that were flagged up as part of the last survey around Personal Development Plans, do people feel their voice is heard and whether it was felt their manager cares about staff wellbeing.

It was noted that this survey will include areas such as:-**Wellbeing**, for us to try to understand whether staff know what is available to access to support for their health and wellbeing,

EDI with 3 very specific questions around ever experiencing discrimination, are people comfortable and confident being themselves and talking about their background, and if not, why not.

Connectivity in the workplace and whether people feel connected to their co-workers, and if not, why not

Visibility of leadership and what does this look like to staff?

- 8.2 The Head of HR and Organisational Development advised that in terms of responses, we will be looking to promote the pulse survey at a Property Services Away Day where we have traditionally struggled for responses to see if we can increase completion rate by being at this event to encourage people to complete it.
- 8.3 Committee thanked the Head of HR and Organisational Development for the update.

9. Staff Conference Feedback

9.1 The Head of HR and Organisational Development updated on plans to hold staff sessions in 2022. She advised that the last conference held in early December 2021 was the 3rd digital staff conference and it was felt that this event had the most engagement with the workforce we have seen, with a challenging set of questions for EMT to answer.

She advised that we intend to continue with this arrangement for the current time, explaining that we not intending to do a face to face event at the moment, as we need to understand what we are trying to get out of these sessions to determine how best to hold them.

It is proposed, on back of next 2 pulse surveys, 2 x two way communication events, that will feature an EMT Q&A session, will be held in April and July (over 2 days with 3 sessions on each of the days). A further session will be held in December which will see us celebrate our St Leger Hero's and St Leger Stars similar to the December 2021 event.

9.2 Committee Members commented that the December 21 event had a really good blend of both live stream and recorded segments which seemed to go down well with the audience. They agreed it was a job well done and thanked the whole team for their efforts.

10. <u>Committee Forward Plan</u>

10.1 Committee noted the content of the forward plan and agreed to receive a scoping paper in May covering the next Board Away Day. It was noted that a decision had been made to utilise expertise of our Board and that Susan Jones had agreed to volunteer and assist in the facilitation of the day.

SM

11. Any Other Business

- 11.1 There was no other business raised.
- 12. Date and Time of Next Meeting
- 12.1 17 May 2022

Governance Summary Communications Template

Report from:	Performance and Ir	nprovement Committee	
Date of meeting:	03 March 2022		
Report author:	Phil Cole		
Summary of key items di meeting, (if possible, kee three):		Decisions made and actions agreed (if possible, keep these to the top three):	
<u>1.Customer Focus Update</u> Members noted the increand queried if they were related issues such as peot tradespersons in their ho focussed on statistics references requested that if possible changed to reflect fewer that would demonstrate the were not at fault as this were sense.	ase in complaints related to Covid ople not wanting mes. Members also erenced in KPI's and they could be complaints upheld chat SLHD services	MMc agreed to discuss member's request with EMT as KPI's were agreed in DMBC Executive Board.	
2.Service Standards Members noted the contents of the report and that the format would be changed for the next schedule meeting.		Members commented that although it was helpful to have a call answered quickly it was more important to be confident that the call would actually be answered if you were waiting longer. SL agreed to feed this back to a Tenant Voice Strategy consultation event.	
3. <u>Repairs Excellence High</u> Members noted updated results from the Repairs E	feedback and	Members were pleased to note that continuous communication with tenants on appointments yielded less wasted appointments which meant less wasted operative time. They requested that this should be highlighted to tenants through appropriate forums and it was confirmed that an article would be included in Housproud.	
Additional notes for com	munication to gover	nance:	
None.			

Company Number 05564649 A Company Limited by Guarantee Registered in England

St. Leger Homes of Doncaster Limited PERFORMANCE & IMPROVEMENT COMMITTEE

3 March 2022 – Hybrid Meeting

Present

Phil Cole (PC – Chair) Sam Bartle (SMa), Steve Lyons (SL)

In Attendance

Mark McEgan (MMc) Director of Housing and Customer Services, Chris Margrave, Director of Property Services, (CM), Jenny Daly, Head of Housing Services (JDa, Louise Robson, Customer and Communications Service Manager (LR), J, Anne Tighe (minutes)

Observer

Ron Rickwood, TRIP Member (RR)

1. Apologies and Quorum

1.1 Apologies were received from Stuart Booth. It was noted the meeting noted was quorate. Phil Cole advised he was standing in as Chair of the Committee. He further advised that the agenda running order would be changed to accommodate a presenting officer.

2. Declarations of Interest by Committee Members

2.1 No declarations of interest were received.

3. Minutes of the meeting held on 17 November 2021 and matters arising

3.1 The minutes of the meeting held on 17 November 2021 were agreed as an accurate reflection of discussions held.

3.2 Item 4.9 – TRIP Report – Cleaning Service Standard

MMc confirmed he had met with TRIP members following the last Committee meeting and added a 6 month update to the Committee forward plan. TRIP members had advised that they were happy with the progress of the work to date around the Cleaning Service Standard, however RR had requested to attend the meeting.

3.3 Item 6.3 – Tenant's Voice Outcomes

It was noted that there was an update later in the agenda.

3.4 Item 7.4 – Performance Information

It was noted that the update around homelessness funds would be provided during the performance update later in the agenda.

ACTION

It was also noted SB, CM and MMc had met to discuss a more slimmed down performance summary.

3.5 *Item 8.6 – Service Standards*

JDa advised she and JL had discussed the suggestion that standards needed to reflect more of what the customer wanted and required reviewing outside of the meeting.

3.6 Item 9.6 – Anti-Social Behaviour Update (ASB)

MMc confirmed he had fed back to EMT the Committee's concerns around increases in ASB and health issues. JDa would speak around this issue to public health and tenancy sustainability, and the new strategy would be aligned with actions.

3.7 Item 12.1 – Committee Forward Plan

This action was covered in 3.4 above.

4. Transactional Surveys

- 4.1 LR attended to lead on this item and highlighted the following:
 - This was the second presentation around transactional surveys (TS) and covered Q1 and Q3 – some of the surveys fed into overall satisfaction survey
 - Feedback was in the main positive with an overall large increase in satisfaction, however Housing Management didn't hit the required sample due to the amount of cases closed
 - Complaints were a low sample size however 100% were happy with their response
 - There was no survey for HomeChoice for Q1 although this was a big driver for dissatisfaction, current supply was extremely low
 - It was pleasing to note that 93% of customers were happy with SLHD as a landlord, however there was a significant drop in satisfaction within neighbourhoods
- 4.2 Members asked if housing management covered a whole range of neighbourhood issues with broad questions being asked, and this was confirmed. The Chair commented that he assumed tenants could be a minority in some streets, therefore ASB may not be related to SLHD tenants therefore the broader issues would mean it would be key for us to have a partnership with SYP and DMBC therefore a challenging issue.

4.3 **The Committee noted the contents of the presentation.**

5. Customer Focus Update

5.1 LR led on this item and reported an increase cumulatively which was the highest in 5 years; Q3 843 against 603 the previous years

cumulatively figure. The KPI that compares our complaints against transactions was therefore unfortunately slightly over that.

- 5.2 Of the 43% of complaints that were upheld, the main themes for service improvements were, time taken to complete, staff actions and lack of communication with tenants.
- 5.3 Enquiries from MP's, Councillors and the Mayor had risen by 28%, 57% and 22% respectively, and there had been 3 Ombudsman enquiries so far this financial year.
- 5.4 It was noted that the Tenant Appeal Panel was still being held virtually and they had heard 7 appeals in Q3; 1 case had been deferred as the tenant had been insistent on a face to face meeting however the Tenant Panel did not agree to this request due to health vulnerabilities with Covid. The Tenant Engagement Team were carrying out more recruitment and training for the Panel and a meeting was being held in the next few weeks to progress.
- 5.5 LR concluded that the majority of complaints were around repairs and it was acknowledged there was a substantial backlog, however the communication team was working hard to improve communications with customers and the Repairs Excellence programme pilot should have a positive impact. The other main area of complaint was around Home Options as there were hug delays and people not getting banding and properties that they wanted.
- 5.6 Members asked if the increase in complaints were largely due to delays, and therefore were a hangover from the pandemic where the organisation operated more slowly and people weren't reporting problems as they didn't want trades people in their homes. LR agreed that people's expectations from coming out of the pandemic were high, however lack of materials was a huge issue compounded by staff shortages due to people isolating and the teams couldn't carry out as many repairs as normal.
- 5.7 CM agreed, and reported that the repairs profile was 20% higher than normal during Q3. People were starting to report repairs and wanted them doing asap. As previously mentioned, staff shortages remained an issue and the organisation would usually rely on partners and sub-contractors to provide additional labour, however the sub-contractor workforce had also been massively reduced and we had to take back work from them due to their issues. In addition to the above, the rates of pay for subcontractors, and their sub-contractors had increased significantly in the sector.Procurement activity was taking place to attempt to source additional sub contractors as soon as possible.
- 5.8 Members asked for more information around stock problems and were advised there was an issue around spare parts and delays in received them. Even gas boilers had become an issue as there

was is a global shortage of chips used in the manufacturing of gas biolers, therefore his teams were looking at alternative boilers.. Ideally the organisation should use the same boilers throughout its stock however the issues were so severe an additional supplier may have to be used. Overall there were delays in being supplied timber, glass, plaster and boilers.

- 5.9 The Chair asked LR to explain the KPI on complaints, and referred to the statistic 0.07% target, not the percentage of resolving it appeared to be a percentage of total interactions. LR agreed that as there were so many interactions with customers, the percentages were in relation to upheld complaints versus the amount of transactional interactions in each particular month.
- 5.10 Members commented that the statistics were so great in extent that they were unable to think about it clearly, it would be more helpful to concentrate looking at how many complaints there were and how many were upheld. So if a third of complaints have been upheld, that statistic was more important that a total number of interactions. They asked if the KPI could possibly be changed to be fewer complaints upheld that would demonstrate our services were not at fault as that seemed to make more sense.
- 5.11 MMc pointed out that it was up to the organisation to agree how the KPI was interpreted and this had been agreed in Executive Board. He agreed to discuss this further with EMT.

ММс

5.12 **The Committee noted the contents of the presentation**.

6. Service Standards

- 6.1 MMc led on this item and reminded members that this report was the problem that the Chair had raised in the last meeting, therefore this was possibly the last time the Committee would receive the report in this forma.t Consultations were taking place with tenants around the Tenant's Voice Strategy and standards would be revisited to allow tenants to let us know what was important to them.
- 6.2 The following were highlighted:
 - Answering calls within 20 seconds average wait increased significantly during the period
 - ASB performance improvement but still not hitting target
 - First Visit complete slightly below target impacted by a shortage and rationing of some materials which is likely to impact on this performance indicator for some time
 - Tenancy Support Team it was pointed out that this was a growing service going forward with major increases in all areas
- 6.3 Members commented that although it was helpful to have a call answered quickly it was more important to be confident that the

call would actually be answered if you were waiting longer. For example queue information on your call being answered would be key to keep confidence high they would be dealt with and more realistic that saying that a call would be answered within 20 seconds. SL advised he would be attending a Tenant Voice Strategy on Monday next and would feed back this comment which he agreed with.

6.4 The Committee noted the contents of the report.

7. Repairs Excellence Highlight Report

- 7.1 CM led on this item and reminded members how the process started with a TRIP review of the repairs process, and he also described responsive and scheduled repairs and issues and waiting times.
- 7.2 What was hoped, through the pilot and eventual roll out of the programme if successful, that it would be a more positive tenant journey which would mean an improvement in satisfaction. SLHD as an organisation currently spent £750k on call out service which was excessive compared with other organisations.
- 7.3 In response for further clarification around immediate and scheduled repairs, it was explained that emergency repairs weren't always emergencies as some customers were adept at escalating issues, and the call out service was also used to roll over jobs from the current day as if it came under a day response it would be pushed to call out. Responsive repairs included emergencies requiring attendance within 2 hours such as threat to life, emergencies requiring attendance within 24 hours including total loss of power, responsive requiring attendance within 5 days including partial loss of power.
- 7.4 The pilot was summarised as follows:
 - Commenced 28 January 22 for a 4 week period, all trades and one geographical area close to the Depot
 - Intensive work embedding new processes, to different working to get underneath the criteria of repairs and engage with teams
 - Pilot completed and now being evaluated.
 - 461 repairs through repairs excellence
 - A text would be sent to tenants confirming date and time of repair being booked in. A further 2 text reminders would be sent. On the morning of the repair a further text would be sent then trades person would call ahead to confirm tenant was at the property, and to ask a few simple questions i.e. where is the leak, tap or pipes, to ensure all repair kit was on van.

- 58 of the above repairs were no contact even after all the reminders. 23 of the 58 were booked back in, 2 were attended the same day.
- Of the 58 no-contacts, that saved £70-80 each no-contact and that time would then be taken on completing another repair which was significant sums of money daily
- 7.5 The teams have fed back that although the pilot was a little 'clunky' as it was restricted to one area for a pilot, they were keen to go borough wide to share over multiple areas. It had therefore been decided to undertake a further 4 weeks taking in to the pilot a neighbouring area. At the end of the 4 week period consideration would be made to go borough wide in the next 8 weeks; to this end all customers would be informed that they were part of a pilot and information confirming contact details such as texts would be sent to them. If they didn't respond or take the confirmatory call on the day of the scheduled repair the procedure that would be followed was as explained earlier.
- 7.6 To prepare the pilot to go borough widefurther training, needs to undertaken with the the rest of the teams, this on-boarding process would allow them to understand why it was important to the organisation. The IT infrastructure and stores infrastructure also needs further consideration and development in order to scale up the pilot without scaling up the issues. During the first phase of the pilot some diaries dried up during the day, further work was drawn down from diaries this was pleasing to see during the pilot. This could also mean less call out repairs in out of hours. It was hoped that the larger roll out would mean dealing with repairs quicker and in a more acceptable timeframe. A text message monkey survey had been carried out throughout the pilot and the people that have responded have been in the main positive.
- 7.7 Members asked for clarification, were tenants given an all-day appointment then receiving a call to advise them when trades would arrive. It was explained that they would receive a telephone call on the day to confirm travel; if a trade calls and advises tenant you're my next job and are you available and there was not answer then he would call the next job. Possibly in the future tenants would be provided with a more refined appointment time.
- 7.8 Members were pleased to note that continuous communication with tenants on appointments should yield less wasted appointments which would mean less wasted operative time. It would be good for tenants to know that another tenant would be getting a visit because we haven't wasted time travelling to a tenant not being in. It was noted that this would be included in publicity around the process.
- 7.9 CM concluded that repairs to protect the asset i.e. water through a ceiling, would be responded to as soon as possible. If the tenant

was then not in, then we need to know why they'd report such a problem and not be there to admit trades.

7.10 **The Committee noted the contents of the report.**

8. Repairs Excellence Presentation

8.1 Members noted this had been covered in the agenda item above.

9. Tenant Voice Outcomes

- 9.1 JDa led on this item and confirmed that SL had mentioned the Tenant Consultation event scheduled for 7 March 2022. Tenants were being consulted further on the Tenant Involvement Strategy to ensure that all their feedback had been recorded and contained within the revisions of the document. The Strategy would then be presented to the April Board Meeting.
- 9.2 Teams had been working closely with TPAS and TRIP to develop actions contained within the strategy, and work was ongoing with the High Rise Forum mentioned in the report trying to raise engagement. The newly appointed Building Safety Manager would provide real focus on high rises and it was anticipated we'd see some tangible outcomes once more tenants became involved. JDa conclude by pointing out the detailed range of activities and other opportunities for consultation contained in Appendix 1 of the report.
- 9.3 Members commented that to engage with 140+ of tenants in a meaningful way was a good feature of the organisation. Tenant participation was the toughest nut to crack as most people don't want to interact. The Strategy was very worthwhile and members were delighted that SLHD was close to getting TPAS accreditation.

9.4 **The Committee noted the contents of the report.**

10. Rise in Homeless Presentations and Best Use of Stock

- 10.1 MMc led on this item and reminded members that it had been presented at the February Board Meeting; to summarise with the rise in demand, and turnover that is less, there were more people wanting social housing and less properties to offer. It was mainly applicants in the Platinum band that were being offered tenancies and anyone in less than Gold banding had very little chance of getting a property. This had had increased pressure on the Home Options teams, with a fourfold or more increase in homeless presentations. Temporary accommodation and B&B use were really high and officers were working on an exit plan; most other authorities were in the same situation.
- 10.2 In response to a query for clarification around B&B it was explained that this was hotel accommodation. Temporary

accommodation was void properties and there were currently 99 people in them at present and basic necessities such as camp beds were provided. If someone presented as street homeless they would go into commissioned hostels and other providers and with support would move into accommodation. If there were any 3 bed void properties then families would be placed in them.

- 10.3 Members asked if the 218 days average in supported housing was hostels and this was confirmed. DMBC negotiated contracts with hostels to provide accommodation such as Riverside, YMCA and The Foyer. The main issue was that the hostels were full and the average length of stay was too long; the system was locked and this was a real issue.
- 10.4 There had been a number of programmes rolled out with Central Government i.e. 'everybody in' and 'protect and vaccinate'. Partnership work was really good with excellent feedback from all arenas. 21 rough sleeper had been identified and all had been offered accommodation; 17 had refused accommodation and analysis was being carried out on why this was being done. The vaccination clinics going into hostels and on the streets, did not only offer vaccinations for Covid, but other vaccinations at the same time. The main win was getting them onto GP lists which would normally be extremely challenging.
- 10.5 It was reported that there was also an emergency protocol, the Severe Weather Emergency Protocol (SWEP) which is launched for humanitarian grounds. SLHD partnered with St Pauls' Church and made 8 sit up beds available. Street homeless would take that but not B&B as they had more trust with the Church and Complex Lives team would try and engage with them at that point. SWEP was in all likelihood finished not until Spring.

10.6 **The Committee noted the presentation.**

11. Performance Information

- 11.1 The Chair requested an update on any pertinent dashboard key areas and members were advised:
 - Homelessness 3 blue's meaning these issues required careful monitoring
 - Rent Arrears although showing green there were concerns that due to rising costs for so many tenants, the need to focus and do modelling to address the risk that this poses was key to keeping it green
 - First Visit Complete currently on Amber and this linked back to repairs excellence and classification of first time visit. Slightly under target however this may change prior to next Board. CM planned to discuss in detail with EMT to agree what a first time visit means i.e. plastering, doing an inspection?

- Voids voids were under significant pressure to get voids down to target. The organisation was working with contractors and sub-contractors to bring the void rent loss down. However the issue was the same issue on normal repairs as previously discussed in the meeting. A point of note was there was a waiting time of 12-14 weeks for fire doors.
- 11.2 Members agreed that costs of living were rising, and energy bills in particular were going to increase twice this year which would put a lot of tenants under pressure.
- 11.3 Members expressed concern over days lost to sickness KPI which has worsened, and asked if this in any way was related to the Repairs Excellence pilot. It was explained that one of the high levels of absence was stress, followed by muscular skeletal issues. Teams in HR and management were working hard to address any issues identified. The team working on Repairs Excellence were not impacted by any sickness. MMc further clarified that stress indicators were broken down into non-work and work-related, with the former being the main issue.
- 11.4 The Committee noted the contents of the presentation.

12. Any Other Business

12.1 No other business was raised and the meeting closed.

Governance Summary Communications Template

Report from: Audit & Risk Comm		ittee	
Date of meeting:	4 March 2022		
Report author:	Trevor Mason		
Summary of key items di meeting, (if possible, kee three):		Decisions made and actions agreed (if possible, keep these to the top three):	
1. Internal Audit Reports Financial. Following discussion arou categorisation of lower a general financial audit, m how the Internal Audit Te up to ascertain issues wo	and the ssurance for the embers queried eam would follow	The Internal Audit Team advised they would revisit the accounts payable process and carry out a small review of opinion in Quarter 1 Members noted an update would be provided at the next meeting.	
2. Internal Audit Reports The Internal Audit substantial assurance had commented that it was project go through with compliance.	Manager reported d been awarded and d unusual to see a	Members asked that their congratulations to staff involved in TOP be forwarded to them for their work and such excellent results.	
3. Internal Audit Plan 20 The Director of Corporate that the plan had been co review of the risk register business areas, all signific and a discussion with Lea draft plan was detailed for	e Services advised ompleted after a rs, any new cant business areas dership team. The	Members commented that it was a strong Internal Audit Plan and showed that the business was improving through the implementation of recommendations from previous audits.	
outline for years 2 and 3 reviewed again before th year.		The Committee noted and approved the contents of the report.	
Additional notes for com	munication to gover	nance:	

St. Leger Homes of Doncaster Limited

AUDIT & RISK COMMITTEE MEETING

4 March 2022

Present

Trevor Mason (Chair), Richard Allan Jones (part of meeting) and Anthony French

In Attendance

Julie Crook - Director of Corporate Services (JCr), Nigel Feirn - Head of Finance and Business Assurance (NF), Nicci Frost-Wilson - Doncaster Council's Internal Audit Manager (NFW), Jason Burgess – Beevers and Struthers (JB), Richard Graham – Beevers and Struthers (RG) and Anne Tighe (AT) – Executive Support Officer (minutes).

1. Apologies and Quorum

1.1 Quorum was noted and the meeting commenced. Unfortunately due to connection issues Richard Allan Jones lost connection and the meeting was then not quorate. *Post meeting note: *Item 9 – Internal Audit Plan was the only item requiring Audit & Risk Committee approval. The Director of Corporate Services requested email agreement from Richard Allan Jones. This was received on 7 March and is kept with minutes for future reference.*

2. Declarations of Interest by Board Members

- 2.1 There were no declarations of interest.
- 3. **Private Conversation with Auditors if required**
- 3.1 It was noted that no conversation was required.
- 4. Previous Minutes and Matters Arising 1 November 2021
- 4.1 The minutes of the meeting held on 1 November 2021 were agreed.
- 4.2 **From Agenda Item 3.2 Temporary Accommodation** Members were advised that analysis around temporary accommodation had been given in the form of a presentation to the Board on 3 February 2022.
- 4.3 **From Agenda Item 11.8 Forward Plan –** it was noted that the requested update around The One Project (TOP) was on the main agenda.

ACTION

5. External Audit Strategy

- 5.1 Richard Graham, External Auditor from Beever and Struthers, attended to introduce this item. He explained that the Audit Strategy was similar to plans seen before in terms of audit focus, and the main change was that Jason Burgess, from Beever and Struthers was now the Audit Manager for SLHD.
- 5.2 Jason Burgess advised Members that the document was largely unchanged from the previous year. The following was highlighted:
 - Completed planning procedure and held planning meeting with Director of Corporate Services and Head of Finance and Business Assurance
 - The Risks agreed in the 2021 plan hadn't significantly changed
 - Members attention was drawn to the risk relating to pensions as it had now increased to significant risk
- 5.3 Members queried why the risk relating to pensions had been increased. It was explained that following a review of Audit Regulations in relation to pension schemes guidance had been issued around how audit firms were tackling the audit of the figures in financial statements relating to pensions. The pension figures themselves involve a lot of estimation and judgement which come from actuaries; robust procedures and checks are required around this and this is why there is a significant risk.
- 5.4 The Director of Corporate Services pointed out that the largest number on the balance sheet was pensions related and had been since the formation of the ALMO. It was noted however that SLHD did get a guarantee from the Council underwriting the pension deficit however it was still essential to ensure that the figures were correct.
- 5.5 Members asked if increases in the cost of living and inflation were factored in to forecasts. It was explained that the contribution rates for employees were fixed until 2024; for employers, the contribution rates would change from 1 April 2023 and that review was starting now. It was noted that financial markets are currently very volatile and the valuation of the pension scheme is based on one fixed date but generally the approach to pension investments, planning and valuations was a long term one.
- 5.6 The Director of Corporate Services further advised that this pension scheme was expensive for employers and generous for employees and a national review of the local government pension scheme was expected. Members were also advised that the current pay award had just been settled and was significantly lower than inflation.
- 5.7 The Chair thanked the attendees from Beever and Struthers for their presentation and they left the meeting.

- 5.8 **The Committee noted the contents of the External Audit Strategy.**
- 6. Monitoring of SLHD Internal Audit Programmes by DMBC Internal Audit
- 6.1 The Head of Finance and Business Assurance presented the following:
 - The 2021/22 Audit Programme consisting of 79 planned audit days
 - After the 4 reports presented to the Committee later in the agenda, the audit work would be completed
 - The 2 remaining outstanding audit recommendations around Repairs Productivity from previous audits have been implemented in the period since the last meeting and there were now no outstanding audit actions.
- 6.2 The Committee indicated it was a pleasing result from the organisation and asked that their thanks to staff be passed on. The Director of Corporate Services advised that the Executive Management Team (EMT) had conveyed their thanks to staff within the EMT update messages.
- 6.3 **The Committee noted the contents of the report.**

7. Internal Audit Reports

7.1 <u>Temporary Accommodation</u>

The Internal Audit Manager reported that the Temporary Accommodation piece of work followed on the from the previous audit, which had given limited assurance due to the team being in a poor position; work was intense and staff were not doing debt collection. It was very pleasing to note, that despite the fact that the team had been re-audited during a busy period and that there was also a significant increase in workload, improvements had been noted including extensive work on debt management procedures and moving people on. The results of the work undertaken meant that the team were in a good position and substantial assurance had been awarded from the Internal Audit Team

- 7.2 Members queried if the organisation had got the resource balance right around recovery. It was explained that a lot of recovery had been targeted in the cases looked into, and if payments were not being met then the tenant would be evicted. The team were affected for a period of time during Covid as restrictions meant organisations could not evict tenants, however as soon as this was lifted they were evicted.
- 7.3 Members queried the risk, 20-25% recovery. It was noted that rates fluctuated and were difficult to compare year on year; it was also dependant on clients and if they were in receipt of Housing Benefit

as this could be claimed back, however other people can be difficult to predict.

- 7.3 In response to a query around what the scale of write off was, the Director of Corporate Services explained that these are monitored closely and actioned during the financial year due to the nature of the client group.
- 7.4 Members referred to the significant turnaround by the team and asked if this had had a major impact or was it linked to systems. It was explained that it was mainly due to the approach of the team and clear management guidance. They were still working with spreadsheets and now they were doing things differently and this was having a positive impact; the process of supervision was now working well. Members commended the team for the improvement in performance.

7.5 <u>General Financial</u>

The Internal Audit Manager advised there was a split opinion with substantial assurance given for payroll and partial assurance for creditor's functions. The partial assurance was not a worrying factor but the main factor driving the lower opinion were the risks associated with the change from the task module which had been replaced with Open Housing (OH) which led to concerns for the audit team, driving its opinion. The interface between the financial ledger and OH is not operational and therefore a manual process is in place and Internal Audit felt that this posed a greater risk of inaccuracies with payments. It was noted that no errors had been found during the testing. The lower audit opinion was due to the perceived increased risk due to the manual processes and the fact that the regular fraud checks had not been completed due to increased workloads as a result of the new system and the manual processes. The response from SLHD was that other additional checks are taking place as a result of the manual work around. It was agreed that some additional audit work would be completed during Q1 of 22/23 once the interface was working and regular fraud checks were being completed again.

- 7.6 Members referred to creditor's functions and commented that it was obvious no-one hadn't been not paid, and no-one had been wrongly paid, however there was too much reliance on manual intervention. The Internal Audit Manager stated that if it was just problems around the interface substantial assurance would have been given, however when it was coupled with delays and extra workload and duplication this led to the categorisation of lower assurance.
- 7.8 The Head of Finance and Business Assurance reported that his team had done a lot of work around this issue and if anything controls were stronger as they were being checked more, therefore he was disappointed that only partial assurance had been given. He was hopeful that no issues would be found when follow up work was carried out around this. He agreed no-one had been paid twice,

however he acknowledged not in a timely manner. Further work on IT processes and interfaces had been carried out and it was anticipated they would be running fully automated in the near future. In response to a query from members around review, it was confirmed that the internal audit team would be revisiting the accounts payable process and do a small review of opinion in quarter 1. Members noted an update would be provided at the next meeting.

JCr/NF

Members were surprised to note that there were still problems with payroll systems in Rotherham as it was now well over a year since they had been identified. The Internal Audit Manager advised that these minor discrepancies only occurred at the time of implementation (no further discrepancies have been identified but these early ones have not been resolved). It was advised that if the discrepancy was still outstanding by next year then it would be removed from the audit report.

7.9 Housing Rents

It was reported that the monitoring and collection of housing rents within St Leger Homes was generally sound, and the internal audit team provided substantial assurance over the operation of this system.

7.10 <u>TOP Phase 2</u>

The Internal Audit Manager reported substantial assurance had been awarded. Officers had looked at the project management of the implementation of TOP phase 2 and had tested thoroughly the data transfer and the governance arrangements for the project. They were confident that it was a good, well managed project with solid arrangements in place. She commented that it was unusual to see a project go through with this level of good compliance and good opinions coming out of audit and she proffered her congratulations to staff involved in the project.

- 7.11 Members were pleased to note the results of the TOP Phase 2 and **JCr** asked that their congratulations to staff involved in TOP be forwarded to them for their work and such excellent results.
- 7.12 **The Committee noted the contents of the report.**

8. Internal Audit Annual Report 2021/2022

8.1 The Internal Audit Manager led on this report and advised that it reflected work completed throughout the year to support the opinion of the audit team. The report also included a copy of the external peer review of the Internal Audit service, which was completed by the Internal Audit service from Rotherham in December 2021. Their opinion of DMBC Audit Team was that they generally conform to standards and procedures, which was a good outcome as this is generally regarded as the highest opinion level available for such a review.

- 8.2 Members were asked to note the 2 projects deferred; Health and Safety as extensive coverage from partner agencies had been completed therefore no value for this to be duplicated, and joint procurement with DMBC as this was not required as the procurement team had TUPE'd to the Council during the year.
- 8.3 Members referred to the fact that the above 2 projects had been deferred therefore asked when they would be reviewed. It was explained that they were included in 2022/23 plan to see if they were working well.

8.4 **The Committee noted the contents of the report.**

9. Internal Audit Plan 2022/2023

9.1 The Chair noted that Councillor Richard Alan Jones had not managed to log back into the meeting. Following a brief discussion it was agreed that he would be sent an email requesting confirmation that he agreed to approve the report and this would be kept on file for a quorum decision.

JCr

- 8.2 The Director of Corporate Services led on the above report and advised that a number of years ago it had been agreed to present a 3 year plan. The plan had been completed after a review of the risk registers, any new business areas, all significant business areas and a discussion with Leadership team. The draft plan was detailed for year 1 and in outline for years 2 and 3 and these would be reviewed again before the relevant financial year.
- 8.3 Members commented that it was a strong Internal Audit Plan and showed that the business was improving through the implementation of recommendations from previous audits.

8.4 **The Committee noted and approved* the contents of the report.**

10. The One Project (TOP) Position Statement

10.1 The Director of Corporate Services led on this report which had been requested by members and drew attention to the objectives set out in paragraph 2.2. It was explained that the system had gone live and there was still 'snagging' ongoing. The Planned Maintenance module still required implementation as well as a review of which system we use for Choice Based Lettings (CBL). It was disappointing that the organisation had not achieved everything that we wanted at the outset however TOP had combined a large number of systems. The next thing to do would be to reflect on what has been done and what efficiencies had been realised through, for example, less administrative processes being required with the new system.

- 10.2 Members asked if the TOP team had been stood down and were advised they had moved back to their original teams; the Project Manager had left the organisation.
- 10.3 Members queried how the efficiency gains would be captured. It was explained that there would be a final review of the project and officers would be comparing this to the processes completed with the old system. It was acknowledged, however, that the business and processes had moved on since the initial scoping of product. The overall savings target for the business was based on the cost for the investment in this project therefore £1m was needed to be saved over 3 years.
- 10.4 The Committee asked for an update on the next steps. The Director of Corporate Services advised:
 - Need to capture what we have achieved and what we need to do next
 - There would not be a TOP Phase 3
 - The item would be kept on the SLHD Digital Transformation Board to drive forward the work plan and key to this would be moving the business forward not least with the systems implemented, but Capita has a web based upgrade available
 - EMT would be continually monitoring
 - Report to Board in December on final outcomes from the project.
- 10.5 **The Committee noted the contents of the report.**

11. Business Continuity Plan

- 11.1 The Head of Finance and Business Assurance led on this report and advised it was about what would happen if there was an event that affected our services, i.e. a loss of power. There was a full review of the plan during 2021 and it was continually reviewed to ensure it was still fit for purpose. This report gave details of activity during the year. The following were highlighted:
 - Loss of premises relocation plans need review once staff have moved to the Civic building
 - Cyber-attacks and loss of IT systems there was ongoing work with DMBC to see what the organisations would do if systems went down. This was also on the risk register. It was noted that it had not been tested as during the last 2-3 years there had been so many real issues to work through.
- 11.2 Members asked if agile working had been addressed and this was confirmed. It was further reported that in plans from previous years there had been a consideration about the provision of office premises, however as a lot of staff can now work from home, desk spaces and office premises were not as important as in the past.

11.3 **The Committee noted the contents of the report.**

12. Emergency Plan

12.1 The above report was presented and members were advised it was a very similar report to the one above, and had been tested recently with Covid and local floods; no major changes to report other than the updating of contact details.

12.2 **The Committee noted the contents of the report.**

13. Fraud Register and Related Activities

- 13.1 The Director of Corporate Services presented the report and advised that the employee in 2.1 had resigned.
- 13.2 Members referred a previous case that had been reported and queried the management approach to this and how it had been addressed. The Director of Corporate Services explained that she had been the hearing officer for that particular case and an action plan came out of the proceedings and Human Resources would roll this out within the organisation as a learning opportunity for managers.
- 13.3 **The Committee noted the contents of the report.**

14. Forward Plan

- 14.1 Members were advised that the forward plan contained regular reports and annual reports. The ad hoc items were the review of the Value for Money Strategy which would be brought to the Committee in June along with the revised Contract Standing Orders.
- 14.2 **The Committee noted the contents of the report.**
- 15. Date and Time of Next Meeting

Monday 12 June 2022 – 2pm