

Board lunch invitation list

Dear all,

On 2nd February, either at the Board or as part of lunch, Dave Wilkinson was updated on recent achievements of our apprentices following the Doncaster College Apprentice Awards where one of our Apprentices won Apprentice of the Year, and our own in-house Apprentice Awards as part of Apprentice Week.

Dave asked us to invite the winners to the next Board lunch – Thurs 6th April.

I thought it would be helpful to advise of the apprentices and some managers who are attending lunch to meet and chat with those Board Members in attendance in person.

Apprentice Champion Award

Simon Goodwin

Learner Award

Gemma Davies (Simon Goodwin is Gemma's manager)

Outstanding Work Award

Jack Aston

Living Our Values Award

Adam Todd

Rising Star

Chloe Martin

Career Progression Award

Lucy Roberts

Catherine Sullivan – Career Start Co-Ordinator will also be in attendance to help with conversations and discussions

**ST LEGER HOMES OF DONCASTER LIMITED
BOARD MEETING**

**To be held at 2pm on Thursday 6 April 2023
Civic Office, Floor 4 – Room 410 or via MS Teams (Hybrid Meeting)**

AGENDA

1pm – 1.30pm Pre-Board Training – Repairs Excellence

- | | | | |
|----|--|---------|-------------------------|
| 1 | Apologies and Quorum | | Verbal |
| 2 | Declarations of Interest by Board Members | | Verbal |
| 3a | Matters arising and action log from previous meetings | T Mason | Enclosed |
| 3b | Ratification of minutes of meeting held on 2 February 2023 | T Mason | Enclosed |
| 4 | Chair and Chief Executive's update | T Mason | To be circulated |

For Approval

- | | | | |
|---|------------------|------------|-----------------|
| 5 | Budget Approval | J Crook | Enclosed |
| 6 | Committee Review | D Richmond | Enclosed |

For Information

- | | | | |
|---|---|---------|-----------------|
| 7 | Equality and Diversity Strategy – Annual Update | J Crook | Enclosed |
| 8 | KPI Performance (March 2023) | J Crook | Enclosed |

Committee Information for Noting

- | | | | |
|----|--|--|-----------------|
| 9 | Committee Minutes | | Enclosed |
| | <ul style="list-style-type: none">• Performance & Improvement Committee - 23 February 2023• Audit & Risk Committee – 6 March 2023• Building Safety & Compliance Committee – 12th January 2023, 25 January 2023 and 20 February 2023 | | |
| 10 | Any Other Business | | |
| 11 | <i>Date of next meeting</i>
<i>1 June 2023</i> | | |

Matters Arising and Action Log from Previous meetings

St Leger Homes of Doncaster Board - Action Log						
NO	Month	Ref	Action	Progress	Completed Y/N	Owner
58	Feb-23	12.5	<p>Revenue Monitoring Q3</p> <p>One to one session agreed to run through the figures with Cllr RA Jones, Board member.</p>			JCr
57	Feb-23	10.3	<p>KPI Performance – Complaints</p> <p>Complaints analysis report to be submitted to P&I Committee for an in depth review to understand the numbers and reasons behind the complaints, then further discussion at Board.</p>			MMc
56	Feb-23	9.2	<p>Draft ADP 2023/24</p> <p>DMC Action Plan (26 point) to be referenced in the report.</p>			JCr
55	Feb-23	7.6	<p>NHF Code of Governance</p> <p>The Chair suggested the gap analysis could be reviewed at a future Board Away Day.</p>			JCr/LR
54	Feb-23	6.4	<p>Gender Pay Report - Women in Construction</p> <p>a.) Targeted recruitment campaign, to attract not just apprentices.</p> <p>b.) Benchmarking data to compare with neighbouring ALMOs. i.e. how many</p>			JCr

			females in trade roles/apprenticeships.			
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52	Dec-22		<p>SOCIAL STATEMENT - A</p> <p>Member asked about the format, and asked, for future reports, if some case studies and examples can be highlighted to illustrate the detail more and demonstrate the impact we make by our social value.</p> <p><u>2 Feb 23</u> - Members noted the above points would be picked up in next year's social statement. For the purposes of the minutes the action could be removed.</p>	Complete	Y	JCr

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Company Number 05564649
A Company Limited by Guarantee
Registered in England

St. Leger Homes of Doncaster Limited

BOARD MEETING

Hybrid meeting

2 February 2023

Present:

Dave Wilkinson (Chair), Trevor Mason, Cllr Richard Alan Jones, Steve Lyons, Susan Jones, Milcah Walusimbi, Cllr Joe Blackham (partial), Cllr Phil Cole (partial), Dave Richmond.

Also In Attendance:

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

Members of the Public/Observers:

Karen Ratcliffe - Assistant Director Economy and Environment, Doncaster Council.
Louise Robson - Governance Service Manager
Sharon Ashurst – Customer Access Team, Team Leader

1 Apologies and Quorum

1.1 Apologies received from Stuart Booth and Sam Bartle.

1.2 Karen Ratcliffe, Louise Robson and Sharon Ashurst were all welcomed to the meeting.

2 Declarations of Interest by Board Members

2.1 There were no declarations of interest.

3 Minutes of the meeting held on 1 December 2022 and matters arising

3.1 Board noted updates against outstanding actions.

4 Chair and Chief Executive's Update

4.1 The Chief Executive presented the report that included updates in the following areas: SLHD Management Agreement, Preparing For Inspection, Board Member Allowances, Safeguarding Return, Personal Development Plans, Severe Weather Emergency Protocol (SWEP), TPAS Accreditation, Building Safety External Façade, Damp, Mould and Condensation (DMC) and High Rise Remediation.

Action

A more detailed discussion took place in relation to the following:

4.2 Board Recruitment

The Chief Executive advised this year it is the turn of both Trevor Mason (appointed 2017 and reappointed in 2020) and Sam Bartle (appointed 2020) to stand down and seek reappointment if they so wish. He explained it is not proposed to go out for recruitment of a Vice Chair, but to appoint a Vice Chair from the Board membership as it stands.

4.3 **Board agreed this approach for the process of Vice Chair recruitment and as indicated in paragraph 6.3 of the report.**

4.4 Homelessness

The Director of Housing and Customer Services raised since writing the report the number of bed & breakfast cases had increased to 63. Approaches to the Home Options service still remain high at around 1,800 per month but the good news is we are starting to see reductions in time to process cases and number of calls coming through.

He explained a benchmarking exercise was being undertaken to compare with neighbours ALMOs.

4.5 The Chair sought assurance, and asked once the additional funding comes to an end, are we confident we can keep up this good work?

The Director of Housing and Customer Services confirmed that July 2023 would be when the funding ends, he was hopeful however, due to the cost of living crisis people may approach us who have never done so before. He explained rents can be significantly higher than local government allowances.

4.6 The Chair queried do we have sufficient accommodation?

The Director of Housing and Customer Services explained in normal circumstances we do however, when local events are running such as the races there can be times when we have to place outside of the city. Once the events have finished, officers immediately look to bring people back to the city.

4.7 The Chair asked - How many opportunities do we give someone?

The Director of Housing and Customer Services advised if someone is vulnerable for a number of reasons, as a landlord we have a duty. However, if someone is barred, they lose their protection.

5 **Strategic Risk Register**

5.1 The Director of Corporate Services presented the report that gave an update on all strategic risks facing the company following a review by Leadership at their meeting in January 2023.

5.2 Members noted no new risks have been added and no risks have been removed. There had been updates to risk causes, effects, controls, assurances and actions to mitigate risks. However, ratings remained unchanged.

5.3 The Chair asked if the acquisition of properties in the coming year was seen as a risk, in terms of not being able to meet the challenges given by Doncaster Council?

The Director of Corporate Services advised a new budget had been set within the housing capital programme in addition to a new staffing structure being put in place. She explained until we start the process we won't know for sure however, it wasn't currently thought to be a strategic risk.

5.4 The Vice Chair highlighted that customer satisfaction levels were decreasing.

The Director of Corporate Services explained what we are experiencing is the same as other providers, but our volumes of complaints are significantly higher and we are therefore reviewing this. She pointed out there was an opportunity for further discussion later on the agenda.

5.5 One member asked in relation to industrial action and strikes – How much of a risk is that to us as an organisation, and our relationship with the trade unions?

The Director of Corporate Services advised that union membership was high at approximately 60-70% of the workforce, which was estimated using deductions from payroll.

The pay award for this year has been settled, with officers meeting in February 2023 to start negotiations for next year. The situation was being closely monitored by Leadership.

The Chief Executive confirmed that the relationship with trade unions was extremely positive and supportive. He highlighted it would be a national pay award or strike should it come to that. He did think it could be a risk this year, commenting local government pay has reduced by around 30% in real terms over the last 10 years.

The Director of Property Services added that during last year's pay negotiations EMT worked hard to ensure staff understood that the pay award was a national award and not the responsibility of the

organisation. He commented, hopefully that as we enter into negotiations this year it will have a bearing.

- 5.6 Another member highlighted concerns around recruitment issues and questioned whether the dashboard was giving a true reflection.

The Director of Corporate Services stated that the dashboard reflected the whole of the workforce, difficulties in recruitment to specific vacancies were being experienced in small pockets of the organisation. As an example she explained that in a recent recruitment campaign for Apprentices there were in excess of 100 applications submitted. She further advised we are managing those specific recruitment problems, most are related to the pay on offer and we are looking at long term succession planning.

Additionally, the Director of Property Services highlighted he had seen a shift and an increase in the number of candidates available via recruitment agencies. He added, with this in mind we need to attract and recruit people from a diverse range of society into the business.

- 5.7 The Chair queried – At what point do we put something in around the regulator for social housing - inspection regime? (due to commence April 2024)

The Director of Corporate Services explained the registered provider is the landlord, and much of what Doncaster Council is delivering is delegated to SLH, so potentially we do need to look at incorporating the inspection regime into the document at the appropriate time.

5.8 Board noted the updated Strategic Risk Register.

6. Gender Pay Report

- 6.1 The Director of Corporate Services presented the 2022 Gender Pay Gap report, which is now presented to Board for approval before publication, in the absence of Employment & People Committee.

- 6.2 It was noted in addition to reporting on the gender pay figures, the statement includes: a summary of actions taken in the last year, and future proposed actions.

- 6.3 Members noted an improvement in the 'median' pay gap difference at 4.36% and marginally widened 'mean' pay gap difference at 6.17% since the previous year.

6.4 Women in Construction

A discussion took place around the limited numbers of females employed to carry out trade roles within the organisation.

<p>It was decided that in all future recruitment we will promote flexible working, working alongside female colleagues and favourable terms & conditions. Also consider running a female trade group to gather feedback from existing staff to capture what they think would attract prospective applicants and use success stories.</p>	<p>JCr</p>
<p>The Chair commented he would like to see benchmarking data to compare with neighbouring ALMOs.</p>	<p>JCr/ SM</p>
<p>6.5 Board approved the Gender Pay Gap Report attached at appendix 1, subject to the above actions.</p>	
<p>7. <u>NHF Code of Governance</u></p>	
<p>7.1 The Director of Corporate Services explained the National Housing Federation (NHF) Code of Governance was presented at Board Strategic planning day in July 2021 and a further update was given to Board in November 2022.</p> <p>In July 2021, Board were presented with other examples of Governance Codes, however Board asked the Executive Management Team (EMT) to draft a plan for adoption of the NHF Code and to clarify where St Leger were already compliant and highlight any gaps that needed addressing in order to comply.</p> <p>A gap analysis and self-assessment has been completed, a review of the code has been undertaken by EMT, alongside the Governance Service Manager, and suggestions / challenges have been made to evidence each section.</p>	
<p>7.2 Board were asked to review all sections of Appendix A to see if they agreed with the determination, evidence or actions that needed to be taken. Members were also asked to formally adopt the NHF code of Governance.</p>	
<p>7.3 <u>Reference 1.3 & Reference 1.4</u></p> <p>The Director of Corporate Services drew member's attention to 1.3 and 1.4 of the compliance checklist highlighting the evidence collated and asked if Board were in agreement with the determination, which they confirmed they were.</p>	
<p>7.4 <u>Reference 3.7(3) – Maximum tenure will normally be up to 6 consecutive years.</u></p> <p>The Director of Corporate Services explained this is an area where the Board had previously expressed a view that they did not wish to comply. The previous discussions had focussed around the priority being getting the best Board Members possible.</p>	

A discussion took place and Board agreed they wanted the maximum tenure to remain at 9 years – being 3 terms with a stringent recruitment process in place every 3 years. This could be evidenced and provide assurance to Board that the best candidate was being recruited at each time a vacancy arose.

- 7.5 The Vice Chair commented he didn't want to detract from what was an excellent piece of work, but asked what are the benefits and costs of this work?

The Chief Executive explained the code is a proven and a useful tool to ensure from a governance point of view we are on-track and can be used to demonstrate how effective we are. Other than when the organisation and the Council are formally inspected, it would be looked at. He confirmed there are no costs implications.

- 7.6 The Chair commented on the excellent piece of work noting non-compliance in only 10 areas prior to starting the work. He suggested that the gap analysis could be reviewed at a future Board Away Day.

JCr/LR

7.7 **Board**

- i) **Formally adopted the NHF Code of Governance**
- ii) **Following review of all sections of Appendix A agreed with the determination, evidence or actions that need to be taken.**
- iii) **Gave no further suggestions for those sections where SLH are not complaint or partially compliant.**

8. Annual Development Plan (ADP) 2022/23

- 8.1 The Director of Corporate Services presented the report referring to the actions with highlights at point 3.4 and two actions which were not on track at 3.5.

No questions were received in relation to this paper.

8.2 Board noted the ADP 2022/23 update.

9. Draft Annual Development Plan (ADP) 2023/24

- 9.1 The Director of Corporate Services presented the report to provide Board members with the proposed 2023/24 ADP and Key Performance Indicators (KPIs).

She explained the 2023/24 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.

The Regulator published new Tenants Satisfaction Measures (TSMs) in 2022 and these have been incorporated where appropriate in developing the KPIs.

9.2 The Vice Chair commented on two aspects of the report:

1. Customer complaints – he didn't feel came out strongly enough; it's implied.
2. Damp, Mould & Condensation (DMC) – there was no reference to actions already taken.

He felt it was important to address those areas.

The Director of Corporate Services advised that in relation to DMC we do have all of the plans in place, she didn't think there would be lots to do in the developmental stage apart from the creation of the DMC team. However, the 26 point DMC Action Plan should be referenced in the ADP.

JCr

9.3 Board noted the proposed 2023/24 ADP and KPIs.

10. KPI Performance (December 2022)

10.1 The Director of Corporate Services presented the report to provide Board members with the KPI dashboard as the end of Quarter 3 2022/23 and brief commentary for those KPIs where the target was not being met.

10.2 KPI 2 – Void Rent Loss and KPI 3 - Average days to re-let standard properties

She commented we are in a very similar position to previous reports with void rent loss and average days to re-let standard properties, but there was a month on month improvement in performance.

10.3 KPI 7 – Number of complaints upheld as a percentage of interactions

She sought feedback from Board as to how they would like to proceed, and seek assurance around the number of increased complaints?

Board agreed for a report to be submitted to Performance & Improvement Committee to carry out an in depth analysis of the numbers and reasons behind the complaints, followed by a further discussion at Board.

MMc

10.3 **Board noted the Quarter 3 2022 KPI Dashboard.**

11. Health and Safety Performance Report

- 11.1 The Director of Property Services presented the report, referring to a number of key highlights:

Gas servicing – a reconciliation of the programme is now taking place to provide assurance that all properties which require a gas service have received one and that there is evidence available to support this, which is uploaded into C365.

- 11.2 CO detection – the organisation took a decision in 2014 to install detection in all properties, we are coming to the end of the replacement programme and any outstanding properties will be targeted during the 2023 gas servicing programme.

- 11.3 EICR programme 2022/23 – currently behind programme, SLH are working with Doncaster Council procurement in order to compliantly secure electrical contractors to bring us back on programme. However, it is not likely to be back on programme by March 2023 due to contractor capacity and allowing time for compliant procurement.

- 11.4 FRA 10 year programme – has been taken to Building Safety & Compliance Committee (BSC) and Building Safety Group (BSG) to give an understanding of the volume of work required to complete overdue actions. Senior staff from Savills support the risk based approach used to formulate the programme. Board and BSC will be able to monitor the programme and deep dive into the detail of actions, providing challenge where necessary.

- 11.5 DMC – has seen a significant demand on the team, with the property services directorate putting a specialist DMC team in place to help meet demand. SLH are managing DMC in the same manner as the 6 compliance areas, DMC now being considered the seventh area of compliance. Surveyors are taking photos/videos and using data logging equipment so that when Autumn/Winter 2023 approaches we are in a strong position to respond. Communication has been refreshed and teams work closely with the Tenancy Support Team. Unfortunately, surveyors are recording very low temperatures in some properties, as low as 8.5 degrees recorded in one particular case.

The Chair highlighted to give Board assurance, that the BSC had held a DMC committee meeting on 12 January 2023 in response to the tragic events at Rochdale, and had requested a second DMC committee meeting due to take place on 20 February 2023.

The Director of Property Services advised we are offering as much support as we can; there are three families we are helping to support and engaging the help of Public Health.

He further advised what we don't want to do is make the reporting of DMC a shameful activity, we want tenants to come forward so we can support them.

- 11.6 One member asked – when does this become the responsibility of the tenant, where is the line drawn and the tenant takes appropriate action?

The Director of Property Services advised, I think we have to reassure ourselves first that there is no structural issue, or issue with the property, then we can look to give further support and advice.

- 11.7 Another member highlighted the Energy Support Schemes available and automatically given to households to help heat their homes and manage increased utility costs, but it was thought that the cost of living crisis as a whole with increased food bills and rising inflation rates was impacting households who were struggling in general.

- 11.8 **Board noted the Health and Safety Performance report.**

12. Revenue Monitoring Q3 2022/23

- 12.1 The Director of Corporate Services presented the report to inform Board of the projected revenue income and expenditure for 2022/23 and the actual and committed income and expenditure to date as at 31 December 2022.

- 12.2 Members noted at Q3 of 2022/23, an overall deficit is projected for the year of £1.038m, comprising HRA £1.052m and a surplus in Housing Options of £14k.

However, this includes a number of significant and unique variances and is before any adjustments for related, additional Management Fee income that should be approved and received in Q4.

After adjusting for this income, an overall surplus is projected for the year of £255k, comprising a HRA £93k surplus and Housing Options £162k surplus.

The projected deficit is largely due to inflation (£172k net figure) and a pay award (£973k / 7%) that is over and above what was budgeted (2%). The additional management fee is for these exceptional increases.

- 12.3 She explained the situation is incredibly tight so we are monitoring it very carefully, in what are special circumstances. Pay award and inflation implications have impacted the figures.

12.4 Referring to point 4.1 of the report she said DC have targeted £1m of savings from SLH over three years and during the year to date, which we are looking to identify.

12.5 Following a series of questions raised by one member it was agreed that the Director of Corporate Services would run through the figures separately outside of the meeting.

JCr

12.6 **Members noted the Revenue Monitoring report as at 31 December 2022 and projected outturn for the financial year 2022/23.**

13. Capital Monitoring – Q3 2022/23

13.1 The Director of Corporate Services presented the report that informed Board of the projected capital expenditure for 2022/23, the funding available and the actual and committed expenditure to date as at 30th November 2022.

13.2 Members noted the reported projections at Q3 show the planned, in-year spend on the Housing Capital Programme would be £30.69m, an underspend to the revised budget of £0.43m.

13.3 The forecast spend includes a one-off adjustment totalling £1.35m relating to inflationary increases across the elements of the programme delivered by the in-house teams (SLHD repairs service).

The adjusted spend projection for the delivery of the programme, excluding this adjustment would be £29.34m, an underspend to the revised budget of £1.78m.

The Director of Corporate Services explained the main variance was due to slippage on the delivery of external works.

13.4 No questions were received for this report.

13.5 **Board noted the Capital Monitoring Q3 2022/23 report.**

14. Corporate Plan Feedback

14.1 The Chief Executive gave feedback on the planning for the new Corporate Plan that included: context and background, key elements of a good corporate plan, the existing corporate plan, progress since November 2022, round 1 feedback, main themes and new values and behaviours.

He explained the next steps:

- Between March – May 2023 further consultation will place on the on 1st round of feedback and themes.
- 1st draft of the corporate plan by July 2023.
- August and September – Consult on the 1st draft of the Corporate Plan.
- Final and fully designed 2024 -2029 Corporate Plan signed off in Board 2023.
- Final sign off by the council by March 2024.

14.2 Members noted the above timeline, no questions were received.

15. Repairs Excellence Phase 2 Update – One Repairs Service Exception Report

15.1 The Director of Property Services presented the report the purpose of which was to provide a summary of the implementation plan for the One Repairs Service, Phase 2 activities within the excellence programme.

15.2 Members noted:

- In 2013 SLHD split the repairs service into two parts; responsive and scheduled repairs. The objectives set out in the report of 2013 to separate the service are no longer fit for purpose.
- The demand for our responsive repairs service has increased by 20% post lockdown. Industry wide we are seeing a high demand for repairs with most organisations responding and prioritising responsive repairs above scheduled and planned work.
- There is significant dissatisfaction from our customers concerning the time taken to complete responsive repairs.
- As a result SLH is proposing to combine the repairs service once again.

Consultation

Members also noted recent extensive consultation meetings that had taken place with the Mayor, Trade Unions, Senior Managers and Team Leaders, Trade Operatives and Tenant Groups (TRIP, TARAs and GIG). Details of the One Repairs Service was shared followed by a Q&A session, and supportive feedback was received from all the consultation sessions.

15.3 The Director of Property Services explained the pressures felt by trade staff under in the 'call out process', taking 10/15 jobs per night into the emergency out of hours service from 4pm in the evening. A process which has significant costs associated with it.

He went on to explain we are looking to consume all of the daytime activity in the day, moving forward there will be time in diaries to

schedule in 'attend today' and 'emergency' appointments. Priority will be given to vulnerability, where it is clear that vulnerability exists.

- 15.4 One member asked – How do you free up a chunk of the diary?

The Director of Property Services explained that scheduled repairs will be paused for up to a maximum of two months, which opens up 46 trade operatives' diaries.

- 15.5 The Vice Chair asked - who carries out the initial diagnostic, when a tenant calls in to report a repair?

The Director of Property Services advised that calls are received through the Customer Access Team (CAT) who follow a script, so as calls come in the officer assesses and diagnoses the repair and required action. He went on to explain moving forward tenants will be able to diagnose their own repairs online using a diagram of a property, however this was a consideration for the future and not currently being explored.

- 15.6 **Members noted the contents of the Repairs Excellence Phase 2 update report.**

16. Committee Minutes

- 16.1 Building Safety & Compliance Committee – 24 November 2022

Members noted the minutes.

- 16.2 Employment & People Committee – 29 November 2022

Members noted the minutes.

17. Any Other Business

- 17.1 Residential fire barriers

One member queried what are residential fire barriers?

Members noted that post Grenfell there was a requirement to have a fire suppression system on residential caravan sites and to maintain safe separation distance between plots.

18. Date of next meeting

- 18.1 6 April 2023

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Company Number 05564649

Board Meeting

REPORT

Date : 6 April 2023

Item : 04

Subject : Chief Executive and Chair's Update Report

Presented by : Dave Richmond

Prepared by : Dave Richmond, Chief Executive

Purpose : To provide an update to Board Members on recent significant activity.

Recommendation:

1. That Board note the content of this report and indicate if further information is required.
2. That Board consider the issues arising from the Housing Diversity Conference and suggests issues they would like to be addressed.

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. 04
Date: 6 April 2023**

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 since the last board meeting.

3. Purpose

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

4. Recommendations

- 4.1
1. That Board note the content of this report and indicate if further information is required.
 2. That Board consider the issues arising from the Housing Diversity Conference and suggests issues they would like to be addressed.

5. Chairs Update

5.1 I have recently met with both Mark McEgan and Chris Margrave to offer support and reassure myself of progress.

I was particularly pleased to hear that the recent changes to create 'The One Repairs Service' has resulted in a drastic reduction in those works that have to be passed over to the emergency call out workers. It is early days for these changes but Chris is confident that efficiency savings are starting to be realised.

5.2 I have also recently attended a Housing Diversity Network Conference held in Manchester.

Wayne Brown, Chief Fire Officer West Midlands Fire Brigade spoke about becoming an inclusive leader. His organisation has been named the most inclusive in the UK.

Wayne felt that inclusive employment led to inclusive leadership. He spoke about using S158 of the Equality Act in recruiting staff and directors up to the point of recruitment.

He also spoke about the challenges of using the lesser known S159 of the Act which states:

'Section 159 permits (but does not require) an employer to take a protected characteristic into consideration when deciding whom to recruit or promote, where people having the protected characteristic are at a disadvantage or are under-represented – this positive action can be taken only where the candidates are "as qualified as" each other.'

He spoke of the challenges this brought including a front page article in the Daily Mail stating that a black person had been recruited because of their colour over a white candidate. He made the point that it may not be the easy thing to do but it was a question of doing the right thing.

He also stated that when looking for staff and directors, the way in which we use language is key. He said there's a need to keep it simple, ensure accessibility to all and that flexibility is critical, taking account of such issues as prayers and festivals and caring responsibilities.

Some of these themes followed through to the next presentation which concerned recruitment and selection.

Key points included:

- When interviewing, ensure the panel is inclusive.
- Test the candidates' values and attributes. Don't focus entirely on the interview.
- An inclusive culture is essential to enabling new starters to fit in and feel welcome.
- Create the right environment where everyone can be themselves. Remember that some will be introverts.
- Offer work/board taster opportunities for those groups we are trying to attract. Don't be afraid to use Section 159.
- Hire non-execs for their attitudes as well as their skills.

Next up was a presentation by Karl George on building inclusive boards. He spoke about the race scorecard and the work that his organisation are doing on building inclusive Boards across the UK. His site www.theracecode.org allows companies to sign up. Doncaster & Bassetlaw Teaching Hospitals (DBTH) are early adopters of the code. Perhaps this is something we could consider.

He spoke of the 7 drivers for change:

1. Diversity - Representation of diverse talent is an essential element of inclusion; we must include race as it is time to address the inequalities Black people face, although not at the exclusion of other races.
2. Responsibility - The core leadership team must be at the centre of equality, diversity and inclusion, to have the desired impact and ensure that there is accountability for addressing race inequity.
3. Integrity - Organisations need to be clear about their own data in

respect to ethnic and Black representation and create meaningful solutions, demonstrating what actions they will be accountable for, in addition to the bold statements that some are making.

4. Values - Black leaders are not a novelty; increasing the proportion of Black representation is not tokenism as fairness and transparency, underpin a zero-tolerance policy towards racism.
5. Equity - Introducing policy around race inequality is more than just a moral imperative of doing what is right. It is about working towards creation of a level playing field where, in the context of merit, Black people are not only fairly recruited, but are able to thrive.
6. Reality - It's time for change, this is the tipping point and Race needs to be talked about and addressed in the fight for equity, equality and justice.
7. Society - Each organisation has a part to play in society and it starts with engaging with the wider community appropriately.
8. He also spoke about being brave and speaking to the tenants who are the most vociferous about our services. Early, honest, face-face engagement is always the best.

Final presentation of the day was by Amanda Holden, Assistant Director of Consumer Regulation at the Regulator of Social Housing, who spoke about disrepair and the role of the Board. She said the regulator would be looking at how well we know our tenants and their properties.

She also noted that the regulator is seeing a significant increase in disrepair claims and the use of no-win no-fee solicitors.

She raised the question of how do we provide clear evidence that the repairs service responds to the needs of our tenants.

The regulator expects to see that the Board can evidence the following:

- Understanding our landlord responsibilities in relation to repairs, disrepair and safety;
- That we seek evidence and assurance that the company knows its stock and what it needs;
- That we seek evidence and assurance the we know our tenants and what they need'
- That we challenge and test the assurance we are given;
- That we look at the range of performance information on repairs, disrepair claims, stock condition data, tenant feedback and complaints;
- That we look for patterns/themes in the evidence we are presented – what does it tell us;
- That we help to make the big decisions – investment in properties (and trade offs), how to manage access in disrepair claims and
- How we triangulate the evidence – does performance match the levels/types of complaint?
- The regulator will be looking in detail that we are achieving the targets on EPC for 2030 and 2035.

- Do we break complaints down to those we receive from persons who fall into one of the 9 protected characteristics? Whilst this is not required by law it is best practice.

A few questions that arose from that are worth reflecting on are:

- How do we attract younger people on to the Board?
- What are the barriers that stop people from becoming Board Members and how do we overcome them?
- Should we have shadow or trainee Board Members who would then be 'oven ready' to join the Board? If so, could we remunerate them?
- Should we have Board buddies?

6. Corporate and Governance issues

6.1 Equality Diversity and Inclusion (EDI) Peer Review

In line with our EDI strategy action plan a peer review is at the time of writing underway. The peer review is being conducted by the Housing Diversity Network (HDN) and has seen employees and customers attend focus groups (15th February) to gauge their perception of St Legers activity in this regard. EMT and The Chair of The Board are also due to have similar discussion with the HDN week commencing 13.3.23. The findings from this review will be used to further develop the Year 2 EDI Strategy Action Plan. We anticipate and are hopeful that the review will identify a range of learning and improvement opportunities.

6.2 Board Training Plan

The Board training plan is taking shape and is attached as Appendix B.

7. Policy issues

7.1 The following policies have been reviewed by EMT and minor changes agreed in line with EMT delegated powers:

7.2 Absence / Attendee Management Policy

This was discussed at E&P committee. As part of the scheduled review the opportunity has been taken to review the sickness absence triggers allowing earlier intervention in short term sickness absence. Short term absence accounts for the highest levels of absence. From 1st April, absence under 20 days (4 working weeks) will trigger a formal review meeting if there are 7 days absence in a 12 month period or 4 occasions of absence in a 12 months period. The occasion trigger is new. More stringent monitoring periods with lower targets have then been introduced beyond stage 1. A range of other more minor changes have also been made to the policy which was subject to consultation with our unions and line managers after which it was agreed by EMT and discussed at E&P during February.

7.3 Flexible Working Policy

This has been subject to some minor changes. The scheduled review of the Flexible Working Policy afforded the opportunity to bring it up to date in

line with current flexible working legislation. There are likely to be further changes to this legislation shortly and this policy will be further reviewed when the full details of these changes are known. The policy has been signed off by EMT during February and is now live.

8. Operational issues

8.1 Health and Safety

In February one of our tenants fell down the communal stairs in a low rise complex. This resulted in serious injuries which required a stay in hospital. He had previously reported that a light in the corridor was not working. The suggestion is that the fall was as a result of the poor lighting. It is highly likely this will result in legal action.

The issue has raised a number of matters that need addressing. Firstly call recording did not sufficiently identify the potential risk arising from the report and as a result work s were not prioritised.

Such issues need to be recorded as emergency repairs to be completed the same day. We are currently in the process of reviewing all such stairwells, checking on emergency lighting and determining if additional lighting is required.

8.2 Disrepair

In line with other landlords we are seeing an increasing trend of legal disrepair claims being brought by tenants with the assistance of solicitors working on a 'no win no fee' basis.

We have extensive processes in place to address any potential issues of disrepair. It is worth the board being aware that in the last few weeks one court case resulted in costs being awarded against the tenant for an amount in excess of £10,000. It is intended to encourage tenants report repairs to enable us to put things right, highlighting this case of the risks tenants face in taking legal action. Unfortunately these risks are sometimes not clearly explained by some companies to their clients.

8.3 Tenant Recharges

It is felt that incidents of tenant damage and misuses of property is on the rise, additionally property services report numerous occurrences of tenants misusing the repairs service. SLHD has had a long standing recharge policy which is now due for review. Initial conversations will be held with the council to determine the council's appetite for addressing this issue.

Recently Steve Lyons attended a seminar held by the Housing Quality Network (HQN) and produced a useful summary of key points, helpful for drafting the new policy, which is available should anyone wish to see it.

8.4 St Legers involvement in safeguarding

Staff at St Leger are active in a number of safeguarding forums.

Working is ongoing to review safeguarding data for 2022-2023 to produce the annual safeguarding report. So far it is evident that during this period SLHD managed 344 safeguarding concerns including self-neglect, financial abuse, domestic abuse and other children and adults concerns. This resulted in 480 referrals being completed to appropriate services for continued support.

Below is a real life example of a safeguarding case:

Neighbours of St Leger tenants raised concerns that Mrs C had disclosed that she was struggling to care for her husband who 'lashed out' at her when he became angry. Mrs C needed help because she was frightened of Mr C. The neighbour confirmed that Mr C is known to be difficult to care for but lately they had heard through the adjoining wall, Mr & Mrs C arguing and Mrs C shouting "stop it, stop it".

SLHD visited Mr & Mrs C to enquire how they both were. Mr C was not at home. Mrs C informed the estates officer that she was struggling and disclosed that her husband was always losing his temper 'over nothing' and that recently he had started hitting her. Mrs C advised that Mr C was autistic and she was his registered carer and did not know what to do. The estates officer established that Mr C at one point did have a Community Psychiatric Nurse but withdrew their services as Mr C stopped engaging.

Outcome: Mrs C acknowledged that she was experiencing domestic violence and a personal safety plan was discussed. Mrs C was fearful her husband would be back soon so a further meeting was arranged away from the home.

SLHD contacted RDaSH who confirmed that Mr C was known to them and offered to revisit his case. They suggested a joint visit (SLHD/RDaSH) be arranged to assess Mr C's presentation. SLHD met with Mrs C where support was offered and accepted, including the joint visit. At the joint visit, Mr C agreed to undergo an assessment to review his medication and support. Mrs C is now accessing help and support from the Women's Centre (SafeLives) to enhance her wellbeing and coping mechanisms.

9 Procurement

- 9.1 A list of recent and planned procurement activity is included as Appendix A.

10. VFM Considerations

- 10.1 VFM matters are considered as part of the appraisal process for any items

mentioned above.

11. Financial Implications

11.1 Any financial implications will be addressed as issues progress.

12. Legal Implications

12.1 Legal matters are considered as part of the appraisal process for any items mentioned above.

13. Risks

13.1 Any risks arising from issues in this report will be considered as part of normal governance processes.

14. Health, Safety & Compliance Implication

14.1 NA

15. IT Implications

15.1 NA

16. Consultation

16.1 NA

17. Diversity

17.1 A range of diversity issues are raised in the chairman's notes, these will be given further careful consideration.

18. Communication Requirements

18.1 Any communications requirements will be addressed as work on projects progresses.

19. Equality Analysis

19.1 See diversity section.

20. Environmental Impact

20.1 NA

21. Report Author, Position, Contact Details

21.1 Dave Richmond, Chief Executive
dave.richmond@stlegerhomes.co.uk

01302 862700

David Wilkinson, Chairman

22. Background Papers

- 22.1 Appendix A - Procurement Report
- Appendix B – Board Training Plan

Appendix B

<u>Procurement Exercise</u>	<u>Estimated Contract Value Based on a 4 year Term (exc VAT)</u>	<u>Framework or Tender</u>	<u>Service Area</u>	<u>Work, Supply or Service</u>
<u>Primarily capital expenditure, so Contracting Authority to be Doncaster Council</u>				
Windows and Doors	£1,200,000	Tender	Asset Management	Supply/Works
Electrical Works	£1,300,000	Tender	Asset Management	Works
<u>Primarily revenue expenditure, so Contracting Authority to be St. Leger Homes of Doncaster</u>				
Emergency Accommodation	£6,000,000	Tender	Access To Homes	Service
Provision of Temporary Agency Staff	£726,000	Framework	HR & OD	Service
Plant Hire & Maintenance	£590,000	Tender	Repairs & Maintenance	Service
Metal Fencing/Handrails Fabrication & installation	£480,000	Tender	Repairs & Maintenance	Supply/Works
Purchase of tools & equipment	£360,000	Tender	Repairs & Maintenance	Supply
Door Entry Systems	£300,000	Tender	Repairs & Maintenance	Service
Provision for the supply of Furniture and Furnished Goods	£180,000	Tender	Access To Homes	Supply
Communal Aerial Remedial Works	£125,000	Framework	Repairs & Maintenance	Service
Supply, Service and Repair of Garden Equipment	£120,000	Tender	Housing Management	Supply/Service
Field Management	£115,000	Quotation	ICT	Services
Consultancy SLHD Board	£29,000	Quotation	Property Services	Service
File Analysis Software	£28,000	Quotation	ICT	Service
Plumbing and Heating Materials	TBC	Tender	Asset Management	Materials
Business Intelligence System	£30,000	Quotation	ICT	Service
Office Consumables & Equipment	£24,000	Framework	Facilities	Supplies
Building Materials	£950,000.00	Tender	Asset Management	Materials
Japanese Knotweed Management Services	£35,000.00	Quotation	Repairs & Maintenance	Service
Ecology Services	£20,000.00	TBC	Asset Management	Service
Intranet Maintenance and Hosting	TBC	TBC	ICT	Service
Supply of Electrical Materials	TBC	Framework	Stores	Supplies
Mobile App	£4,000.00	Framework	ICT	Service
Legacy Kitchens	£125,000.00	Direct Award	ICT	Service
Gas Spares	£250,000.00	TBC	Asset Management	Supplies
Provision of External Audit Services	£13,000.00	Framework	Asset Management	Service
Supply of Ironmongery Products	£115,000.00	Quotation	Finance	Service
Chartered Surveyors - RTB Valuations	£27,000.00	Framework	Property Services	Service
Supply of Woodchip Fuel	£45,000.00	Quotation	Asset Management	Supplies

Board Training Plan											
Corporate Mandatory Training & Development - 2/3 yr cycle (based on Board Member Rotation)	Delivery Option	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031
Health & Safety (<i>in yr 1</i>)	TBC	✓ (12 Jan 23)		✓		✓		✓		✓	
Regulation (Compliance & fire safety) - as more detail known (<i>every 2 years</i>)	TBC	✓ Linked to H&S and will be included		✓		✓		✓		✓	
Risk Management (and Strategic Risk Register) (<i>in yr 1</i>)	TBC	✓ (30 Nov)		✓		✓		✓		✓	
Cyber Security (<i>in yr 1</i>)	TBC	✓		✓		✓		✓		✓	
Data Protection/GDPR (<i>in year 2</i>)	TBC		✓ (Feb Pre-Board)		✓		✓		✓		✓
Equality & Diversity (<i>in yr 2</i>)	TBC		✓ Dec Pre-board		✓		✓		✓		✓
Role of Board Member (Governance) (<i>in yr 2</i>)	TBC		✓ JCr planning for away day		✓		✓		✓		✓
NHF Code of Governance (Governance)	TBC		✓ part of Nov away day								
Values, Culture and Behaviours (to strengthen NHF Code of Governance)	TBC	✓ (July SP)			✓			✓			✓

Awareness Raising - Every 2-4 years	Delivery Option	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031
Performance / KPI's / Benchmarking (<i>every 3 years</i>)	TBC		✓ Aug Pre-board			✓			✓		
Finance and Procurement (<i>every 3 years</i>)	TBC			✓			✓			✓	
Safeguarding (<i>every 4 years</i>)	TBC		✓ June pre-board				✓				✓
Asset Management / Stock (<i>every 3 years and year after stock tour</i>)	TBC		✓ being planned for Oct/Nov			✓			✓		
Stock Tour (<i>every 3 years</i>) - in Oct to include new BM's	TBC	✓ (13 Oct)			✓			✓			✓

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

Board Meeting

REPORT

Date : 6 April 2023

Item : 05

Subject : SLHD Budgets 2023/24, 2024/25 & 2025/26

Presented by : Julie Crook
Director of Corporate Services

Prepared by : Julie Crook
Director of Corporate Services

Purpose : To seek Board approval for the three year budgets.

Recommendation:

It is recommended that Board approve the three year budgets.

Company Number 05564649
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**To the Chair and Members of the
ST LEGER HOMES OF DONCASTER BOARD**

**Agenda Item No: 05
Date: 6 April 2023**

1. Report Title

1.1 SLHD Budgets 2023/24, 2024/25 and 2025/26.

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 2023/24 are £54.7m.

Inflation has had a massive impact during the 2022/23 financial year as we had underestimated inflation across all of our budgets and it continues to be problematic for future years. Inflation is showing no sign of slowing down and is running at rates higher than the budgeted rent increases. The current management agreement allows for all inflationary increases to be included in the SLHD management fees but may become an issue if it continues to be above the level of the rent increase. The situation is being monitored carefully and regularly.

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 27 February 2023, 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, £36.7m (67% of total income)

This budget has increased by £2.5m, the majority of the increase is due to inflationary increases across both pay and non-pay budgets. The agreed savings figure of £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. A further £1.0m saving has been included over the financial years 2025/26 to 2027/28, this will be reviewed regularly based on affordability to the HRA and the demand for services.

2.5.2 Management Fee from the General Fund, £2.5m (5% 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 £415k, £323k of this is to fund inflationary costs and £92k is budget growth to fund the increased workload of the team.

2.5.3 Income from the Capital programme, £12.8 m (23% 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 increased by 20% to reflect the new schedule of rates that are being charged. This budget also includes the £1.5m (5%) of management fee received from the capital programme to manage the whole of the housing capital programme (£29.4m).

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

The majority of this income comes from temporary accommodation, grant income, private sector landlords and gardening services. Although this figure has stayed the same the make up of it has changed significantly with the District Heating budgets (£383k), being transferred to the HRA and General Fund external grant income budgets increasing by £423k.

3. Budget 2023/34

3.1 Appendix A shows a balanced budget for 2023/24.

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 2022/23 into 2023/24.

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	-76
Premises	-18
Supplies & Services	-14

Service Level Agreements (SLAs)	-85
Other Income	-116
Other minor changes	-24
Total	-333

Employees – A net reduction of 6.8 posts excluding specifically funded new posts, and savings on car allowances. This budget includes the approval of an additional six trade apprentice posts.

Premises – Includes savings arising from the closure of St Leger Court & St Leger House.

Supplies and Services – Includes reduction in IT costs due to TOP phase 2 SLAs – Reduction in ICT SLA due to the rationalisation and reduction of servers and infrastructure a result of TOP and the Civic Office move

Other Income – additional income due to installation of CO Detectors.

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.

4. Key Risks and Potential Budget Implications 2024/25 & Future Years

- 4.1 The budgets for 2024/25 and 2025/26 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 2024/25 this reduction was agreed to repay the upfront investment required for TOP. A further £333k saving target has been included for the 2025/26 as we aim to find a further £1.0m of savings in the three years from 2025/26 to 2027/28. It gets more difficult to identify savings and efficiencies as the demand for services continues to increase.

The overall HRA budgets, both revenue and capital, are tight over the next four years, as noted earlier apx 90% 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 continue to be under extreme pressure. The budget for 2023/24 has been increased for inflationary pressures and has also been increased to reflect the continuing high level of demand for the services. We are then assuming that from 1 September 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 required in 2022/23.

- 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 risk that the rent income to the HRA may decrease.

- 4.4 At this stage we have identified apx half of the savings required to balance the 2024/25 and none of them required for the 2025/26 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 2024/25 savings target with a view to identifying the majority of the savings by September and all of them by December 2023. Heading into the 2022/23 budget, we had identified £1.5m of savings across the business but these were offset by just under £1.2m of pressures. For 2023/24, we again identified apx £600k of savings but also had apx £270k of unavoidable pressures.

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 up and running 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. At the current time these are proving difficult to quantify as the volume of repairs has increased as have the number of complaints related to repairs.

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 2024/25 onwards are currently unknown and these will need to be managed carefully to ensure that any savings/efficiencies are delivered. Identifying savings and efficiencies becomes more difficult as the demands on front line services continues to increase.
- 9.2 Robust systems are in place to monitor both expenditure and income budgets.

- 9.3 Inflation continues to be a massive risk as it is currently above the rate of the rent increase for 2023/24 and the projected rent increases for future years. A full review of the HRA business plan will take place when the latest stock condition survey information is available. A review of the actions required to balance the long term budgets will be undertaken at that time.
- 9.4 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 building safety act, fire safety act 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 2023/24 to 2026/27 – Council Meeting 27 March 2023.
Capital Programme 2023/24 to 2026/27 – Council Meeting 27 February 2023.

St. Leger Homes of Doncaster Ltd Budget 2023/24 to 2025/26

	2022/23	2023/24	Variance from 22/23 to 23/24	2024/25	2025/26
	Budget £000s	Draft Budget £000s	£000s	Draft Budget £000s	Draft Budget £000s
Management Expenditure					
Employees					
Direct Employee Expenses	28,645	31,643	2,998	32,363	33,033
Indirect Employee Expenses	198	166	-32	166	166
Agency Staff	44	42	-2	42	42
Training	246	246	0	246	246
Total Employees	29,133	32,097	2,964	32,817	33,487
Premises					
Utilities	920	1,036	116	1,036	1,036
Rates	78	73	-5	73	73
Furniture	16	10	-6	10	10
Repairs & Maintenance	228	239	11	239	239
Premises - Other	988	880	-108	880	880
Transport					
Fuel	544	654	110	654	654
Transport & Plant	1,853	1,853	0	1,853	1,853
Transport - Other	65	70	5	70	70
Supplies and Services					
Provision for General inflation				400	800
IT Equipment	799	860	61	860	860
Printing & Stationery	95	90	-5	90	90
Postage	59	71	12	71	71
Insurance	364	380	16	380	380
Communication	74	77	3	77	77
Materials - Building Services	6,187	7,667	1,480	7,667	7,667
Supplies and Services - Other	2,824	2,893	69	2,893	2,893
Service Level Agreements	4,017	4,234	217	4,234	4,234
Savings yet to be identified				-334	-667
Total Management Expenditure	48,244	53,184	4,940	53,970	54,707
Maintenance Expenditure					
External Maintenance Contractors	1,291	1,590	299	1,590	1,590
Total Maintenance Expenditure	1,291	1,590	299	1,590	1,590
Gross Expenditure	49,535	54,774	5,239	55,560	56,297
Income					
Management Fee - HRA	-34,206	-36,687	-2,481	-37,473	-38,210
Management Fee - General Fund	-2,088	-2,503	-415	-2,503	-2,503
Recharges to Capital Schemes (In house)	-10,585	-12,837	-2,252	-12,837	-12,837
Other Income	-2,656	-2,747	-91	-2,747	-2,747
Total Income	-49,535	-54,774	-5,239	-55,560	-56,297
Surplus(-) / Deficit	0	0	0	0	0

Detailed Budget Changes

1. Details of the most significant budget changes are detailed below;
2. Direct Employees
The increased funding received for the HRA funded staffing budget was £2,120k and the overall staffing budget increased by £2,140k, the net impact on the bottom line was therefore a £20k increase.

Direct employees budget, increased by £2,140k

This increase is as a result of;

	£000s
Estimated Pay award 22/23 adjusted & 23/24	2,172
N.I. adjustment 22/23 adjusted in 23/24	-188
Increments	50
Increases for specifically funded posts;	
Fire Risk Assessment Specialist Joiners (2.0 posts)	85
Apprentices (6.0 posts from September 2023)	84
Other increases	
Asset Management market supplement payments	48
Property Services Team Leader regradings	65
Apprentice Gas Fitters (0.84 posts)	18
Post reductions	
Property Services Admin Assistants (2.70 posts)	-77
Housing Management Realignment (2.20 posts)	1
Plumber (1.20 posts)	-47
Corporate Services Admin Assistant (1.00 post)	-28
Handyperson post to PT Caretaker (net 0.50 post)	-12
Homechoice Officer (from October 2023)	-16
Other minor adjustments	-15
Total	2,140

The net staffing increase of 1.2 FTEs is made up of a number of changes, including 8.0 FTE new posts specifically funded from additional management fee or capital income, and a reduction in other posts of 6.8 FTE;

	FTEs
FRA Joiners – capital income funded	2.00
Apprentices – funded by additional management fee	6.00
Apprentice Gas Fitters	0.84
Property Services Admin Assistants	-2.70
Housing Management Realignment	-2.24
Plumber	-1.20
Corporate Services Admin Assistant	-1.00
Other minor adjustments	-0.50
Total	1.20

Appendix B

The General Fund staffing budget has increased by £856k as a result of changes to the permanent structure, the extension of temporary posts appointed mid-year in 2022/23, grant funded posts, and other changes as shown below;

	£000s
Estimated Pay award 22/23 adjusted & 23/24	138
N.I. adjustment 22/23 adjusted & 23/24	-13
Increments	8
Approved changes to permanent structure	220
Temporary posts extended to 30/09/23	175
Grant Funded Posts	328
Total	856

Indirect Employees;

This budget reduced by £32k mainly due to car allowance savings of across the company.

3. Premises budget;

The overall budget has increased by £8k in 2023/24. Including a £116k increase in utilities. This is largely due to an inflationary increase of £588k for utilities offset by a reduction of £409k for district heating budgets transferred to the HRA and a saving of £63k on temporary accommodation utilities due to change in the tenancy agreement to exclude utilities. Premises also includes budgets of £111k relating to other District Heating expenses including Biomass, which have also transferred to the HRA.

4. Transport budgets;

This overall budget has increased by £115k, due to the fuel price inflation being 9.5% (£49k) greater than budgeted for in 2022/23 and an estimated fuel price inflation of a further 12.6% (£73k) in 2023/24. Saving on fuel usage of £12k have also been identified in the Caretaker and Garden Service areas. Vehicles repairs 12.6% increase for inflation has resulted in an increase of £5k. Our management fees are adjusted for inflation so these changes do not have an impact on the bottom line.

5. Supplies and Services (excluding materials);

The overall budget has increased by £156k, there are a number of notable increases and decreases within the overall budget headings;

- £61k additional budget for ICT software comprising of £45k inflationary pressure and a net increase of £16k after savings arising from TOP phase 2, and a budget increase of £30k for repairs text messaging.
- Other price inflation of £225k across a number of contracts most notably on Skips, Equipment, Insurance and Homelessness Accommodation costs.
- £35k increase on the housing disrepair budget.
- £33k increase for Investors in People & St Leger Stars.

Appendix B

- £217k increase for Housing Options prevention fund and private sector incentives.
 - A saving of £376k on emergency hotel accommodation and security.
6. **Materials;**
The materials budget is £1,480k higher in 2023/24.
This is largely due to inflationary pressures that have caused a significant increase in material prices across suppliers. This resulted in an under inflation provision of £637k in 2022/23 budgets. In 2023/24 a provision of £627k has been included for inflation increases in line with CPI at 10.1% (as inflationary changes are funded through the management fee this has no impact on our bottom line). An additional £150k was added to the budget for improvement works following Fire Risk Assessments, which will be completed by the in house repairs service. Also an increase of £69k for the CO detector replacement programme.
7. **SLAs;**
The SLAs budget is £217k higher than 2022/23. This includes a 4% increase on all contracts for under inflation in 2022/23 (£157k) and a further 4% for 2023/24 (£163k). The budget also includes a £40k increase for the Legal Services SLA, funded from additional management fee, and a reduction of £85k on the ICT SLA due to the rationalisation and reduction of servers and infrastructure a result of TOP and the Civic Office move. The arboriculture SLA also reduced by £60k.
8. **External Maintenance Contractors;**
This budget has increased by £299k, largely due to inflation of £238k. Also an additional £40k for the maintenance of attenuation tanks on new build properties in flood risk areas, which is funded from additional management fee and £18k for maintenance of the high rise sprinklers.
9. **Capital Income;**
The capital income budget is £2,252k higher in 2023/24. This is largely due to inflation where SORs will increase by 20% resulting in £1,817k of additional capital income. There is also additional income of £250k for the Fire Safety works and £185k for CO detector replacement scheme, both carried out by in house repairs service.
10. **Other Income;**
An increase in other income of £91k has been budgeted for, including a £385k reduction in District Heating income budgets which have transferred to the HRA, and a £423k increase in relation to external grant funding for the Housing Options, including RSI, Accommodation for Ex Offenders and a number of other grants. Housing Options has also seen an £49k increase in the income budget for Housing Benefit arising from temporary accommodation reflecting improved recovery rates.

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

Board Meeting

REPORT

Date : 6 April 2023

Item : 06

Subject : Ensuring an effective Committee structure

Presented by : Dave Richmond

Prepared by : Dave Richmond

Purpose : To ensure that Committees work effectively whilst managing the workload demand on Board Members and officers.

Recommendation :

That Board:

1. Consider the contents of this report and agree to options one and two as described in Section 6.5.
2. Endorse discussions taking place as part of Board Member appraisals, to agree the composition of subcommittees and that any potential changes are reported back to the Board for agreement.
3. Agree that the governance framework is reviewed following the agreement of a new management agreement and is brought back to the Board for approval.

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: 6 April 2023**

1. Report Title

- 1.1 Ensuring an effective Committee structure

2. Executive Summary

- 2.1 This report seeks to ensure that the Committee structure works effectively in helping the Board to discharge its duties whilst reducing the work of the Committees which may add less value. The report brings to the Board for approval proposals previously agreed at the strategic away day in November 2022.

It suggest that we retain the Building Safety Committee (BSC) for at least a further year, and that the Employment and People Committee (E&P) be held on an as required basis. It also suggests that consideration is given to reducing the frequency of 'for information update' reports that Committees see and that membership of each Committee is given further consideration during the appraisal process.

3. Purpose

- 3.1 To ensure that Committees work effectively whilst managing the workload demand on Board Members and officers.

4. Recommendation

- 4.1 That Board:
1. Consider the contents of this report and agree to options one and two as described in Section 6.5.
 2. Endorse discussions taking place as part of Board Member appraisals, to agree the composition of sub-Committees and that any potential changes are reported back to the Board for agreement.
 3. Agree that the governance framework is reviewed following the agreement of a new management agreement and is brought back to the Board for approval.

5. Background

- 5.1 An effective Board and Committee structure is an essential prerequisite to a well governed social housing organisation. This will be one of the critical elements that the Regulator of Social Housing will consider in any forthcoming inspection. St Leger Homes (SLHD) has adopted the National Housing Federation Code of Governance 2020 as one of the key tools to ensure that it operates effectively and ensures appropriate governance.

The code is built around the key values that good governance is based on – accountability, integrity, openness, equality, diversity and inclusion. Central to the code are four core principles for organisations to adopt:

- Mission and values
- Strategy and delivery
- Board effectiveness
- Control and assurance

- 5.2 Within the code there are clear expectations that the Board has appropriate oversight of these critical elements. The code allows for Boards to establish Committees where the Board determines that they will enable it to exercise more effective scrutiny, control or oversight of particular areas of the organisation's activity, but the code offers no advice on the composition of Committees or matters to do with frequency or role, other than referring for the need for clarity of purpose to be established by means of terms of reference and that such committees comprise of people with appropriate skills to perform the functions ascribed. SLHD determines that it meets these requirements.

- 5.3 Having previously been organised with three Committees, in early 2021 the Board agreed to establish an additional committee to address increasing expectations in relation to building safety and compliance. This Committee was initially established on a time limited basis to oversee significant development and improvement.

On 3rd February 2022, The Board agreed that the current status quo of sub-Committee meetings would be retained for 2022 with the intention to collapse the work of the BSC into the work of the other sub-Committees at the start of 2023.

The Board further considered this issue at its strategic away day in November 2022, at which point it was proposed to retain the BSC for at least the next year due to the volume of work that was still taking place.

- 5.4 However, taking into account the respective workloads of the sub Committees and the subsequent expectations placed on Board Members, the Board proposed that E&P could in the future be held in abeyance, to be convened only as and when substantive items required attention.

In part, this was a recognition that the creation of a fourth Committee placed additional pressures on Board Members and that it had become necessary for more board members to attend two Committees. Taken along with other

non-Committee responsibilities such as training, away days and appraisals, this placed a considerable pressure on Board Members. Consequently there have been occasions where some Committees would have been inquorate had an additional Board Member not agreed to attend.

- 5.5 In considering changes to governance arrangements it is worth reflecting on the role and purpose of The Board and the Committees and consider if it is possible for the Company to discharge its duties appropriately whilst ensuring effective organisational oversight in a sound and more efficient way; in so doing reducing pressure on both board members and officers.

ALMO Boards (and their sub-Committees) operate in a different environment to those of housing associations (HA); in the case of ALMOs many of the regulatory responsibilities ultimately reside with the parent Council and a series of democratic and scrutiny processes are also undertaken by the Council. For this reason ALMO Boards and Committees make very few formal decisions, other than to consider, scrutinise and recommend actions to the Council, in contrast to HA Boards and Committees.

The scheme of delegation agreed as part of the Governance Framework identifies the responsibilities of The Board and the sub-Committees (attached appendix 1). Whilst the scheme is clearly not representative of the entire work that takes place in Committees, according to the scheme, Committees with the exception of E&P have no decision making responsibilities. E&Ps' responsibility is to set the Chief Executive and management team remuneration.

The Board on the other hand has a considerable range of responsibilities as evidenced in attachment 1, which include decisions in respect of the organisation and a number of areas where The Board is responsible for recommending actions to the Council.

Considerable work has been undertaken by the executive management team and The Board to assess SLHDs' compliance against the National Housing Federation Code of Governance. The scheme of delegation sits within a wider governance framework which also includes terms of reference for the Committees. The full governance framework is likely to require further consideration and potentially amendment subject to the Council agreeing a new and potentially amended Management Agreement for SLHD. This will provide the opportunity to amend Committee terms of reference and the scheme of delegation to reflect the actual work of the Committees as then exists. Nevertheless the scheme of delegation does help to highlight the difference in responsibility between SLHD Committees and those of housing associations.

- 5.6 As part of these deliberations, it is right that as an organisation we ask ourselves what are the Committees doing and the ways in which they are adding value to the governance arrangements of the organisation. It is apparent that Committee agendas are often lengthy which creates considerable work for the Committee members themselves and also for

report authors and for the executive team.

A number of these reports are quarterly or six monthly updates and monitoring reports. Such work is also monitored as part of ongoing operational arrangements and in some instances also by the Council in updates to their Committees and Cabinet. Hence it is right to consider whether the additional Committee involvement justifies the additional work it requires or whether effective governance can be achieved with differing reporting cycles.

6. Proposal

- 6.1 The Board has discussed some of these issues on previous occasions, most latterly at the November 2022 away day. At that point the main consideration was the need to review the requirement for the BSC as this was established on a time limited basis. The creation of a fourth committee placed considerable additional demand on board members and also increased the risk that Committees would become inquorate at some point due to reducing membership and spreading out Board Member's attendance over the four Committees.

The away day determined that the work of the BSC had been beneficial and consequently it was decided to retain the committee. However to better manage the pressures it was decided that E&P would be held in abeyance and organised only as and when there were substantive items that required the attention of the Committee. This arrangement is described below in option one.

- 6.2 Building on this arrangement, the Board may wish to go further and request that all Committees review their forward plan of reports and seek to reduce those reports which either duplicate work undertaken elsewhere or where the Committee consider that the added oversight provided by the report does not in fact justify the resource implications of producing and reviewing the report. This option could ease pressure on Board Members and also report authors who spend considerable time writing reports - often on a for information basis. This is described as option two.
- 6.3 A third option and one that is not recommended is that the Board consider reducing the frequency of committee meetings beyond those proposed for the E&P.
- 6.4 As a managing agent much of the actual responsibility for what SLHD undertakes ultimately lies with Doncaster Council and SLHD does report to a wide range of mechanisms within the council. Scrutiny by SLHD Committees is an added layer compared to Doncaster Council oversight mechanisms for Council departments, however conversely it could be argued that such internal SLHD scrutiny is an implicit expectation of Doncaster Council and that it goes hand in glove with potentially reduced oversight by the Council.
- 6.5 The current Board composition comprises a third of Board Members drawn

from Members of the Council. We are fortunate that two Members are drawn from the Cabinet and the third is a Member of the party currently in opposition. As such, Councillors sitting on the board play an important role in ensuring that the work of the ALMO follows the expectations of the Council as determined via the Management Agreement and enables frequent appraisal by Council members of the performance and progress of SLHD. The arrangements also enables councillor Board Members to trigger processes within the Council that could increase scrutiny should it be required.

Options:

1. Retain all Committees as is, with the exception of Employment and People Committee which would be held only as and when required.
Recommended

Arguments for:

- Already considered and agreed at strategic away day.
- Most matters relating to employment activity are delegated to officers. Major restructures in accordance with the Management Agreement are to be determined by the Council.
- Reduces repetitive reports going to Employment and People Committee
- Allows for minor reduction in workload of Board Members with less members attending two regular committees
- Reduces the workload for those members that are attending two committees

Arguments against

- Reduces oversight of employment issues at a time when there are a range of organisational changes taking place – however significant changes can be discussed at board where all members can be appraised of activity.

2. Accept option one and request that Committees review their forward plans, removing reports which are not adding significant value.
Recommended

Arguments for:

- Reduces operational demands on hard pressed report authors and ensures Committee agendas are more manageable.
- Reduces workload for Committee Members
- Many of the issues contained in such reports are addressed elsewhere either with the Executive Management Team or through council reporting mechanisms.
- Follows an approach successfully undertaken at The Audit and Risk committee

Arguments against:

- Reduces board members up to date awareness of activity within the organisation.
3. Seek to reduce the frequency of Committee Meetings to no more than 2 or 3 times per year. Not Recommended

Arguments for:

- Reduces demand on Board Members and report authors due to less meetings or,
- Increase the potential to have Board Members attend differing Committees thereby avoiding the likelihood of Committees being inquorate.

Arguments against:

- Potentially means governance oversight becomes less frequent, more disjointed and potentially less effective at a time when such arrangements are likely to be in the spotlight through the inspection regime.
- The Council may feel St Legers' governance arrangements are becoming too 'light touch'
- Reduces flexibility and the opportunity to ensure the Committee is sighted on recently occurring issues.

7. Procurement

7.1 No Implications

8. VFM Considerations

8.1 No Implications

9. Financial Implications

9.1 No Implications

10. Legal Implications

10.1 The proposals will enable the company to meet its regulatory duties.

11. Risks

11.1 No significant risks

12. Health, Safety & Compliance Implication

12.1 No Implications

13. IT Implications

13.1 No Implications

14. Consultation

14.1 None required

15. Diversity

15.1 No Implications

16. Communication Requirements

16.1 No Implications

17. Equality Analysis (new/revised Policies)

17.1 Not required. These recommendations have no direct equality issues

18. Environmental Impact

18.1 No Implications

19. Report Author, Position, Contact Details

19.1 Dave Richmond
Chief Executive Officer
Dave.richmonf@stlegerhomes.co.uk

20. Background Papers

20.1 Appendix one: Scheme of Delegation
Appendix two: Committee structure and membership



St. Leger Homes of Doncaster

Scheme of Delegation

1. Introduction

- 1.1 The following Scheme of Delegation sets out the principal functions of St. Leger Homes of Doncaster Limited (**the Company**) and details the powers and duties of the Board, the Chair and Vice-Chair(s) of the Board and the role and responsibilities of the Chief Executive and the Directors. The scheme has been compiled in accordance with the Management Agreement between Doncaster Council (**DC**) and the Company and the Memorandum and Articles of Association of the Company.
- 1.2 The Scheme of Delegation is supported by the terms of reference for the Board and each Committee established by the Board.
- 1.3 The aim of the Scheme of Delegation is to provide a framework, which facilitates transparent decision making with maximum business efficiency, audit trails and effective risk assessment and management. The Board and Officers must ensure that the Company's Financial Regulations and Contract Standing Orders are observed in all decision making.
- 1.4 Board Members and officers are reminded that they must refrain from exercising a function where they have a personal or financial interest, and that the Board's Code of Conduct must be observed when conducting business on behalf of the Company.

Decision Making Framework – Summary of Decision Making Delegations

Note: Any delegation of decision making in accordance with this framework shall at all times remain subject to the specific restrictions on delegation as set out in Article 18 of the Company's Articles of Association. In particular it should be noted that this prohibits the delegation of any decisions on all matters which will or might create significant financial or other risk to the Company or which affect material issues of principle. Accordingly, and notwithstanding specific delegations of authority, any business conducted in

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committees remains at all times subject to this prohibition and reference should always be made to the Board where there is any doubt as to the application of this prohibition.

Key

R – Review

DEL – Delegate

DEC – Decision

REP - Report

		Board	Chief Exec & Directors	Audit & Risk Committee	Performance & Improvement Committee	Employment & People Committee	DC
1	Approve strategic direction	DEC	R				
2	Business Plan	DEC					
3	Annual Development Plan	REP	R		R		DEC
4	Agree annual management fee	R					DEC
5	Annual budget approval	DEC	R				
6	Annual Company accounts and External Audit Management Letter	DEC	R	R			
7	Internal Audits & Internal Audit Reports	DEL		REP			
8	Pay and Grading Review	REP				REP	DEC
9	Use of Surplus	REP					DEC
10	Approve expenditure (>£250k) not provided for in Company approved budgets and any necessary virements	DEC					
11	Standing Orders and Financial Regulations	DEC	R	R			

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		Board	Chief Exec & Directors	Audit & Risk Committee	Performance & Improvement Committee	Employment & People Committee	DC
12	Memorandum and Articles	R					DEC
13	Management Agreement	DEC					DEC
14	Codes of Conduct	DEC	R	R		R	
15	Approve appointment of Chair						DEC
16	Use of delegated powers	DEC		REP	REP	REP	
17	Board member allowances						DEC
18	Approve, Monitor and Review key strategies	DEC					
19	Approve significant policy changes	DEC		REP	REP	REP	
20	Service Level Agreements <ul style="list-style-type: none"> ▪ Review ▪ Proposed changes 		DEC				DEC
21	Honorarium Payments		DEC				
22	Staffing levels below Directors		DEC				
23	Significant restructures or changes to terms and conditions, affecting greater than 10% of staffing structure	REP	R			R	DEC
24	Chief Exec recruitment	DEC				REP	

		Board	Chief Exec & Directors	Audit & Risk Committee	Performance & Improvement Committee	Employment & People Committee	DC
25	Directors recruitment	DEC				REP	
26	Chief Exec and Executive Management Team (EMT) remuneration	DEL				DEC	
27	Appeals against suspension/dismissal/disciplinary action against EMT	DEC				REP	
28	Redundancy of the EMT or the creation of a new post in EMT	REP				REP	DEC
29	Instigate/defend legal proceedings	R	DEC				
30	Risk (Strategic, Operational, Fraud) and Governance	DEC		REP			

- 1.5 Specific duties and responsibilities of the Chair are:
- disciplinary action or dismissal of the Chief Executive;
 - appointment Committee members;
 - recruitment of Independent and Tenant Board Members with the Council's prior written approval (article 21(2)).

2. Duties and Responsibilities of the Board

- 2.1 The Terms of Reference for the Board are set out in Appendix 1.

As part of the Company's governance structure the Board has approved the establishment of three committees, which sit beneath the main Board.

- Audit and Risk Committee.
- Performance and Improvement Committee.
- Employment and People Committee.

3. Duties and Responsibilities of the Audit and Risk Committee

- 3.1 The Terms of Reference for the Audit and Risk Committee are set out in Appendix 2.

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4. Duties and Responsibilities of the Performance and Improvement Committee

- 4.1 The Terms of Reference for the Performance and Improvement Committee are set out in Appendix 3.

5. Duties and Responsibilities of the Employment and People Committee

- 5.1 The Terms of Reference for the Employment and People Committee are set out in Appendix 4.

6. Duties and Responsibilities of the Executive Management Team (EMT)

- 6.1 The EMT comprises the Chief Executive and the Executive Directors. The Leadership Team is the EMT plus the Heads of Service. The EMT have delegated authority to allow for day-to-day management of the Company within existing policies and approved budgets, and to allow officers to identify the most efficient and effective means to achieve the policies and strategic objects set by the Board.

7. Duties and Responsibilities of the Chief Executive

- 7.1 Whilst the Chair of the Board has the overarching responsibility for ensuring the Company achieves its strategic objectives, the Chief Executive leads the EMT and collectively they are responsible for effectively and efficiently managing the activities of the Company consistent with the vision, values and policies of the Company. Therefore, a strong and appropriate relationship between the Chair and Chief Executive is essential to the performance of the Board and the Company. However, the relationship must accommodate constructive debate and challenge. Within the Company Scheme of Delegation the responsibilities delegated to the Chief Executive are to:

General matters

- Ensure the discharge of all functions delegated by DC as set out in Schedule 2 to the Management Agreement.
- Oversee the delivery of the Business Plan and the Annual Development Plan.
- Ensure that the Board is given the information necessary to perform its duties and, in particular, that the Board receives advice on matters concerning compliance with its Memorandum and Articles of Association, the law and the need to remain solvent.

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- Advise and assist in the formulation of policy and strategies, including Financial Regulations and other rules of the Company, for the delivery of the Company's aims and objectives.
- Consult with the Chair of the Board and/or Vice-Chair to undertake urgent decision making in between meetings.
- Hold the legal responsibility for Health and Safety of the Company.
- Ensure the Company's assets are protected including adequate insurance cover.
- Manage the Strategic Risk Register and associated mitigating actions.
- Coordinate all official publicity, press statements and publications of the Company.
- Develop constructive relationships with the Mayor, Elected Members and Officers of DC and to hold regular meetings to ensure the Company fulfils all aspects of the Management Agreement.
- Agree in conjunction with DC the Company's key performance indicators (KPIs) and performance targets.
- Promote the interests of the Company and its relationship with all external agencies and stakeholders.
- Represent the Company when appropriate.
- Ensure that proper systems of monitoring and control are maintained.
- Ensure the staffing structure of the Company is sufficient to provide the services and approve any directorate restructures and staffing appointments, other than Executive Directors.
- Ensure staff are kept up to date with housing legislation and any other regulations of statute which are likely to impact on the work of the Company.
- Prepare plans and reports for consideration by the Board.
- Appoint any necessary external financial advisors.
- Exercise financial controls over the business in adherence to approved regulations and as may be required by law, the Board or regulation.
- Sign contracts on behalf of the Company in accordance with the Financial Regulations and Contract Standing Orders, which are within the approved budget.

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- Agree adjustments to working conditions and terms of employment.

Personnel Matters

- Lead and manage the staff of the Company and ensuring that their performance is appraised.
- Agree any staff redundancies which affect less than 10% of the total staff numbers and any restructure which requires notification to the Redundancy Payment Service (RPS) will also be notified to the Board.
- Agree redundancies and compromise agreements where appropriate.
- Authorise candidates' expenses, appointees' relocation expenses, accommodation and travelling expenses.
- Hear appeals against employee dismissal (disciplinary, capability, managing attendance).
- Extend (as appropriate) sick pay entitlements.
- Handle all staff welfare matters.
- Operate a performance appraisal scheme.
- Authorise casual and temporary appointments and determine their rates of pay and allowances.
- Deal with informal and formal communication, consultations and negotiations with employees' representatives.
- Agree to leave of absence in excess of normal entitlement.
- Organise staff training arrangements and attendance at staff courses including approval of requests for professional qualifications.
- Waive repayment of financial assistance towards the cost of professional qualifications.
- Fill vacancies graded posts up to but not including Director level.
- In the absence of the Chief Executive, all of these can be delegated to a member of the EMT.

This list is not exhaustive and (save where such decision making is reserved to the Board and/or DC) the Chief Executive may make decisions in order to ensure the

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smooth day to day operation of the Company to the extent within the scope of the role of the Chief Executive.

7.2 Financial Matters

For details of delegated financial authority please refer to the Company's Financial Regulations and Contract Standing Orders.

7.3 Urgent Decisions

Where it is not possible to convene a meeting of the Board, the Chair plus any two voting board members are entitled together to take urgent decisions outside of their delegated authority, with advice from the Chief Executive or another member of the EMT; these will be reported to the next Board meeting.

8. **Duties and Responsibilities of the Directors**

8.1 The Chief Executive may further delegate some of his/her responsibilities to Directors as required. Together the Chief Executive and the other Directors form the EMT which will meet regularly to consider all aspects of the Company's performance and proposed actions.

8.2 Generic Executive Director duties shall include to:

- Deputise for the Chief Executive in their respective service area as required.
- Support the Chief Executive in the day to day leadership and management of the Company.
- Act (as appointed) as Acting Chief Executive in the absence of the Chief Executive.
- Manage a defined area of the Company's activities.
- Promote policies and practices which provide customers with an excellent level of services.
- Facilitate appropriate staffing structures including restructures of staffing levels which remain within current budget levels.
- Promote good working relationships with all partners and agencies.
- Meet with DC's representative to ensure that responsibilities under the Management Agreement are fulfilled.
- Ensure that all policies and procedures appertaining to the work of their directorate are reviewed.

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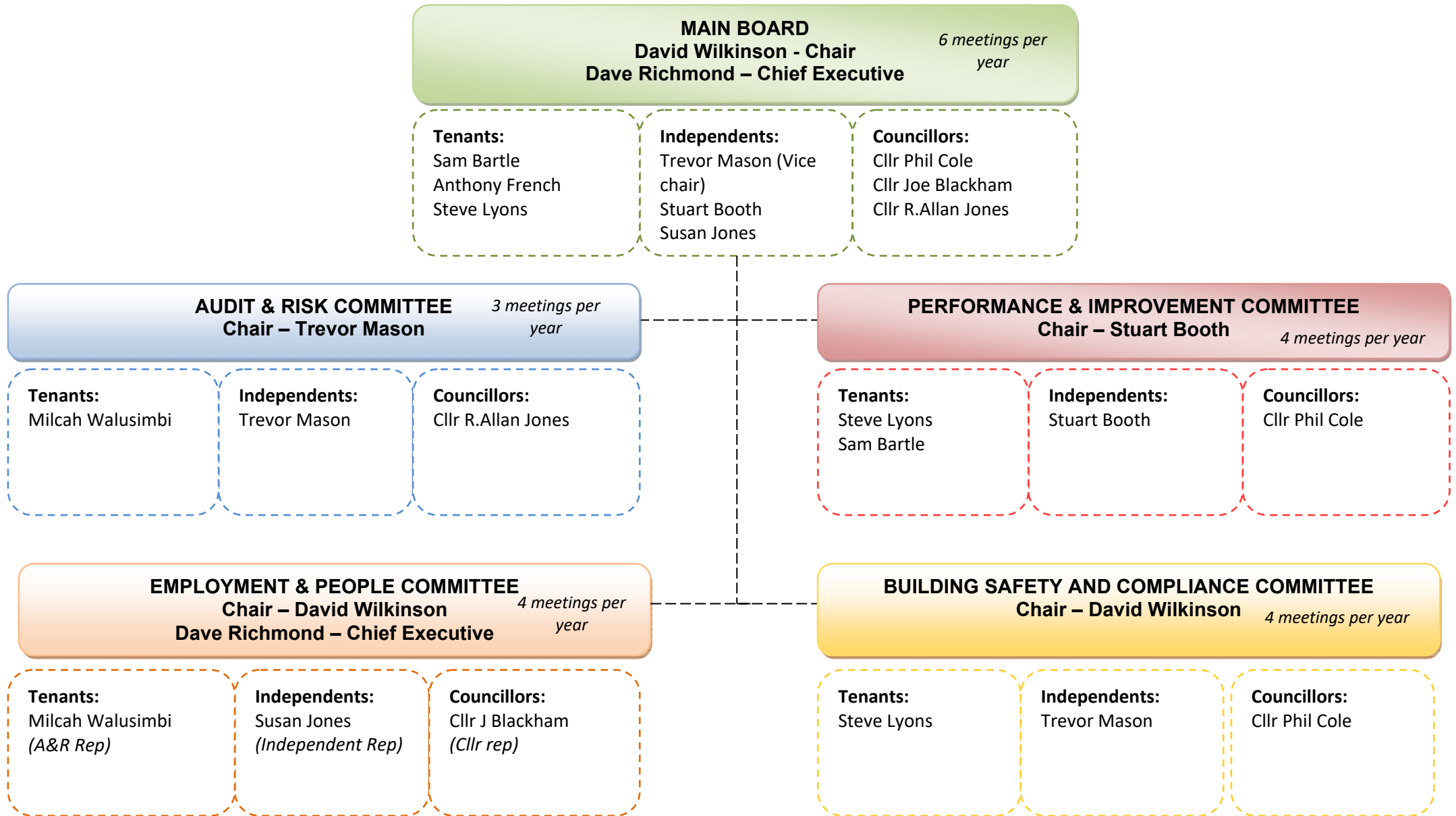
- Dispose of assets, other than land and housing stock.
- Provide support, leadership and management to Heads of Service.

8.3 Personnel Matters

- Chair disciplinary hearings which may result in the dismissal of a staff member.
- Chair appeals arising from disciplinary hearings where the judgement has been to employ a sanction less than that of dismissal.
- Chair capability hearings which may result in the dismissal of staff in accordance with the policy.
- Chair attendance hearings which may result in the dismissal of a staff member.
- Hear appeals against sanctions imposed as a result of applying the managing attendance (sickness absence) procedure.
- Chair appeals against capability warnings in accordance with the policy.
- Hear appeals instigated as a result of a formal written grievance.
- Provide support and professional advice to the Board Members and others on the relevant Committees.
- Provide support to the Heads of Service.

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St Leger Homes of Doncaster Ltd



ST LEGER HOMES OF DONCASTER

Board Briefing Note

Title:-	Equality Diversity and Inclusion (EDI) Strategy 2022 - 26 End of Year 1 Update - And Year 2 Action Plan
Action Required :	<ul style="list-style-type: none"> • Note progress to date • Board to agree to provide their own diversity monitoring information in line with success measures in 2.3 • Provide feedback / comment on the action plan for year 2 of the strategy
Item	07
Prepared by:	Sarah Moore, Head of HR and OD
Date:	March 2023

1. Background

- 1.1 This briefing note provides an update after the first year of the 4 year EDI Strategy (2022 – 26).
- 1.2 The strategy launched in April 2022 and in July the EDI function was realigned to be led from within the HR and OD team. This move has generated some positive outcomes including closer working relationships to strengthen our EDI focus internally as well as continuing our efforts externally. As with any change this has also provided an opportunity to step back and re-clarify priorities and focus which can be seen throughout the action plan updates.
- 1.3 The strategy sets out our 5 overarching objectives and a number of key measures in addition to a range of expected outcomes of the implemented of the actions.
- 1.4 Of the 8 measures of success 4 of these are on track and must be maintained, 3 are below target and 1 is yet to be measured
- 1.5 Of the 21 actions within the action plan for year 1 of the strategy
 - 5 of the original actions have been completed
 - 7 are underway and will continue into year 2 of the strategy
 - 8 have been delayed and will now have their timeline reviewed to a later date within the strategy for delivery.

2. Key Measures of Success

- 2.1 The table below sets out the key measures of success and progress to date with further commentary where appropriate. These measures will continue to be tracked through the life of the strategy.

The findings in the key success measures table are in many cases determined by comparing the data from the Q4 (2021/22) dashboard (Appendix 3) as a baseline with the most recent dashboard data, in this case Q3 (2022/23).

2.2

Key Success Measure	Year 1 - YTD	Comments
Customers		
Decrease in % of complaints related to EDI;		No mechanism yet to measure this, will look to develop
An increase in the number of diverse people making use of social housing		% increase in groups identifying from an ethnically diverse background and with mental health needs since Q3 2022/23. Decrease in those identifying as LGBTQ+ or with a disability
An increase in diversity data declaration rates		% decrease from 88.5% to 86.42%
Employees		
An increase in diversity data declaration rates		% decrease in those choosing to answer the disability question, no % change in other areas
% increase in the number of diverse employees in senior positions;		Senior positions taken as SMT (Grade 8) and above. Positive increase in disability, and ethnicity as well as a now 50/50 male/female ratio. (Appendix 4)
An organisation and Board that is more representative of the community we live in		Whilst anecdotally it is reported that there is a positive increase in the diversity of our board this data is not formally collected. As such a recommendation is that board are asked to complete their own diversity information – If agreed a link to a form for this data will be shared via email
Increase in the number of diverse employees across, ethnic minority, people with disabilities, and LGBTQ+ groups.		Increase in all % ethnically diverse applicants and employees. Decrease in LGBTQ+ and those with a disability
A culture where all individuals are happy and comfortable expressing their individuality and can bring their 'whole self' to work;	79%	Measured annually through the pulse survey measured first in February 2022. This will be asked again in the March 2023 survey

2.3 Of the 3 measures that are reporting below target:

2.3.1 **An Increase in diversity data declaration rates (Customer and Employees).**

Both groups report a dip in data declaration, particularly concerning as the employee headcount has grown overall in the last 6 months. As part of the action plan, activity is underway with the aim of continuing to grow confidence in the reason that we are asking for this data, educate as to the benefits and

create relationships externally with group leaders to support our messaging.

2.3.2 **A culture where all individuals are happy and comfortable expressing their individuality and can bring their ‘whole self’ to work;**

For the first time in February 2022 we asked a question in the pulse survey to determine colleague feeling on this as well as 2 other EDI questions. 50% of the workforce (401 people) responded to this survey and the findings were:

- **79%** of people are happy and comfortable talking about their background and cultural experiences with their colleagues but that still leaves us with **21% (83 people)** that partly or completely disagree (majority from Property services)
- **76%** feel like St Leger enables them to express their individuality and bring their whole self to work with **24% (96 of the respondents)** not feeling this way (Property services and Housing/Customer services)
- **17.5%** have experienced discrimination at work (all directorates) – action was taken on this and discussed at the time of the survey results with Employment and People Committee and as such will not be repeated in this paper.

79% is a positive start but tells us we have some way to go in ensuring that ALL individuals feel in this positive way and as such improvement is sought in the coming months and years. Activity outlined in the action plan such as development of the involvement groups and networks, continued communication and campaigns will all work towards this. Work has been ongoing to raise the profile and celebrate diversity within our workforce. This will be tested in the March 2023 Pulse Survey.

The strategy does not set a target % for this measure however to link with employee satisfaction measures as set out in the People Strategy it is recommended that the target figure of 80% is introduced.

3. EDI Action Plan Year 1 2022 – 2023

3.1 A detailed action plan sets out the 21 actions and associated activities to be delivered in year 1 of the strategy along with updates of progress to date (appendix 1).

- 6 of the original actions have been completed
- 7 are underway and will continue into year 2 of the strategy
- 8 have been delayed and will now have their timeline reviewed to a later date within the strategy for delivery.

4. Looking Forward - Year 2 (2023 – 24) and beyond

4.1 Appendix B sets out the Actions to be achieved in year 2 of the EDI Strategy. This contains 18 plans each with associated activities. In this action plan it is recognized that a number of actions have the aim of achieving the same outcome therefore they have been grouped together for the purpose of the plan. 15 of these are continued or deferred from year 1. 3 are new actions.

- 4.2 The format of the action plan has been amended for year 2 to include a clear owner for each action as well as the outcome that is to be delivered.
- 4.3 Beyond year 2 we will focus on:
- Applying for and achieving diversity accreditation to demonstrate our commitment to equality and diversity for our tenants and employees. It is right that this is deferred until sufficient action has taken place to ensure that we are satisfied that we have implemented great actions and seen success.
- 4.4 EMT and Board are asked to note progress to date and provide feedback or additional activity which is considered missing for consideration and inclusion.

5. Report Author, Position, Contact Details
Sarah Moore
Head of HR and Organisational Development
Sarah.moore@stlegerhomes.co.uk

APPENDIX 1**Equality and Diversity and Inclusion Strategy****Year 1 action Plan 2022- 23****KEY :**

Green – On track to be complete before the end of March 2023 (even where the initial timeline has slipped)

Amber – May not complete before March 2023 and may slip to next year’s action plan

Blue – on hold / under review

Action and Outcome	Headline Activities	Anticipated Completion Date	Comments Update
Commitment 1. Understand tenants and support their needs			
Review the local lettings policy. - <i>A policy which ensures that no one feels inhibited from applying for a council home and which takes into account our customers' diverse needs.</i>	<ul style="list-style-type: none"> • EDI review of the Due regard Statement / Equality Impact Assessment 	Revised to August 2023	Delayed but underway – Access and Allocations Service Manager leading, further updated to be submitted to EMT by end of March to include updated Due Regard Statement. Ultimately won't be signed off by cabinet until August. Carry over to year 2 action plan
Improve the knowledge we have about our diverse tenants by making it easier for people to record and update their relevant personal information. - <i>Increase in diversity data declaration rates</i>	<ul style="list-style-type: none"> • Update the tenant portal to capture diversity information; • Consider the use of One Housing to update tenants details by visiting staff; 	Delayed from August 2022	On Hold - One housing remains unimplemented. This is the key dependency for visiting colleagues to be able to update tenant diversity and update in real time. Work is underway on the tenant portal to review how customers can report their data to us and the variety of data that we will capture. This links to the Data Smart project and will continue into year 2 of the strategy. Carry over to year 2 action plan
Review our customer	<ul style="list-style-type: none"> • Carry out data analysis from various data 	Originally	Delayed but underway – This work has

<p>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. - <i>Better understanding of who is not accessing our services due to diversity issues to make access easier</i></p>	<p>sets holding core information about persons and property;</p> <ul style="list-style-type: none"> Analyse and produce report identifying learning opportunities for improvements in service delivery 	<p>December 2022</p> <p>Revised September 2023</p>	<p>been discussed between the EDI Manager and Governance Service Manager (as the lead of performance reporting). The action to develop an outline of what we want to report and what analysis is required is the next activity to be completed by the EDI Manager working alongside the Customer team.</p> <p>Carry over to year 2 action plan</p>
<p>Carry out a number of promotional and engagement campaigns to increase the level of employee and customer data we hold. - <i>Increase in diversity data declaration rates</i></p>	<ul style="list-style-type: none"> 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. 	<p>1/4ly intervals throughout 2022</p>	<p>On track and ongoing– We now have a regular communications channel with a dedicated monthly space in Staff Focus (internal colleague newsletter)</p> <p>Activity is underway to investigate the possibility of making the EDI section of the HR portal and Open Housing mandatory with a minimum requirement to actively select ‘prefer not to say’</p> <p>Plan to attend team meeting of the sign ups team to increase knowledge of the importance of gathering customer diversity data at the point of sign up.</p> <p>Carried over to year 2</p>
<p>Investigate use of Voicescape to increase the level of diversity data we hold on our tenants and to keep this up to date - <i>Increase in diversity data declaration rates</i></p>	<ul style="list-style-type: none"> Discussions with Voicescape; Consultation with customers and colleagues; Consider integration into Housing system Publicise to customers; Go Live with a targeted calls 	<p>Originally July 2022</p> <p>Revised to September 2023</p>	<p>Delayed but underway - Early investigation complete. It is possible to use the platform however more consideration needs to be given to its use, and the additional resource need its use may generate on teams such as CAT. Next step is to develop a small pilot to test success.</p>

			Carried over to year 2
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. - <i>Culture where staff can be themselves and where this is respected by colleagues</i>	<ul style="list-style-type: none"> • 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. 	Originally June 2022 Revised to November 2022	Complete – Internal activity has taken place, email signatures have launched, internal communication through intranet and Staff Focus. Whilst we cannot report on the % positive take up of the pronoun campaign (e.g. how many colleagues have adopted this on their signatures) anecdotally we can see a change in the take up. A specific question in relation to this will be asked in the next pulse survey
Carry out a full diversity audit and self-assessment to gauge and challenge our current diversity status. - <i>A series of improvement actions identified as part of the self-assessment process</i>	<ul style="list-style-type: none"> • Consultation with colleagues; • Self- Assessment using the Housing Diversity Networks On-Line Assessment Tool; • Report Outcomes to EMT; • Develop action plan to address any gaps. 	August 2022 Revised March 2023	On track – Self assessment complete. Peer assessment via HDN underway with customer and employee focus groups having already taken place, EMT and board discussion planned in March. The outcome is due before the end of March and the recommendations will be built into the Year 2 action plan Carried over to year 2
<i>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</i>	<ul style="list-style-type: none"> • Identify a series of actions to celebrate diverse employees – Staff Focus, Videos, series of staff sharing stories; • Promote diversity at Staff Conference 	On-going	On track – Black History Month was celebrated in late 2022 through communication. Further focus to be placed on campaigns beyond just written communication in the future, with future plans also to link up with wellbeing where appropriate. Forthcoming campaign include Neurodiversity Week and International Women’s Day. Carried over to year 2

<p>Work with the Minorities Partnership Board (MPB) to increase the number of ethnic minority employees and to link this to upskilling local communities. - <i>Increase in the % of BAME employees throughout the organisation.</i></p>	<ul style="list-style-type: none"> • 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. 	<p>Commenced and on-going</p>	<p>Complete – work ongoing and meetings regularly attended. On-going work includes:</p> <ul style="list-style-type: none"> • Enlisted Akeela Mohammad to advise • Enlisted Dolly Agaro to Advise • Further follow up meeting regarding perception of SLHD by customers <p>As this link has now been established and will be ongoing this action is considered complete for the purpose of the strategy and will continue as a business as usual activity.</p>
<p>Commitment 3. Engage customers effectively, foster good relations and advance equality in local communities</p>			
<p><i>Establish local connections with a range of diverse groups to ensure improved communication and engagement : disability, ethnic minority, sexual orientation and older persons groups - Better understanding of how the way in which we deliver our services impacts on tenants with protected characteristics so that we can deliver services to better meet the needs of our tenants</i></p>	<ul style="list-style-type: none"> • 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; 	<p>October 2022 and ongoing</p>	<p>On track – links include: Muslim Women’s boxing club; Majid Kahn – religious leader; Gypsy and Traveller community surgery @ Bentley; Support pride – contact organisers for any connections with group;</p> <p>Correct religious leaders details have been acquired, meetings have been requested.</p> <p>Next steps to continue to focus in particular on G&T community with actions to develop a plan with the G&T team in Housing Management to ensure that the organisation is appropriately supporting this group and that our offer and communication is clear.</p> <p>Carried over to year 2</p>

Review the membership of the Get Involved Group and encourage more diverse tenants to join the group. - <i>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</i>	<ul style="list-style-type: none"> • 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 (remove as same as above point) 	Ongoing	Complete – as reported in the Communications strategy Update to EMT. Of the 144 strong group 39% identify as having a disability and 9% identify as being in an ethnic minority group, and whilst work will continue to ensure this group is as diverse as possible these percentages tell us we are achieving representation on this group.
Carry out a series of end to end mystery shopping exercises/journey mapping exercises involving tenants from our diverse community. - <i>Better understanding of the service received by our diverse tenants when accessing our service and to ensure</i>	<ul style="list-style-type: none"> • 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 Revised date March 2023	Not Started – A customer journey mapping exercise has taken place and will form a good basis for any mystery shopping next steps Carried over to year 2
Commitment 4. Fulfil safeguarding responsibilities to the highest standards			
Continue to deliver our rolling programme of safeguarding training for staff and partners - <i>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.</i>	<ul style="list-style-type: none"> • Implement training programme; 	On-going	On track – 67.6% of the workforce have completed safeguarding training as at 22 February 2023 (increased from 63.68% in November 2022) according to our LMS, demonstrating there is clearly further work to be done internally but progress is moving in the right direction. The L&OD team are facilitating on site sessions with our trades colleagues to drive up this figure.
Domestic Abuse Housing	<ul style="list-style-type: none"> • There is a separate action plan on 		Complete

Alliance (DAHA) accreditation - <i>Improve our partnership working, processes and response to domestic abuse</i>	achieving DAHA accreditation. The first action is to undertake a desk top review.		
Improve our approach to mental health - <i>Provide earlier and targeted support to tenants with mental health</i>	<ul style="list-style-type: none"> Implement a training programme for front line staff on identifying and support tenants with mental health issues; 	June 2022	Complete – first wave of training complete with delivered by an external organisation to 132 employees. A review of the learning and feedback has been undertaken with a view to embedding this in future core learning for identified groups.
Commitment 5. To develop a progressive and diverse workforce, in a workplace free from discrimination and harassment.			
Become a member of the Housing Diversity Network and develop a plan to implement the benefits of the membership. - <i>Improved awareness and consideration of equality, diversity and inclusion across the organisation.</i>	<ul style="list-style-type: none"> Apply for membership 	August 2022	Complete
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 - <i>To ensure all employers are aware of and kept up to date on diversity issues. A more inclusive</i>	<ul style="list-style-type: none"> 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 Revised to August 2023	<p>Delayed but underway – The review of the E learning has begun but has not yet completed this will complete before the end of March 2023</p> <p>From the 1st April the refresher period of EDI learning will be reduced from 3 to 2 years in recognition of the ever changing environment in which we are operating.</p> <p>In the coming months we will be reintroducing face to face EDI learning particularly for new starters to embed our</p>

<p><i>culture that embraces different perspectives measured by satisfaction scores from the Pulse Survey.</i></p>			<p>EDI culture. The existing ‘board game’ learning delivered by AKD will be refreshed and a new group of in house facilitators trained to deliver the session.</p> <p>Current compliance for EDI learning is at 70.9% similar to the levels reported at the 6 month point (71.32%)</p>
<p>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. - <i>Increase in the number of diverse employees across, ethnic minority, people with disabilities, and LGBT+ groups</i></p>	<ul style="list-style-type: none"> • 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 	<p>December 2022</p> <p>Revised to August 2023</p>	<p>Delayed but underway – Internal processes have been reviewed. Further actions are planned but will not be complete in year 1 and will extend to year 2 of the strategy</p>
<p>Review development routes across the organisation ensuring that they are accessible and representative of our diverse</p>	<p><u>Women in construction</u></p> <ul style="list-style-type: none"> • Become a member of women in construction; • Devise a plan of activity to increase our 	<p>Ongoing</p>	<p>On track and underway – member of both organisations. Internal group in place to increase focus on women into construction through a variety of different route and L&OD exploring the opportunities for us to</p>

<p>workforce. - <i>Increase in % of BAME employees in senior management positions.</i></p>	<p>application and development rates within the service area. This will include, development, succession, internal and external communication and engagement</p> <p><u>Housing Diversity Network Mentoring</u></p> <ul style="list-style-type: none"> • 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. 	<p>March 2023</p>	<p>work in partnership with WIC.</p> <p>HDN mentoring in place with 2 mentors and 1 mentee on this cohort. Plan to continue to publicise and increase this in futures successful.</p> <p>This activity will continue into year 2</p>
<p>Engagement - Implement a framework for employee networks and establish a number of diversity networks across the organisation to cultivate inclusion. - <i>Reduction in incidents of discrimination and opportunities for diverse employees to feed into decision making around service delivery and employee support.</i></p>	<ul style="list-style-type: none"> • 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. 	<p>September 2022 and ongoing</p>	<p>On track and underway – Disability group in place internally, the group have formed and met and discussed their remit and the recruitment of further members.</p> <p>Communications in the upcoming staff focus will raise awareness of the disability group as well as other potential networks.</p>
<p>Introduce external benchmarking for internal equality and diversity - <i>Increased awareness of best practice, awareness of gender identification and</i></p>	<p>Explore an appropriate benchmarking and measurement tool which may include:</p> <ul style="list-style-type: none"> • Stonewall Top 100 • Housing Diversity Network Accreditation 	<p>March 2023</p>	<p>Not started – this activity will be moved to year 3/4 of the strategy, ensuring that we have strong foundations in place before progressing to accreditation</p>

respect for LGBT+

- Inclusive employers



APPENDIX 2	Equality and Diversity and Inclusion Strategy
Year 2 action Plan 2023- 24	

KEY: RED TEXT – Delayed plans
GREEN TEXT – New or updated and carried over activity
PURPLE TEXT – New Plans

Outcome	Action	Headline Activities	Owner	Anticipated Completion Date
Commitment 1. Understand tenants and support their needs				
A policy which ensures that no one feels inhibited from applying for a council home and which takes into account our customers' diverse needs.	Carried forward from 2022/23 - Review the local lettings policy.	<ul style="list-style-type: none"> • EDI review of the Due regard Statement / Equality Impact Assessment 	Access and Allocations Service Manager	August 2023
Increase in diversity data declaration rates	Carried forward from 2022/23 - Improve the knowledge we have about our diverse tenants by making it easier for people to record and update their relevant personal information.	<ul style="list-style-type: none"> • Update the tenant portal to capture diversity information; • Consider the use of One Housing to update tenants details by visiting staff; 	Head of Customer Services	Review progress September 2023
	Continued activity from Year 1 - Carry out a number of promotional and engagement campaigns to increase the level of employee and customer data we hold.	<ul style="list-style-type: none"> • Continue to implement communications plan looking at innovative ways of increasing engagement through the use of social media and video; • Introduce data capture as part of employee new starter welcome day • Continue to explore ability to make this mandatory in HR and OH systems 	Equality, Diversity and Inclusion (EDI) Manager	1/4ly intervals throughout 2023/24

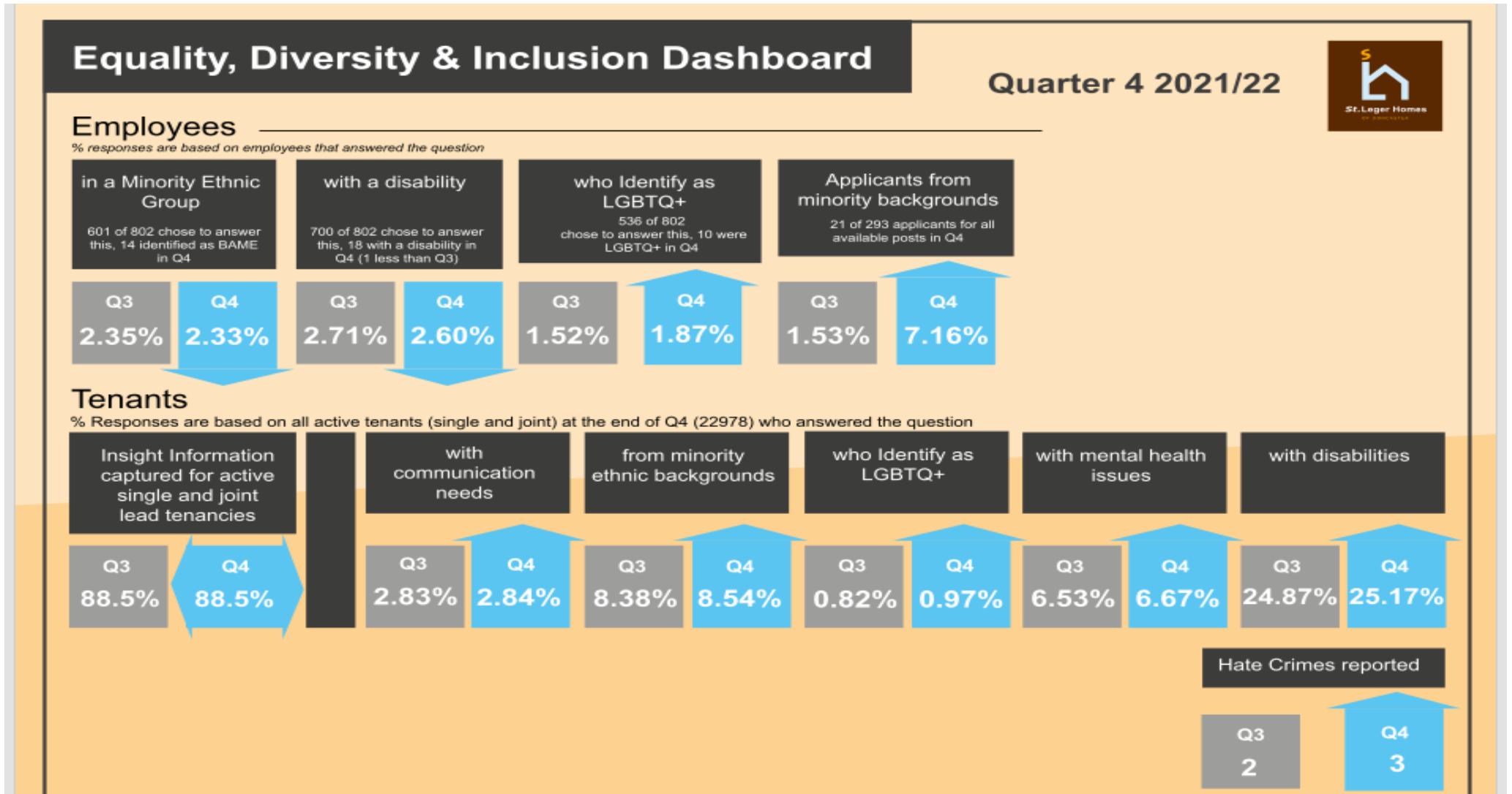
	<p>Carried forward from 2022/23 - Investigate use of Voicescape to increase the level of diversity data we hold on our tenants and to keep this up to date</p>	<ul style="list-style-type: none"> • Agree Pilot group and arrangements • Discussions with Voicescape; • Consultation with customers and colleagues; • Publicise to customers; • Go Live with a targeted calls • Review impact and consider benefit of wider use 	<p>Head of Customer Services</p>	<p>September 2023</p>
<p>Better understanding of who is not accessing our services due to diversity issues to make access easier</p>	<p>Carried forward from 2022/23 - 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.</p>	<ul style="list-style-type: none"> • Scoping exercise between Customer, EDI and Performance Teams • Implement reporting • Analyse and produce report identifying learning opportunities for improvements in service delivery 	<p>EDI Manager</p>	<p>September 2023</p>
<p>Commitment 2. To ensure the organisation is a leader in inclusion and fairness.</p>				
<p>A series of improvement actions identified as part of the self-assessment process</p>	<p>Continued activity from Year 1 - Carry out a full diversity audit and self-assessment to gauge and challenge our current diversity status.</p>	<ul style="list-style-type: none"> • Report Outcomes of the HDN Peer Assessment to EMT; • Develop action plan to address any gaps. • Implement Actions 	<p>Head of HR and OD</p>	<p>March 2024</p>
<p>Improved diversity in management and leadership roles</p>	<p>Continued activity from Year 1 - 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</p>	<ul style="list-style-type: none"> • Implement diversity calendar and coordinated plan of internal and external activity and communication 	<p>EDI Manager</p>	<p>On-going</p>

	external campaigns AND Celebrate our diverse employees and cultures through a series of internal events			
A Board that is more representative of our tenant community	New for year 2 - Investigate the introduction of a Board mentoring/diversity programme.	<ul style="list-style-type: none"> • Explore options with HDN • Prepare options for discussion with Board and EMT for agreement 	Head of HR and OD	December 2023
	New for year 2 – implement board diversity monitoring	<ul style="list-style-type: none"> • Investigate options for recording of the information • Implement monitoring for existing board members • Implement regular opportunity for data to be updated. 	Head of HR and OD	June 2023
An organisation that is more representative of our tenant community	New for year 2 - Consider appropriate development activity to break barriers for colleagues from more diverse backgrounds to access leadership roles	<ul style="list-style-type: none"> • Explore opportunities to work alongside partners such as HDN and WIC to consider appropriate development strategies • Link to People Strategy action plan and propose how future leaders will be identified, supported and developed to reach their potential. 	Head of HR and OD	March 2024
Better understanding of how the way in which we deliver our services impacts on tenants with protected characteristics so that we can deliver services to better meet	Continued activity from Year 1 - Establish local connections with a range of diverse groups to ensure improved communication and engagement : disability, ethnic minority, sexual orientation and older persons groups	<ul style="list-style-type: none"> • Benchmark to learn from other organisations; • Identify partnership and diversity groups that can support local connections; • Reach out to our tenant base for connections; 	EDI Manager	March 2024

the needs of our tenants		<ul style="list-style-type: none"> • Establish relationships and regular working groups to improve engagement; • Work with the Minorities Partnership Board (MPB) to increase the number of ethnic minority employees and to link this to upskilling local communities. • Focus on establishing / engaging with a dedicated group of contacts within our own communities with a focus on making a difference for our customers and Housing related focus. 		
Better understanding of who is not accessing our services due to diversity issues to make access easier	Carried forward from 2022/23 - Carry out a series of end to end mystery shopping exercises/journey mapping exercises involving tenants from our diverse community.	<ul style="list-style-type: none"> • Identify customers from an involvement perspective; • Identify journeys to be mapped; • Create scenarios and scripts for journeys; • Analyse results and identify improvements in processes. 	Head of Customer Services	March 2024
Commitment 4. Fulfil safeguarding responsibilities to the highest standards				
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.	Continued activity from Year 1 - Continue to deliver our rolling programme of safeguarding training for staff and partners	<ul style="list-style-type: none"> • Implement training programme, increasing the compliance levels 	Head of HR and OD / Head of Housing Management	On-going
Provide earlier and targeted support to tenants with mental health	Continued activity from Year 1 - Improve our approach to mental health	<ul style="list-style-type: none"> • Continue to deliver a training programme for front line staff on identifying and support tenants with mental health issues; • Continue to develop front line 	Head of HR and OD	March 2024 December 2023

		<p>managers in the management of employees mental health concerns and;</p> <ul style="list-style-type: none"> • Ensure annual wellbeing activity continues to have a focus on the mental health including a review of mental health first aiders and first contact officers. 		
Commitment 5. To develop a progressive and diverse workforce, in a workplace free from discrimination and harassment				
<p>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.</p>	<p>Carried forward from 2022/23 - 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</p>	<ul style="list-style-type: none"> • Achieve 100% completion on Equality, Diversity and Inclusion (EDI) training • Review recruitment training to ensure that this accurately reflect key elements such as disability confident level 2 requirements and unconscious bias. • Implement face to face EDI training for all new starters • Consider inclusion of EDI training for managers as part of the review of the first line manager program 	<p>Head of HR and OD</p>	<p>Ongoing and review December 2024</p>
<p>Increase in the number of diverse employees across, ethnic minority, people with disabilities, and LGBT+ groups</p>	<p>Carried forward from 2022/23 - 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</p>	<ul style="list-style-type: none"> • Review existing internal processes; • Review application, advertising, shortlisting and interview methods; • Consider Job description template and wording; • Consider recruitment language and consider use of decoder • Review our agency worker 	<p>Head of HR and OD supported by People Operations Manager</p>	<p>December 2024</p>

	ensure they are written in a way which encourages applications from diverse backgrounds.	<p>agreements to ensure that they are robust in ensuring diversity of candidate</p> <ul style="list-style-type: none"> • Review website content to attract a diverse range of job candidates • Increase attendance at face to face recruitment events and assess effectiveness and impact. 		
Increase in % of BAME employees in senior management positions.	Continued activity from Year 1 - Review development routes across the organisation ensuring that they are accessible and representative of our diverse workforce.	See activity for action above “Consider appropriate development activity to break barriers for colleagues from more diverse backgrounds to access leadership roles”		March 2024
Reduction in incidents of discrimination and opportunities for diverse employees to feed into decision making around service delivery and employee support.	Continued activity from Year 1 - Implement a framework for employee networks and establish a number of diversity networks across the organisation to cultivate inclusion.	<ul style="list-style-type: none"> • Support the groups to become self managed and directed • Establish Exec sponsorship in a listening and observing capacity • Increase membership and profile of the groups • Demonstrate a success and value 	EDI Manager	Ongoing Review September 2023 and March 2024



EDI Strategy Update – Data

- Data collated from MHR for 1st April 2022 and 23rd February 2023.
- Figures based on employees that are Grade 8 and above (SMT)
- Number of employees increased in this remit from 34 to 36.
- Increase in female employees, now a 50/50 gender ratio.
- Over 50% of employees are 51 and over, with a 3% increase over this time frame.
- Positive increases in BAME population, 3%.
- Increase in employees with a registered disability, increasing from 3% to 6%.

	Data from 1st April 2022	Data from 23rd February 2023
Gender		
Female	47%	50%
Male	53%	50%
Age Band		
Age Band: > 60	3%	3%
Age Band: 31 to 40	12%	14%
Age Band: 41 to 50	35%	31%
Age Band: 51 to 60	50%	53%
Marital Status		
Married	44%	42%
Not disclosed	18%	22%
Partner	3%	3%
Prefer not to say	24%	22%
Single	12%	11%
Religion		
Christianity	35%	36%
Islam	0%	3%
None	26%	22%
Not disclosed	38%	39%
Ethnic Origin		
Asian British - Pakistani	0%	3%
Not disclosed	21%	22%
White British	79%	75%
Nationality		
British	24%	22%
English	15%	17%
Not disclosed	59%	58%
Welsh	3%	3%
Sexual Orientation		
Heterosexual	76%	75%
Not disclosed	24%	25%
Registered Disability		
No	97%	94%
Yes	3%	6%

ST LEGER HOMES OF DONCASTER

Board Briefing Note

Title:	February 2023 KPI dashboard
Action Required:	For information
Item:	08
Prepared by:	Louise Robson Governance Service Manager
Date:	6 April 2023

1 Purpose

- 1.1 To provide Board members with the KPI dashboard as the end of February 2023 and brief commentary for those KPIs where the target was not met. The KPI dashboard is attached at **Appendix A**. The latest monthly benchmarking is attached at **Appendix B**

2. Executive Summary

- 2.1 There are 19 KPIs agreed with Doncaster Council (DC) for 2022/23 and include :
- Two measured quarterly – residents supported in training and residents supported in employment. The most recent results are not included in this report as they were reported in Q3;
 - Four measured annually - STAR survey (two), energy efficiency and Decent Homes Standard numbers. **NB:** the annual STAR survey for 2022/23 is complete and the two annual KPIs were reported from Q2;
 - Two KPIs relating to Homelessness do not have targets.
- 2.2 The table below summarises the KPI dashboard as at February 2023. Performance comparatives have been included from previous years. At the end of February 2023, six KPIs were met or were within agreed tolerances of target.

KPIs	Feb 23	Q3 22/23	Q2 22/23	Q1 22/23	Q4 21/22	Q3 21/22	Q2 21/22	Q1 21/22
Green (meeting target)	4	7	5	6	7	7	6	6
Amber (within tolerance)	2	1	2	1	4	3	3	2
Red (not meeting target)	7	7	8	6	5	4	5	4
No target (homelessness)	2	2	2	2	3	3	3	3
Quarterly / Annual	4	2	2	4	0	2	2	4
Total	19	19	19	19	19	19	19	19

3. KPI commentary

3.1 KPI 1: % of Current Rent Arrears against Annual Debit

Target	2.90%	
Feb 23 YTD performance	3.22%	WORSE THAN TARGET – RED

The rent arrears outturn at the end of February stands at 3.22%, which is above the profiled target tolerance for this point in the year. However, due to the way in which reporting periods fall, the February performance cut-off was Sunday 26 February 2023. This meant that the Direct Debits for the 25th of the month were not counted in February due to processing times and so tipped over into March. This is illustrated the following week when these DD payments along with the 1st March Direct Debits were made and arrears reduced to 2.80% taking us just slightly outside the profiled arrears target of 2.75% for this period of the year.

The cost of living impacts are being increasingly felt, with even traditionally ‘good payers’ starting to miss or under pay. There are around 700 more arrears cases than the same period last year and the proportion of all tenants who are now in arrears has increased from 35% to 39% compared to February 2022. However, we must also recognise that Universal Credit claimant continues to increase and we have an extra 354 cases on UC than last year.

The Income Management Team and Tenancy Support team continue to work closely together to support tenants to maximise their income and address financial pressures. We are continuing to work with the Council and Citizens Advice Doncaster and DWP to support tenants and families across the Borough and to ensure the take-up of Government and other support is maximised, this includes DHP, STF and Vulnerable Renters Funding. As well as pro-active work with Pensionable aged customers living below their applicable amount and achieved over £120,000 in additional financial support - not including the new £900 cost of living payments payable with effect from Spring 2023.

3.2 KPI 2 : Void rent loss (lettable voids)

Target	0.50%	
Feb 23 YTD performance	0.66%	WORSE THAN TARGET – RED

	Feb 23	Q3 22/23	Q2 22/23	Q1 22/23	Q4 21/22	Q3 21/22	Q2 21/22	Q1 21/22
Void rent loss YTD %	0.66%	0.67%	0.72%	0.76%	0.79%	0.79%	0.79%	0.82%
Target %	0.50%	0.50%	0.50%	0.50%	0.50%	0.50%	0.50%	0.50%
Void numbers	135	126	110	151	178	147	159	142

The KPI has been 0.50%, equating to approximately 110 void properties. It is a very challenging target and current performance would still be a top quartile position when benchmarked nationally, not just with our peers.

The number of voids held at the end of February shows a reduction at 135 which is 14 less when comparing to the previous month (January) of 149. This figure includes seven non-lettable voids, consisting of the following:

- 3 awaiting further investment;

- 1 acquisition;
- 1 awaiting major work due to fire damage;
- 1 undergoing adaptations by DMBC; and
- 1 awaiting lease commencing for SY Police to use.

3.3 KPI 3 : Average Days to Re-let Standard Properties

Target **20.0 days**
Feb 23 YTD performance **27.0 days** **WORSE THAN TARGET – RED**

	Feb 23	Q3 22/23	Q2 22/23	Q1 22/23	Q4 21/22	Q3 21/22	Q2 21/22	Q1 21/22
Re-let days	27.0	26.9	29.1	33.6	33.7	32.4	31.6	32.7

Standard re-let month end performance for February shows an improvement at 27.2 days when comparing to the previous month January of 28.03. Cumulative performance shows a slight decline at 27.0 days.

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 collaboratively to ensure that voids are re-let at the earliest opportunity.

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

Target **0.070%**
Jan 23 * YTD performance **0.099%** **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.

We analyse the percentage of complaints upheld against all customer transactions. The information for January 2023 shows that we are over our 0.070% target, achieving 0.088%. The year to date KPI shows we are above target, achieving 0.099% against customer transactions.

In January 2023, we received 120 complaints, six more compared to January 2022. Positively, the number of complaints upheld has decreased by -24, as 51 complaints were upheld in January 2022, compared to 27 in January 2023.

Complaints upheld in January 2023 were just two more than December 2022. The main theme for upheld complaints in January 2023 relate to time to complete a repair.

3.5 KPI 11 : Days lost to sickness per Whole Time Equivalent (WTE)

Profiled target **7.18 days**
Feb 23 YTD performance **10.77 days** **WORSE THAN TARGET – RED**

February saw 0.91 days absence per FTE against a target of 0.67, better than January's 1.43 days and is the lowest rate for six months. This gives a YTD KPI of 10.77 days per FTE and a projected year end outturn of 11.75, is a slight increase on last month's projection (11.74).

In the year to date, stress, depression and anxiety remain the highest reason for absence accounting for 31% of all absence.

February saw a reduction in the number of days for all forms of stress related absence compared to last month. This is followed by:

- MusculoSkeletal MSK (17.4% YTD but showing a significant reduction this month to 58.29 days and the lowest figure all year for this type of absence);
- then Infection and virus (14% and 79.60 days, also a significant reduction on last month which saw 174.56 days).

Covid related absence saw only 7.58 days absence this month and the lowest all year. YTD Covid accounts for 7.7% YTD.

Short Term sickness continues to drive up the number of sickness cases accounting for 6.70 days per FTE YTD in comparison to 4.07 days per FTE for long term cases.

All cases continue to be managed in line with the attendance management procedure. Changes for the attendance management policy have now been approved and will go live from the 1st April introducing additional short-term triggers for management of short-term absence.

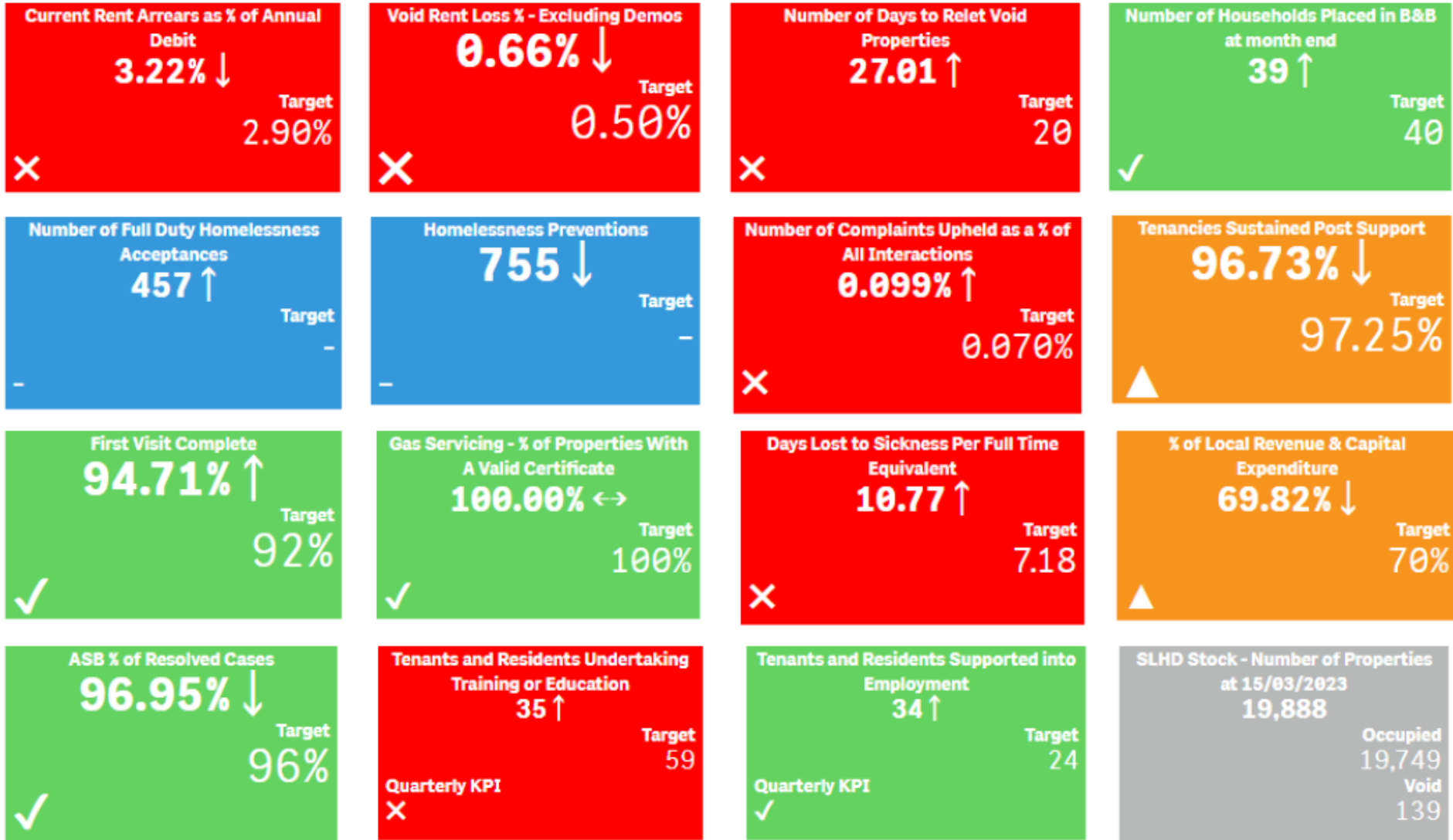
4. Report Author, Position, Contact Details

Louise Robson
Governance Service Manager

St Leger Homes of Doncaster Performance Dashboard February 2023

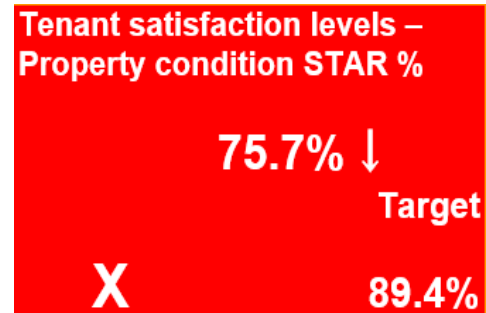
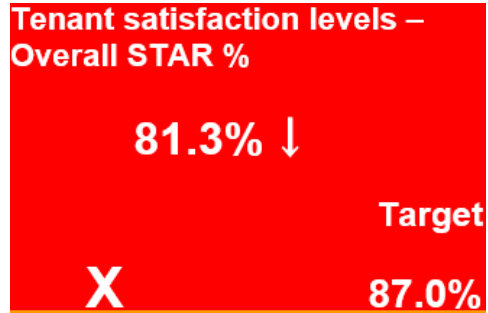
Colour = Cumulative performance (Tick/Green = On Target, Triangle/Orange = Near to Target, Cross/Red = Not on Target, Blue = No Target)

NB : Arrows = compares performance in the month with performance in the previous month (↑= Improved, ↓= Not Improved, ↔ = Remained the same)



Annual KPIs

Colour = Cumulative performance (Tick/Green = On Target, Triangle/Orange = Near to Target, Cross/Red = Not on Target, Blue = No Target)
Arrows = comparison against previous month's monthly performance (↑= Improved, ↓= Not Improved, ↔ = Remained the same)



Benchmarking - Housemark monthly pulse survey results – January 23 and December 22

JANUARY 23 Housemark pulse survey benchmarking							
	Measure	Q1	Median	Q3	SLHD	quartile	Polarity
Jan-23	Current tenant arrears at the end of the month (%)	3.29%	4.08%	5.85%	3.03%	Q1	Lower is Better
Jan-23	No. of non-emergency repairs in month per 1,000 units	155.0	187.4	235.5	144.1	Q1	Lower is Better
Jan-23	% of homes with a valid gas safety certificate	100.00%	100.00%	100.00%	100.00%	Q1	Higher is Better
Jan-23	No. of social housing lettings in the month as a % of units	0.34%	0.42%	0.49%	0.46%	Q2	Higher is Better
Jan-23	No. of emergency repairs in month per 1,000 units	71.1	109.9	132.7	115.9	Q3	Lower is Better
Jan-23	No. of dwellings vacant but available to let at m/end as % of units	0.52%	0.74%	1.20%	0.75%	Q3	Lower is Better
Jan-23	No. of new ASB cases reported per 1000 units	1.78	4.50	5.68	5.65	Q3	Lower is Better
Jan-23	% of complaints resolved within timescale in month	91.0%	70.0%	54.0%	61.0%	Q3	Higher is Better
Jan-23	% of working days lost to sickness absence in month	4.10%	5.04%	6.03%	7.93%	Q4	Lower is Better
Jan-23	No. of formal complaints received in month per 1,000 units	2.8	3.1	4.6	6.0	Q4	Lower is Better

DECEMBER 22 Housemark pulse survey benchmarking							
	Measure	Q1	Median	Q3	SLHD	quartile	Polarity
Dec-22	Current tenant arrears at the end of the month (%)	3.30%	3.78%	5.33%	2.98%	Q1	Lower is Better
Dec-22	% of homes with a valid gas safety certificate	100.00%	100.00%	100.00%	100.00%	Q1	Higher is Better
Dec-22	No. of social housing lettings in the month as a % of units	0.46%	0.36%	0.32%	0.38%	Q2	Higher is Better
Dec-22	No. of non-emergency repairs in month per 1,000 units	116.2	146.1	206.3	145.8	Q2	Lower is Better
Dec-22	No. of dwellings vacant but available to let at m/end as % of units	0.42%	0.74%	1.18%	0.65%	Q2	Lower is Better
Dec-22	No. of new ASB cases reported per 1000 units	1.38	3.31	3.94	2.55	Q2	Lower is Better
Dec-22	No. of emergency repairs in month per 1,000 units	59.7	101.9	145.6	136.3	Q3	Lower is Better
Dec-22	No. of formal complaints received in month per 1,000 units	2.2	2.6	4.9	4.6	Q3	Lower is Better
Dec-22	% of working days lost to sickness absence in month	4.03%	5.26%	6.02%	8.25%	Q4	Lower is Better
Dec-22	% of complaints resolved within timescale in month	85.0%	77.0%	70.0%	38.0%	Q4	Higher is Better

Governance Summary Communications Template

Report from:	Performance and Improvement Committee	
Date of meeting:	23 February 2023	
Report author:	Stuart Booth	
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):	
<p><u>1. Performance Information – Key Performance Indicators</u> Members noted the Key Performance Indicators (KPIs) and referred to the KPI Tenants and Residents Undertaking Training or Education and stated that this would surely be proportionate to job vacancies. They asked if there would be any movement on the target.</p> <p><u>2. Service Standards</u> The Committee reviewed Quarter 3 Service Standards and discussed and agreed that answering calls in 20 seconds was completely unachievable. A Council member pointed out that the Council’s target was 150 seconds and so queried if callers were given an automated message to wait or use the internet to report repairs.</p> <p><u>3. Journey to Excellence – Homelessness</u> Members were given a presentation to summarise the Journey to Excellence – Homelessness, since obtaining the temporary resources from the Council to address the backlog of homeless presentations. A number of questions were asked around the ex-offenders scheme and partnership working. Members requested examples of anonymised lived experiences of the service.</p>	<p>MMc confirmed it was linked to the external environment and advised he would consult with EMT the potential to discuss the target with the Mayor.</p> <p>MMc reported that once the SLHD website had been reviewed and overhauled there would be more self-service options available which should reduce the 50,000 calls per quarter.</p> <p>JD agreed to provide examples of anonymised lived experience of the service directly to members.</p>	
Additional notes for communication to governance:		
None.		

**St. Leger Homes of Doncaster Limited
PERFORMANCE & IMPROVEMENT COMMITTEE**

23 February 2023

Present

Stuart Booth (SB) (Chair), Sam Bartle (SMa), Steve Lyons (SL), Phil Cole (PC)

In Attendance

Mark McEgan (MMc) Director of Housing and Customer Services, Jane Davies (JD), Head of Housing Services, Anne Tighe (minutes)

1. Apologies and Quorum

- 1.1 Apologies were received from Jackie Linacre (JL), Head of Customer Services and Chris Margrave, Director of Property Services (CM); the meeting was noted as quorate.

2. Declarations of Interest by Committee Members

- 2.1 No declarations of interest were received.

3. Minutes of the meeting held on 17th November 2022 and matters arising

- 3.1 The minutes of the meeting held on 17th November 2022 were agreed as an accurate reflection of discussions held.

3.2 *Item 3.3 – Customer Feedback*

MMc confirmed he and JL had met and a rapid complaints improvement plan had been finalised.

3.3 *Item 8.4 Tenancy Sustainability Update*

It was noted that the suggestion was made to Board Members at the December Board Meeting that they could potentially donate to the foodbank scheme for tenants.

3.4 *Item 11.3 – Lettable Property Standards*

MMc advised the Access and Allocations Service Manager was exploring the IT process that would allow for hybrid property viewings.

4. Q3 Performance Information

- 4.1 MMc presented the Q3 Performance Information and highlighted the following:

- Current rent arrears as percentage of annual debit – although currently green and excellent performance it was

ACTION

likely this would be adversely impacted by the cost of living crisis

- Number of complaints upheld as a percentage of all interactions – an update around the complaints improvement plan would be presented to the next meeting
- Void rent loss percentages excluding demolitions – it was pleasing to note that the numbers were reducing
- Number of days to re-let void properties – the void rent loss overall was reducing
- Days lost to sickness per full time equivalent – members were advised that sickness was on a downward trajectory and this was due to a high number of long term sickness cases

4.2 Members noted the current and projected trajectories.

4.3 SL referred to the Quarterly KPI Tenants and residents undertaking training or education, and pointed out that this would surely be proportionate to job vacancies. He asked if there would be any movement on the target. MMc confirmed it was linked to the external environment; he advised he would consult with EMT the potential to discuss the target with the Mayor, however this year's targets have been agreed with the Council and the Mayor.

MMc

5. Q3 Customer Focus Update

5.1 MMc led on the Customer Feedback and advised that complaints continued to rise and the main issue was around the time taken to complete a repair. Complaints rising were a national issue, however it was noted that we were about to go into a regulatory team and top quartile is going to be 92% of all complaints responded to within 10 working days which would be very challenging. MMc reported this was being made a priority and could potentially lead to naming officers going forward.

5.2 PC referred to the fact that more than a quarter of complaints were being upheld, and asked if managers knew which areas are getting the most upheld complaints. Members appreciated that complaints were on the increase nationally, however cared about SLHD tenants. He further asked if there was a group that analyses and looks at different ways of working to address the identified issues. MMc responded that the driver wasn't the national picture, however it was important to put complaints in context. He agreed that PC was correct that our focus was on people from Doncaster. He confirmed there was a group of managers who carried out analysis and implemented changes to address patterns of behaviours amongst other things.

5.3 The Chair queried when the Committee would be reviewing the complaints review plan; MMc explained EMT would see the initial report in 2 weeks therefore it should be available for the next scheduled P&I Committee in May 2023.

6. Q3 Service Standards

- 6.1 MMc led on the Q3 Service Standards report and reported the good performance responding to social media and posts protecting the reputation of the company. For the 95% target of answering calls in 20 seconds was not in target however we are reviewing the service standards on answering calls and it was noted that we should be more aligned with the Council's standards.
- 6.2 The Chair referred to the 10 days standard for responding to enquiries/complaints and queried what the regulatory standard was and was this going to change. MMc responded that the ombudsman code of guidance was 10 days therefore that is what the organisation aimed for. In response to a further question around answering calls, MMc confirmed there was no standard set by the ombudsman.
- 6.3 Members discussed and agreed that answering calls in 20 seconds was completely unachievable; if a tenant's call was important they wouldn't mind waiting longer. PC pointed out that it was 150 seconds for DMBC, and asked if callers were given an automated message to give a queue number. MMc confirmed queue number is given on calls.
- 6.4 MMc reported that once the SLHD website had been reviewed and overhauled there would be more self-service options available which should reduce the 50,000 calls per quarter.

7. Quarterly Customer Involvement Monitoring

- 7.1 MMc provided members with highlighted information as follows:
- 'One Voice Forum' was up and running and SL was the Chair. Terms of Reference (TOR's) had been settled and work was ongoing to increase membership of the Forum.
 - A team member delivered Domestic Abuse Housing Alliance (DAHA) training to 327 staff through both digital and face to face sessions
 - SLHD were successful in gaining national Tenant Participation Advisory Service (Tpas) accreditation which was a prodigious award
 - The Tenant and Residents Involvement Panel (TRIP) were doing some brilliant work and uncovering concerning issues with Metro Clean and the issues would be investigated once the TRIP report was completed
- 7.2 Members asked if the Tpas accreditation was a distinction and it was confirmed it was.

7.3 The Chair asked when the TRIP report would be presented to the Committee and members were advised it was hoped it would be the May Committee meeting, however in drawing up a response it may take longer and be presented to the September meeting.

8. Transactional Surveys

8.1 MMc led on the feedback from Transactional Surveys and highlighted the following on the presentation:

- 16 out of 20 tenants had not been contacted by the investigation officer to discuss their complaint
- Only 30% were satisfied with their outcome from complaints – members were reminded of the previous discussion around the review of the complaints process and a rapid improvement plan to address this
- 58% of people surveyed advised they were not online and this was worrying – more work would be carried around this as future plans included online reporting

8.2 The Chair referred to channel shifts and asked if the organisation was learning lessons from other organisations. MMc confirmed officers were looking at Local Authorities, Housing Associations, ALMOs and the third sector.

8.3 SL commented there would be opportunities to increase the numbers of digital awareness groups with getting tenants involved in One Voice; tenants were already involved with the proposed new website design.

8.4 SL referred to St Leger Lettings (SLL) and Tenancy Sustainability (TS) and asked if the figures only concerned tenants or also included leaseholders also. MMc advised he had requested further information around this which could potentially mean drilling down for more specific information.

9. Journey to Excellence - Homelessness

9.1 JD attended to provide a presentation which highlighted the progress since obtaining the temporary resources from the Council to address the backlog of homeless presentations. The presentation would show the progress on the journey to excellence, and highlight the issues still needing to be addressed. *Post meeting note: the presentation was circulated to Committee Members for their information.*

9.2 PC referred to the problem of long call times and volume of calls and asked what the numbers of calls were in a typical week and how many staff dealing with those. JD responded there had been 2,854 calls into the service in January and at the moment there were 4 staff; typically 1 on phones and 1 on reception. The issue was, however, that we have specialist Home Options officers taking the calls. It wasn't just a case of taking a couple of staff

and putting them on calls it was really specialised advice. What was needed was getting people signposted to self-serve as a large number of calls were for advice and assistance only.

- 9.3 PC stated he calculated 120-140 calls a day, dependant on the length of the call, could we just not have a system if there's a wait of more than 20-30 people waiting the call would be dropped. It was explained that EMT have asked about a call back system, so the answer was yes manager needed to think of an innovative solution. It was noted that a call back system had been used in the past that wasn't successful so it needed to be carefully considered.
- 9.4 PC asked if there were resources to boost calls during 3-5pm and JD advised that it couldn't be considered at the present, as staff were already split on front end advice and others were on assessment and case management and homeless tonight presentations.
- 9.5 Members noted that B&B numbers were down to 36 and queried if this was sustainable. JD confirmed it would be with a focused effort. In response to a question around move on and people leaving B&B without any further contact, it was confirmed that some people do that and officers tried to monitor if they were a positive or a negative; the positive one that are us helping them move on or if they've just disappeared it was negative. PC commented that if people moved on themselves without any help at least we helped them in a crises so helping themselves was a positive.
- 9.6 Members noted that a non-engagement policy had been instigated which said we would warn people that if they did not respond to any contact from the team then the accommodation offer would be ended by the organisation contacting the B&B to remove them.
- 9.7 The Chair asked for clarification around temporary accommodation. It was explained that people were provided with temporary accommodation on a licence agreement; we do receive some income from this, however it does have a cost impact on the business in that we have to furnish it from home options general fund.
- 9.8 Members referred to the ex-offenders scheme and asked if we get a disproportionate amount that finish in Doncaster due to having 4 prisons in the City and this was confirmed. He further asked what was the most common path and where did they finish up. JD reported that the accommodation for ex-offenders offer is Private Rented Stock (PRS), however a lot of accommodation was House of Multiple Occupancy (HMOs) and links into the prison leaver protocol.

9.9 SB referred to HMOs and asked if this type of accommodation grouped a number of ex-offenders would that increase their chances of re-offending. JD agreed he was absolutely right and one of the things putting the ex-offenders scheme at risk and things can go horribly wrong. However she confirmed that the organisations would not take as many high risk offenders, if they were owed a duty, due to safety issues. Joint working was ensuring they were dispersed into different properties and areas.

9.10 The Chair commented that the presentation showed extremely positive work and moving towards true excellence. He asked that JD thank her team and convey members thoughts that they were making a real difference to people in the City and how we deal with homeless people. He asked at what point did we think this work will be embedded into the team, and the City, as we're still seeing peaks and troughs; would we be able to get into a stable condition.

9.11 JD explained it was vital to work in partnership and embed communications. She was trying to crack this in the next 6-12 months, however it was important to note that there was a great deal of positive partnership work as this had been fractured in the past. She added there was also very positive feedback from the localities team around homelessness work.

9.12 The Chair asked how we would showcase this work to the Department for Levelling Up, Housing & Communities (DLUHC), other local authorities and partnerships. JD reported that when DLUHC visited the organisation for a 'deep dive' they said they wanted us to be their star pupil. Our ways of working would be shared through DLUHC to other ALMOs, local authorities and housing providers.

9.13 SL referred to the £133 per night for B&B contained in the presentation and asked why we couldn't get cheaper accommodation as it was listed on internet for the public. It was confirmed that the organisation were not able to take advantage of such offers, mainly due to the state some accommodations were left in. Following a brief discussion it was agreed that members would appreciate examples of 'lived experience' of homelessness.

JD

9.14 PC was asked by the Chair if, in his opinion, Council members had noticed any difference on the ground. PC responded that city centre elected members may be good to ask as they experience rough sleeping issues more than others. Following a brief discussion he agreed to ask his colleagues for their perceptions of homelessness.

PC

10. Any Other Business

10.1 No other business was raised.

Governance Summary Communications Template

Report from:	Audit & Risk Committee	
Date of meeting:	6 March 2023	
Report author:	Trevor Mason	
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):	
<p>1. <u>Monitoring of the Internal Audit Programme and Outstanding Audit Actions</u></p> <p>The Chair expressed his concern that it seemed to be a lengthy process to sign off recommendations.</p> <p>The Chair sought clarity around the “almost complete” description and requested measurable timescales.</p> <p>2. <u>Internal Audit Reports</u></p> <p><u>Void Management</u> - Doncaster Council’s Internal Audit Manager reported on the background of this audit the aim of which was getting properties back into use asap. The opinion of internal audit was partial assurance, which is one down from the highest level of assurance.</p> <p>Doncaster Council’s Internal Audit Manager reported that as a result of the audit work 12 recommendations had been made, of which 7 have since been implemented.</p> <p>3. <u>Update from Data Protection Officer</u></p> <p>It was noted that time taken to respond was outside of the legal requirements in both areas (DP and FOI) and work was being undertaken to address this.</p>	<p>The Head of Finance and Business Assurance confirmed that the outstanding recommendations would be completed by the year-end, 31 March 2023.</p> <p>The Chair reported that void performance was measured by two KPIs for the company, therefore the findings of the audit were disappointing.</p> <p>The Chair requested that we consider why our compliance is not meeting legal requirements and how we are going to resolve this with a report provided to the next meeting.</p>	

Additional notes for communication to governance:

None.

St. Leger Homes of Doncaster Limited

AUDIT & RISK COMMITTEE MEETING

6th March 2023

Present

Trevor Mason (Chair), Steve Lyons and Milcah Walusimbi

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 (Beever & Struthers) and Shauna Brady (SB) – Executive Support Officer (minutes).

1.	<u>Apologies and Quorum</u>	ACTION
1.1	That Louise Robson's (LR) and R A Jones (RAJ) apologies be noted and thanks be extended to S Lyons who had joined the meeting in order to be quorate.	
2.	<u>Declarations of Interest by Board Members</u>	
2.1	There were no declarations of interest.	
3.	<u>Private discussion with the External & Internal Auditors</u>	
3.1	The Chair reported that this was a private section of the meeting between ourselves and the Internal and External Auditors and introductions were made.	
3.2	The Chair queried if members had any matters that they wished to raise? No matters to raise.	
4.	<u>Previous Minutes and Matters Arising – 31st October 2022</u>	
4.1	The minutes of the meeting held on 31 st October 2022 were agreed.	
4.2	From Agenda item:- 10.7 - Strategic Risk Q2 - The Head of Finance and Business Assurance reported that he had made the change requested.	
5.	<u>External Audit Strategy</u>	
5.1	Jason Burgess, External Audit Manager from Beever and Struthers, attended to introduce this item.	

- 5.2 It was noted that the that the report was similar in format to that of previous years, however there had been a re-branding of the report which he hoped was more user friendly and appealing.
- 5.3 Jason Burgess reported that the key pages of the report were from page 12 – 17 and he highlighted that there were no new areas of risk.
- 5.4 An area of the report to highlight was a new ISA requirement regarding additional work around IT Controls. Jason Burgess reported that he would forward a checklist to the Director of Corporate Services and the Head of Finance and Business Assurance later in this week. **JB**
- 5.5 The Chair sought clarification as to if the new ISA requirement would result in increased fee for the organisation?
Jason Burgess confirmed that there would be an increased cost due to increased work required. He explained that this was not unique to SLHD and was common across all Housing audits. It was noted that as per previous years the interim audit would be done remotely. Further discussions would take place at this point with regards to if the auditors would be physically on site for the year-end audit.
- 5.6 The Chair sought clarification around the “going concern assumption” as the organisation was in the last year of the current management agreement.
Jason Burgess confirmed that this had been discussed previously and it was difficult to provide a firm response at this point of time, given the uncertainty. A clearer picture should be available in June/July.
- 5.7 A member queried if the external auditors decided that we were not a going concern what were the consequences?
Jason Burgess responded that this would be an unusual situation if the business was not a going concern, some modification around the audit opinion could occur.
- 5.8 The Director of Corporate Services reported that there had not been any indications that the management agreement would cease, although this may not be available at the point the financial statements were to be agreed.
- 5.9 Jason Burgess reported that delaying the audit opinion would be an option, or seeking separate clarification from the Council.
- 5.10 The Chair thanked Jason Burgess for his presentation and it was agreed that he remain in the meeting as he requested.
- 5.11 **The Committee noted the contents of the External Audit Strategy.**

6. Monitoring of the Internal Audit Programme and Outstanding Audit Actions

- 6.1 The Head of Finance and Business Assurance presented the progress against the 2022/23 IA programme and progress made regarding outstanding audit actions.
- 6.2 It was noted that there had been 7 recommendations outstanding at last audit, 4 of which are outstanding to date (1 General Financial Audit and 3 Fuel Cards), although these were near to completion.
- 6.3 The Chair expressed his concern that it seemed to be a lengthy process to sign off recommendations.
- 6.4 The Head of Finance and Business Assurance reported that the main delay for the general financial one was around the development of an interface and the team has been working hard to close this off. Sickness had also been a factor in the delays.
- 6.5 The Chair sought clarity around the “almost complete” description and requested measurable timescales.
- 6.6 The Head of Finance and Business Assurance confirmed that the outstanding recommendation for general financial would be completed by the year-end, 31 March 2023.
- 6.7 The Chair queried why the process was so labour intensive? Doncaster Council’s Internal Audit Manager reported that the system looked for any duplication amongst the hundreds and thousands of transactions. When it identified false positives, the only way to check was to manually pull these out to interrogate further.
- 6.8 Doncaster Council’s Internal Audit Manager provided the background to work undertaken around Fuel cards following the identified anomalies and the subsequent adverse report last Summer.
- 6.9 There were still a few areas to note although a number of drivers were improving their processes following an increase of monitoring by team leaders and a general raising of awareness.
- 6.10 A member queried if any of the reported fraud cases were concerning fuel cards?
There had been one transaction for £20 which was probably fraudulent but it was identified too late to take any action. Which is one of the reasons why the processes need to be improved.

NF

- 6.11 A member queried if we were working with staff to prevent them thinking we simply don't trust them?
The Director of Corporate Services confirmed that staff are aware of their obligations and we were working to manage the overall approach to staff management and understanding of their responsibilities, this has been reinforced this through staff training.
- 6.12 A member queried if we could revise the data from the Americanised version as this was confusing?
The Head of Finance and Business Assurance reported that there appeared to be an issue with the uploading but he would revisit this.
- 6.13 Doncaster Council's Internal Audit Manager reported that with regards to the Homelessness Prevention grant featured on Appendix A this had now occurred therefore the figures would be certified in the next few days.
- 6.14 **The Committee noted the contents of the report and the Chair summarised that the Committee expected to see all outstanding recommendations completed by 31st March 2023.**
7. **Internal Audit Reports**
- 7.1 Void Management – Doncaster Council's Internal Audit Manager reported on the background of this audit the aim of which was getting properties back into use asap. The opinion of the audit was partial assurance, which is one down from the highest level of assurance.
- 7.2 Doncaster Council's Internal Audit Manager reported that as a result of the audit work 12 recommendations had been made, of which 7 have since been implemented. All of these recommendations were included in Appendix A to the report.
- 7.3 The reasons for this opinion were mainly inadequacies around the following areas:
- Profit and Loss monitoring
 - No document authorisation process.
- 7.4 It was noted that measures had subsequently been put in place to resolve both of the identified issues.
- 7.5 The Chair reported that void performance was measured by two KPIs for the company, therefore the findings of the audit were disappointing.
- 7.6 Housing Rents – Doncaster Council's Internal Audit Manager reported that the housing rents review process was considered every year and the findings of this audit were substantial assurance.

NF

- 7.7 It was noted that two relatively minor system / process improvements were noted relating to the triggering of the handover of debt to the former tenant arrears process and rent refunds following a significant payment from Housing Benefit. These were very specific and were unlikely (but not impossible) to happen again.
- 7.8 The Chair queried if we were still taking cash payments?
No, all cashless transactions. Payment cards can be used in certain shops and post offices, but we do not take cash payments at any St Leger or Council offices.
- 7.9 The Director of Corporate Services reported that this audit also ensures compliance with the Regulator of Social Housing's Rent Standard.
- 7.10 Payroll – Annual Payroll audit - Doncaster Council's Internal Audit Manager reported that the findings of this audit came out as substantial assurance and the only minor point identified was around staff including receipts when submitting claims.
- 7.11 Doncaster Council's Internal Audit Manager clarified that with regards to mileage claims they consider a relevant tolerance and only interrogate further claims that appear to be incorrect or outside of that tolerance level.
- 7.12 The Director of Corporate Services reported that we remind staff annually of the process with regards to submitting expense claims.
- 7.13 **The Committee noted the contents of the report.**
- 8. Internal Audit Plan 2023/24 to 2025/26**
- 8.1 Doncaster Council's Internal Audit Manager presented the internal Audit Plan for 2023-2026. It was noted that a few extra pieces of work were included and that the plan is reviewed every year. The report also included the Internal Audit Strategy and Charter 2021-2024 which is due for a refresh next year.
- 8.2 It was noted that SLHD remained a low risk and well managed business from an internal audit perspective.
- 8.3 It was noted that the collection of housing rents was the single biggest income collection risk that SLHD managed.
- 8.4 The Chair commented that this was not just around financial matters and was there any conflicts?
Doncaster Council's Internal Audit Manager responded that there were rarely any issues and we work well together. SLHD were generally a low risk organisation and we usually give preference to key issues and areas for the organisation.

8.5 The Director of Corporate Services highlighted that Doncaster Council's Internal Audit Manager also contact other organisations to review their plans to try and identify if we are missing anything.

8.6 **The Committee noted the contents of the report and approved the Internal Audit plan for 2023/24 to 2025/26.**

9. **Update from Data Protection Officer**

9.1 The Head of Finance and Business Assurance reported that the number of Data Protection requests had declined slightly and there was a small increase in FIO requests when compared to the same period in 21/22.

9.2 It was noted that time taken to respond was outside of the legal requirements in both areas and work was being undertaken to address this.

9.3 The Head of Finance and Business Assurance reported that some of the issues were around resources, whilst some were system related and some were around the number of officers involved in formulating a response.

9.4 The Head of Finance and Business Assurance reported that a number of FIO requests are from journalists and therefore can increase when specific housing issues are in the press e.g. damp and mould.

9.5 The Director of Corporate Services reported that she was the Senior Risk Officer for the organisation, therefore she had asked that this area be given high priority.

9.6 The Chair requested that we consider why our compliance is not meeting legal requirements and how we are going to resolve this with a report provided to the next meeting.

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

10. **Business Continuity Plan**

10.1 The Head of Finance and Business Assurance reported that this document references what would happen in the business should a business interruption occur.

10.2 The Plan had been reviewed and updated to reflect the numerous incidents that had occurred over the last few years with the pandemic, IT outages, moving building locations etc.

10.3 The Head of Finance and Business Assurance reported that high on the agenda was the potential impact from cyber-attacks, strike action, staff sickness and we are looking at these going forward and had built them into the report.

LR

10.4 It was noted that this was a redacted version as the original one had contact names and numbers in it.

10.5 A member queried how we ensured that all staff are aware of this document?

The Head of Finance and Business Assurance reported that it was discussed as part of the Heads of Service meeting agenda and then was fed down. A redacted version is published on the intranet, with a hard copy also provided to relevant staff. Following review at EMT all staff were reminded of the document and its purpose via EMT key messages.

10.6 The Director of Corporate Services reported that this was a working document and the key focus was on IT systems, cyber security and cyber-attacks and our ability to deliver our services if we were to be without our IT systems.

10.7 **The Committee approved the revised plan and noted the contents of the report and update provided.**

11. **Emergency Plan**

11.1 The Head of Finance and Business Assurance reported that this report was closely aligned to the Business Continuity Plan, although this document had a wider audience and was shared with partners in the borough. This document had also been streamlined and refreshed.

11.2 A member queried if lessons learnt meetings had been held following on from the floods and the peak of the Covid Pandemic? The Head of Finance and Business Assurance confirmed that there had been numerous meetings during and following both events with valuable lessons learnt.

11.3 **The Committee approved the revised plan and noted the contents of the report and update provided.**

12. **Fraud Register & Related Activities**

12.1 The Director of Corporate Services presented the report and confirmed that an employee had been dismissed (the bottom case) since writing this report.

12.2 The Director of Corporate Services reported that with regards to data matching we were liaising closely with Doncaster Council's Internal Audit team.

12.3 With regards to RTB applications, we have resumed our face-to-face checks and the level of RTB applications and sales are back to the level that they were at pre-Covid.

- 12.4 Doncaster Council's Internal Audit Manager reported that with regards to RTB there were many interesting cases to investigate, some of which resulted in information being forwarded to HMRC.
- 12.5 A member questioned had we had any cases of disrepair fraud attempts?
The Director of Corporate Services reported that we had tended to experience increased volumes of enquires/claims following solicitor flyers and mailshots and that we always visit and make good any issues following cases being reported. Overall, we have been successful in defending most cases, but we do incur costs to defend against the claims.
- 12.6 The Chair reported that he thought that the damp and mould prevalence might increase claims.
- 12.7 The Director of Corporate Services reported that there are ongoing potential cases across the business and we were looking at this and intensively monitoring.
- 12.8 It was noted that SLHD had good records and cases were monitored carefully. We had been in contact with other authorities to see if there are similar types of properties causing concern that may be in our location.
- 12.9 Jason Burgess reported that he was happy to see the assurances given.
- 12.10 **The Committee noted the contents of the report**
13. **Forward Plan**
- 13.1 The Director of Corporate Services reported that the key item at the June meeting was the financial statements for approval at this Committee prior to being approved at Board in July.
- 13.2 Jason Burgess suggested that there should be an item for the Management letter. The Director of Corporate Services clarified that this was included as part of the Financial statements but could be individually itemised.
- 13.3 **The Committee noted the contents of the report**
14. **Date and Time of Next meeting**
Monday 26th June 2023 – 2pm

JCr

Governance Summary Communications Template

Report from:	Building Safety & Compliance Committee	
Date of meeting:	12 January 2023	
Report author:	Trevor Mason	
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):	
<p><u>1.Damp, Mould & Condensation</u></p> <p>Assurance was given to members by the action being taken by SLH:</p> <ul style="list-style-type: none"> ➤ Re-directed resources ➤ Continuation of stock condition surveys ➤ Established DMC Working Group <ul style="list-style-type: none"> ○ Action Plan – covers 26 themes contained within the spotlight report on damp and mould ➤ Dedicated DMC Team proposal ➤ Reviewed communications and advice for customers ➤ Introduction of a Damp & Mould policy ➤ Further staff training <p>Members requested:</p> <ul style="list-style-type: none"> ➤ A further DMC – BSC Cttee meeting take place mid February 2023. ➤ Language Barriers are considered when reviewing tenant information/website. ➤ Partnership Working was encouraged. <p>Circulation of:</p> <ul style="list-style-type: none"> ➤ DMC presentation ➤ Website information: https://www.stlegerhomes.co.uk/my-home/repairs/stop-condensation-in-the-home/ ➤ Video – Condensation in the Home: https://www.youtube.com/watch?v=A4E17nh5Qao 		
Additional notes for communication to governance:		
None.		

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

Thursday 12 January 2023 at 9.30am

Present

Trevor Mason (TM), Steve Lyons (SL), Cllr Phil Cole (PC).

In Attendance

Chris Margrave (CM) - Director of Property Services, Danny Boardman (DB) - Head of Building Safety, Christine Tolson (CT) – Head of Asset Management, Maxine Johnson (MJ) - Executive Support Officer.

		ACTION
1.	Apologies and Quorum	
1.1	Apologies received from Dave Wilkinson, the meeting was quorate.	
2.	Declarations of Interest by Board Members	
2.1	No declarations were received.	
3.	Regulator for Social Housing - Response Letter	
3.1	Members were advised that the response letter had been submitted on line via NROSH, a data collection website of the Regulator for Social Housing. CM advised that additionally Doncaster Council (DC) had also received a letter in respect of private sector housing, which they had responded to. Subsequently, the regulator had gone back requesting further information.	
3.2	Action: MJ to circulate the final response provided by SLH to the regulator.	MJ
4.	Damp, Mould & Condensation (DMC) update	
4.1	CM reported the media coverage has led to increased enquiries regarding condensation and mould from our tenants. We have redirected resources to help with the increase in enquiries, increased our capacity to inspect homes and have promoted the information we have about how to deal with condensation and mould on our website. He highlighted the large scale of work undertaken by teams and the DMC Working Group presented next on the agenda. He advised future	

updates regarding DMC will be reported directly into the Building Safety & Compliance Committee.

4.2 DMC Presentation

CT gave a presentation that included: What is Damp, Mould & Condensation, St Leger Position, What we are finding, Action taken to date and further action planned.

4.3 During the presentation questions were received from members:

- St Leger Position

4.4 The Chair asked if DMC was more prevalent in any particular architype of property?

CT explained that there is still more work to do in terms of architypes, recent experience has pointed towards it being not limited to any specific dwellings. Damp and mould had been seen in various architypes, and no patterns identified. She had noticed from personal experience one or two geographical areas experiencing high cases, but that was not supported by any data purely observation, when dealing with inspections.

4.5 Members noted that no cases had been classified at category 1 as part of stock condition surveys.

4.6 CT raised concerns over capacity with the current appointment wait time around 6-7 weeks. The Chair asked who carry's out the inspections?

CT advised currently we have repairs Inspectors who sit within the Repairs & Maintenance team, they understand the construction of properties and how to diagnose DMC. In addition, within the Assets Team we have a DMC specialist surveyor.

4.7 • What are we finding?

CT advised most inspections did result in some kind of follow-on work which varied considerably: a lot of cases needed fungicidal treatment, some mechanical & electrical issues, repairing or replacing extractor fans in bathrooms, checking the loft insulation and making sure it had been installed correctly, gutter leaks, pointing etc

She explained the Inspectors do air on the side of caution and are very thorough. Most issues were fairly minor, contained and limited, with some examples of bigger concerns.

However she went onto explain unfortunately, we are increasingly finding that properties are heated to very low temperatures below 16 degrees when 18 degrees is the minimum guidelines suggested up to a comfort temperature of 21 degrees. The feedback from tenants is that they can't afford to put the heating on. CT advised we are engaging our

Tenancy Sustainability team to support tenants with extra benefits. Controversially, there is dissatisfaction with advice being given regarding ventilation and the conflict between cost of energy. It's the reality of what our Inspectors are facing.

CM added there is little information coming out from government in respect of excess cold, which plays a significant part in damp and mould.

Members were informed that data loggers are picking up tenants putting the heating on prior to SLH pre-arranged visits to the property. And the difficult conversations staff were having with tenants, asking them to heat their properties up to at least 18 degrees as well as engaging the Tenancy Sustainability team. It was noted that temperatures of 10.5 degrees had been recorded in some properties.

4.7 The Chair asked, does mould growth increase at those low temperatures (10.5 degrees)?

CM explained, condensation needs to be present for damp and mould to grow. Tenants need to wipe windows down, use extractor fans, keep rooms adequately ventilated and maintain the property to at least 18 degrees room temperature. The issue becomes more prevalent where the home is really insulated and not ventilated.

4.8 Members were then shown photographs of damp and mould cases that SLH had managed or were managing.

- 4.9
- Action Taken To Date
 - a) Reviewed Communications and advice for customers
 - b) Re-Directed existing resources to accelerate damp inspections
 - c) Established a damp & mould working group
 - d) Secured (in principle) additional resources to enhance the service we offer in relation to DMC.

4.10 DMC Team proposal

The Chair asked if the team would have subject matter experts similar to that recruited to the Building Safety team?

CT advised yes, the team would comprise of initially one manager supported by technical inspectors with admin support, to be reviewed in time and if necessary adjusted to meet the needs of the business. She confirmed DMC is now being considered as the seventh compliance area.

CM advised the proposal was being submitted to EMT next week.

4.11 DMC Presentation/Website Information & Video

Action: MJ to circulate:

MJ

- a. DMC presentation
- b. Website information:
<https://www.stlegerhomes.co.uk/my-home/repairs/stop-condensation-in-the-home/>
- c. Video – Condensation in the Home:
<https://www.youtube.com/watch?v=A4E17nh5Qao>

4.12 DMC Working Group (SLH) – Action Plan

CT advised the working group was pulling together a very detailed action plan, that reflected the Housing Ombudsman’s Spotlight report on damp and mould, which sets out 26 recommendations for landlords. She gave examples of what the action plan directly linked into such as training, attitudes and behaviours, PIV (positive input ventilation) - an explanation of a PIV and MVHR (mechanical ventilation with heat recovery) system was given at the meeting by CM.

CM explained the action plan was a high priority and will be fit for purpose with a target date by the end of the month. The aim was to submit it to Board as soon as practicable.

4.13 DMC Further Committee Meeting

Action: TM requested a second single agenda item committee meeting, to review the DMC action plan. MJ to arrange early/mid February 2023.

MJ

4.14 Damp and Mould Policy

CM advised the team have been working on a policy for damp and mould, it’s a light touch and out for comment in draft format to be submitted to EMT shortly with further work to do.

4.15 Language Barriers – Tenant Information/Website

The Chair commented that he had reviewed the information available to tenants on the company’s website, which he thought was very good. He paid reference to the tragic case at Rochdale Boroughwide Housing, where language barriers had caused accessibility issues and asked this to be considered.

CT

4.16 Partnership Working

The Chair also encouraged SLH to look at how it could proactively work with partners ie Doncaster Children’s Trust.

CM

CM advised the work we are doing with Doncaster Council is important in relation to a couple of cases we are managing, where we have exhausted all course of action that can be taken by SLH in terms of the property and Tenancy Sustainability team. We now need to create a group that includes public health and enter into dialogue with the professionals. The group would be specific to more complex cases that needed medical intervention. We want to have a joined up conversation

and clearly explain the measures we have taken and consider other possibilities with partners. Making sure we have a statement in place that we have done everything we can do.

4.17 Capture of DMC Data in C365

DB highlighted as part of C365 implementation, capture of DMC was being considered.

5. **Date and Time of Next Meeting**

5.1 Wednesday 25th January 2023, 10am

Matters Arising from the minutes

Building Safety & Compliance - Action Log						
NO	Month	Ref	Action	Progress	Completed Y/N	Owner
1.	12-Jan-23	3.2	<u>RSH – Response Letter</u> Action: MJ to circulate the final response provided by SLH to the regulator.			MJ
2.	12-Jan-23	4.11	<u>DMC Presentation/Website Info & Video</u> Action: MJ to circulate the DMC presentation, website information & video.			MJ
3.	12-Jan-23	4.13	<u>DMC Further Cttee Meeting</u> TM requested a second single agenda item committee meeting, to review the DMC action plan. Action: MJ to arrange.			MJ
4.	12-Jan-23	4.15	<u>Language Barriers – Tenant Information/Website</u> Consider accessibility issues.			CT
5.	12-Jan-23	4.16	<u>SLH/DC Partnership Working</u> Working Group to be created, where more complex cases can be considered.			CM

Governance Summary Communications Template

Report from:	Building Safety & Compliance Committee			
Date of meeting:	25 January 2023			
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):			
<p><u>1. Health, Safety & Compliance update</u></p> <p>The Specialist Advisor to Committee had provided a series of questions in advance that were answered and debated during the meeting.</p> <table border="0"> <tr> <td style="vertical-align: top;"> <p>Members recognised</p> <ul style="list-style-type: none"> ➤ Completion of the LGSR programme and thanked staff. It was noted that migration of LGSRs to C365 was being carried out, which will be completed by end January 2023. ➤ The excellent performance with 18,898 functioning CO detectors checked @ 31 December 2022. ➤ Damp, Mould & Condensation (DMC) inspections remain high. A report had been approved at EMT recently to establish a DMC team to meet demand. </td> <td style="vertical-align: top; padding-left: 20px;"> <p>Members requested</p> <ul style="list-style-type: none"> ➤ FRA Fire Safety 10yr programme as an agenda item at the next meeting. ➤ By-passing of metres (electric/gas) BN – short briefing note explaining the sanctions available to landlords and whether SLH are using those sanctions. </td> </tr> </table>			<p>Members recognised</p> <ul style="list-style-type: none"> ➤ Completion of the LGSR programme and thanked staff. It was noted that migration of LGSRs to C365 was being carried out, which will be completed by end January 2023. ➤ The excellent performance with 18,898 functioning CO detectors checked @ 31 December 2022. ➤ Damp, Mould & Condensation (DMC) inspections remain high. A report had been approved at EMT recently to establish a DMC team to meet demand. 	<p>Members requested</p> <ul style="list-style-type: none"> ➤ FRA Fire Safety 10yr programme as an agenda item at the next meeting. ➤ By-passing of metres (electric/gas) BN – short briefing note explaining the sanctions available to landlords and whether SLH are using those sanctions.
<p>Members recognised</p> <ul style="list-style-type: none"> ➤ Completion of the LGSR programme and thanked staff. It was noted that migration of LGSRs to C365 was being carried out, which will be completed by end January 2023. ➤ The excellent performance with 18,898 functioning CO detectors checked @ 31 December 2022. ➤ Damp, Mould & Condensation (DMC) inspections remain high. A report had been approved at EMT recently to establish a DMC team to meet demand. 	<p>Members requested</p> <ul style="list-style-type: none"> ➤ FRA Fire Safety 10yr programme as an agenda item at the next meeting. ➤ By-passing of metres (electric/gas) BN – short briefing note explaining the sanctions available to landlords and whether SLH are using those sanctions. 			
<p><u>2. Subject Matter Expert – Gas & Mechanical</u></p> <p>Scott Hibbert, Compliance Officer attended to provide an overview of his role and offer further assurance within his field of expertise: renewable solutions going forward, C365 functionality, Jubilee Court progression and third party auditing.</p>				
Additional notes for communication to governance:				
None.				

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

Wednesday 25 January 2023 at 10am

Present

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

In Attendance

Chris Margrave (CM) - Director of Property Services, Danny Boardman (DB) - Head of Building Safety, Scott Hibbett – Gas and Mechanical Compliance Officer, Maxine Johnson (MJ) - Executive Support Officer.

ACTION

- | | | |
|-----------|--|--|
| 1. | Apologies and Quorum | |
| 1.1 | Apologies were received from Anthony Brown – Specialist Independent Advisor, 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 24 November 2022 and matters arising | |
| | The minutes of the meeting held on 24 November 2022 were approved. | |
| 4. | Safety & Compliance Activity report | |
| 4.1 | DB presented the report that provided an update on all areas of compliance, occupational and building safety health and compliance performance.

He addressed the questions submitted by AB in advance of the meeting, who was unable to attend the meeting. | |
| 4.2 | <u>Gas Servicing</u>

<u>Q. - AB - Ref 2.2</u> - Well done completing the LGSR programme. Just want to confirm that this now means that all properties on the programme have an in-date LGSR?

A. - DB - Our Housing Management says yes we are migrating the LGSRs from the Enterprise System to C365 we have 90 to complete and these will be complete for the end of January 2023 before the new servicing year starts. | |

Q. - AB - Ref 2.3 Are you on track to complete validation of LGSR's and uploading to C365 by the end of January 2023?

A. - DB - The first 3 months of servicing has been issued by the compliance team, and yes we are on track to complete uploading for the end of January 2023.

4.3

CO Detection

AB Comment - Ref 2.5 Excellent performance with 18,898 functioning CO detectors.

Q. - AB - Ref 2.7 On what basis will the decision be taken to replace the CO detection in 2023 [by age / battery operated etc]

A. - DB - Install date recorded manufacturers recommendation for replacement and failure rate. Suggested 10 years replacing at 9 to avoid faults.

Q. - Ref - 2.13 What is the plan to gain access to the 2 properties out of compliance due to tenant access issues.

A. DB - This relates to the unvented cylinder and Scott Hibbett, Subject Matter Expert (SME) - Mechanical & Electrical is following this up but he now has both records.

4.4

EICR Testing

Q. - AB - Ref 3.3 Check numbers: programme = 19,946 | EICR's = 19,938. A difference of 8

A. - DB advised LDougan was checking and making any corrections.

LD

Q. - AB - Ref 3.3 Confirm we are prioritising 23 EICR's > 10yrs [these are Non Compliant] v properties > 5yrs which are outside of best practice.

A. - DB - Yes we are.

Q. - AB - Ref 3.3 What is the realistic target EICR completions for this year versus programme of 2,715?

A. - DB - We are in the hands of contract labour, new contractors have been identified and procured. We can't deliver this number in year so a program and paper is being prepared for EMT.

DB to report back at next meeting dependant on outcome of procurement exercise.

DB

Q. - AB - Ref 3.3 From the EICR's: for C1, C2, C3, FI faults - what is the current position [jobs outstanding] with the work programme and are these all in management?

A. - DB - we have no outstanding C1 or C2 faults. C3 faults inform future programs. Electrical SME will consider the number of C3's.

DB gave an explanation of the three categories:

C1	Immediately dangerous and results in isolation, rectify straight away.
C2	Requirement to rectify within 48 hours.
C3	Advisory notice.

Q. - AB - Ref 3.4 Will the remaining communal EICR's [36] be completed by year end?

A. - DB – Yes.

Q. - AB - Ref 3.6 It is good to see the table - could we colour code those where the EICR has been completed and you are awaiting the certificate. This will give greater oversight of risk [request].

A. - DB - Yes we can include colour coding in the next report.

DB

Q. - AB - Ref 3.6 Have we completed Flat 20 Osberton Street?

A. - DB – Yes, but awaiting certificate.

4.5

Fire Safety

Q. - AB - Ref 4 - Is SLH fully compliant with new legislation contained in Fire Safety Regs which came into force 23 January 2023. If not, what is the target for full compliance?

A. - DB - a paper is being presented to Building Safety Group on Thursday 26 January, and will be presented at the next Building Safety & Compliance Committee meeting. We have 122 FED which need to be replaced in our high rise residential buildings (HRRBs).

DB

Q. - AB - Ref 4.7 FRA Fire Safety 10 yr Programme - I have not seen the final paper to EMT or results of the wider stakeholder consultation; however, this will be a key area of risk for the business and needs careful consideration and assessment of risk on a property by property basis. Issues such as the appropriateness of the fire strategy [where actions are outstanding] should be fully explored for each building. Particularly for Level 1 buildings.

Building Safety & Compliance should have full oversight of this evaluation.

A - DB - This Programme will be an agenda item at the next Building Safety & Compliance committee, and circulated following this committee

DB

meeting.

Stakeholder involvement and consultation has taken place at the Building Safety Committee with representation from the RP, AP and Enforcing Agencies. Progress against the program will be provided annually in the performance report.

4.6

Water Management

Q. - AB - Ref 6 - From your ongoing water testing/ sampling, have you had any positive legionella results in the last 12 months?

A. - DB – No we haven't had a positive result in the last 12 months.

Lift & Residential Equipment Management

Q. - AB - Ref 7.8 More detail is required on how SLH will bring residential LOLER inspections back on track.

A. - DB - the SME and Lift Consultancy are working on this, they have rationalised and confirmed the asset register and have confirmed the presence of Lifting Operations and Lifting Equipment Regs (LOLER) and Provision and Use of Work Equipment Regs (PUWER) inspection/* sheets by the insurers and the maintenance contractor.

Action: Outcome to be included in the next monthly performance report.

DB

4.7

Statutory Health & Safety Training

Q. - AB - Ref 8 - Asbestos - high levels of non compliance: it is noted that there are courses available over the next couple of weeks - are non compliant staff being organised to attend?

A. - DB - no the TNA has been reviewed and the attendees have been rationalised, those which require training and have not attended have been prioritised.

Q. - AB - Asbestos - do we have systems in place that provides assurance/ control that our contractors staff have completed mandatory health and safety training.

A. - DB - Yes these were all checked at the procurement stages and spot checks are undertaken by the asbestos management team.

Q. - AB - Whilst I have seen asbestos training results, do we have results for HAV's and Working at Heights [in terms of compliant and non compliant].

A. - DB - The H&S Manager is working with the OD team to evaluate current records and seek assurance that training is being evidenced.

Action: Include results in future performance papers.

DB

4.8 General Assurance

Q. - AB - For our compliance inspection programmes across Big 6, can we start seeing outcomes from our ongoing quality assurance [in-house and 3rd party]

A. - DB - Of course there are only three presently which are Morgan & Lambert who provide assurance for the electrical and mechanical assurance activities including WiP (Work in Progress) audits, TUV-SUD related to passenger carrying lifts and residential lifting equipment and the work completed by Savills related to fire safety and the retained expertise we have from IFE registered John Herbison.

4.9 Point 3.5: Table 4 – EICRs over 10 years old

DB advised we contacted peer groups, one of which provided example letters from a solicitor, to send out to residents. The use of a different section of the law was being used. We gave those letters to DC Legal department for review, now all 23 properties have received a letter to gain access into the property.

CM added we will monitor the success we get from this letter drop.

4.9.1 DW asked - Does the letter look to re-coupe any costs?

DB advised it says 'may'.

4.9.2 TM asked - What do we know about the tenants?

DB explained it was a mix of age generations with tendencies such as hoarding, mental health issues and agoraphobic behaviour. The Electrical Compliance Officer had visited all 23 properties and in some cases, had moved furniture. Everything was being done, that we could possibly do, in order to ensure the EICR test was carried out.

DB added when we go to court now we apply for an injunction for the 'whole of life of tenancy', so that we don't have to re-apply to the courts.

4.9.3 TM commented anyone with complex issues, who receives the letter - may not have the impact we'd hoped for. He was pleased to hear SLH working with tenants positively in this way, which was likely to have a more successful outcome.

CM raised when we get to the more complex needs cases, it's getting to the point when the tenant is ready and feels 'strong' enough to allow us access. It can be about getting the right day and the right time. DB gave an example where a tenant was nursing his brother at home which involved ventilators and medical equipment.

4.9.4 DB advised unfortunately he wasn't in a position to give a realistic

timescale for completion of the EICRs over 10 years, due to the nature of the issues discussed.

4.9.5 CM raised that in terms of EICRs we have appointed 3 local contractors based on quality of work which has delayed the procurement process. We will be issuing work over the next few weeks which will include consumer upgrades too. The programme has been delayed, but for good reason.

4.10 10 - Damp, Mould and Condensation (DMC)

CM advised demand for DMC inspections remains high, we are working through cases on a triage basis with appointment dates into February 2023. Outcomes from the majority of cases are low level which can be treated using a fungicidal wash, others may require property repairs such as guttering or replacement of extractor fans.

CM advised that SLH was currently working closely with three families to ensure they had all the support that they needed.

CM highlighted that a report had been approved at EMT recently, to establish a DMC team to meet current demands.

4.11 4.11 - Residential - Fire Barriers

CM raised planning applications have been submitted and are progressing for Tickhill, Armthorpe and Thorne.

There has been some opposition to the fire barriers, and there is some consideration in relation to access and egress issues for certain living accommodation. He said, we do have a 'plan b' which is a curtain sprinkler system - aesthetically the system is virtually invisible to the eye however, there are cost implications at £0.5m. He said our options are limited and we continue to refine the price down with the supplier.

4.12 8.2 - RIDDOR, Incidents and Accident Update - Violence and aggression

Action: DB to forward to TM detail around the 6 incidents for violence and aggression.

TM commented on the high number, DB confirmed that the figure is lower than usually reported.

4.13 **Members noted the Safety & Compliance report.**

5. Subject Matter Expert – Gas and Mechanical

5.1 SH joined the meeting to give members an overview of his role.

Renewable solutions going forward

Members noted that most boilers come hydrogen ready, and SH

DB

suggested that hydrogen is likely to be where the industry will steer towards. He highlighted the H21 Pilot at Colton, Leeds – whereby 10,000 homes were fuelled by hydrogen as part of the pilot in addition to another project H2 at Teesside. SH pointed out the significant costs implications for landlords associated with ASHP.

C365 Functionality and Round up

SH advised manual upload of certificates to C365 currently takes place, with a view to being fully automated and gave an overview of current compliance using the C365 dashboard. Members noted the meeting arranged next week with Wakefield District Housing (WDH) to share best practice.

Jubilee Court progression

SH further advised the bio mass district heating boiler at Ennerdale provides heating and hot water to properties at Ennerdale and Jubilee Court. Following a suggestion by himself, the system has been zoned off to reduce approximately 40 properties affected by any failures. Members also noted that upgrade work had been carried out to the biomass boiler itself. The use of a drone is used to detect any heat dissipation.

Third Party Auditing

Members noted that Morgan and Lambert carry out third party auditing for the organisation. Audits are carried out on a quarterly basis with Auditors carrying out site visits across the city along with SLH Engineers, in addition to reviewing internal audit processes.

5.2 Members were pleased to receive the overview.

6. Fire Safety Regulations

6.1 **Action:** DB to bring the Fire Safety Regulations briefing note to the next committee meeting.

DB

7. High Rise Engagement Group minutes

7.1 CM advised that due to low attendance he would be taking the agenda to the tenant groups for discussion, although the long term plan was for the High Rise Engagement Groups to remain.

Balby Bridge (24 Nov 22)

Members noted the minutes.

Intake (24 Nov 22)

Members noted the minutes.

9. Date and Time of Next Meeting

9.1 Wednesday 17 May 2023

Matters Arising from the previous minutes

Building Safety & Compliance - Action Log						
NO	Month	Ref	Action	Progress	Completed Y/N	Owner
1.	Sep-22	3.2	<p>Safety & Compliance Activity Report</p> <p><u>No Access - Court Costs</u> Review court costs so they are passed onto tenants and not picked up by SLH.</p>	Currently being reviewed by Housing Management teams.	In progress	DB
2.	Sep-22	4.3a	<p><u>Electrical By-pass Example</u> Enforcement example with outcomes to the next meeting</p> <p>Noted - Housing Services colleagues haven't carried out enforcement of an electrical bypass to be able to provide an example.</p>	<p>25-Jan-23</p> <p>Members requested a short briefing note from the Director of Housing & Customer Services explaining what sanctions are available, and are we imposing those sanctions.</p>	N	DB/MMc
3.	Sep-22	7.4	<p><u>Tenant Awareness</u></p> <ul style="list-style-type: none"> • Social Media • Tenant sign-up information pack – guidance sheet <p>Further detail in the minutes.</p>	CO detector leaflet to be circulated to BS&C members by Head of Building Safety.	N	DB
4.	Sep-22	14.1	<p>JSC mins 14.07.22</p> <p><u>Statutory Training Statistics (%)</u> Percentage of staff who have completed this training, to be provided at the next meeting.</p>	Head of Building Safety advised he had recently received information from the Head of HR & OD and would share it with members.	Y	DB
5.	Nov'22	4.4	<p>FRA Fire Safety – 10yr Programme</p> <p>Head of Building Safety to</p>	10yr proposal discussed with Building Safety Grp (DMBC)	Y	DB

			<p>consider dialogue with insurers and consultation with stakeholders before taking the 10 year proposal to Board for consideration.</p> <p>Consulted Savills can be closed</p>	<p>stakeholders including – SYFRS in attendance at meeting.</p> <p>EMT paper scheduled for 13.12.22.</p>		
6.	Jan'23		<p>Housing Ombudsman – Leeds City Council Maladministration (DMC)</p> <p>The Chair asked that any learning points are considered.</p>	<p>Item placed on the agenda for next DMC working group.</p>	Y	MJ/CM

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Governance Summary Communications Template

Report from:	Building Safety & Compliance Committee	
Date of meeting:	20 February 2023	
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):	
<u>1.Damp, Mould & Condensation</u>		
At this meeting members were informed of the demand and outcomes of inspections:		
<u>Between 1 Nov 21 - Jan 23</u>		
<ul style="list-style-type: none">• 758 x category 2 hazards were identified• 3 x category 1 hazards were identified (2 x stock condition surveys, 1 x customer contact)		
Members were pleased with progress to date and noted the planned pro-active approach to inspections over the summer months in preparation for the autumn/winter period as well as further data analysis to look for trends.		
Members were assured of the measures in place and were happy to receive future DMC updates via the Health, Safety & Compliance performance report submitted to Building Safety Committee.		
Additional notes for communication to governance:		
None.		

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

Thursday 20 February 2023 at 3.30am

Present

Dave Wilkinson (DW), Trevor Mason (TM), Steve Lyons (SL)

In Attendance

Chris Margrave (CM) - Director of Property Services, Danny Boardman (DB) - Head of Building Safety, Christine Tolson (CT) – Head of Asset Management, Maxine Johnson (MJ) - Executive Support Officer.

ACTION

- | | | |
|-----------|---|--|
| 1. | Apologies and Quorum | |
| 1.1 | Apologies were received from Cllr Phil Cole and the meeting was quorate. | |
| 2. | Declarations of Interest by Board Members | |
| 2.1 | No declarations were received. | |
| 3. | Minutes and Matters arising from previous meeting held on 12th January 2023 | |
| 3.1 | The previous minutes were agreed as a true reflection. | |
| 4. | Damp, Mould & Condensation (DMC) update | |
| 4.1 | CM highlighted that damp, mould and condensation was being robustly managed by the organisation and now considered the seventh area of compliance - reported in the Health, Safety & Compliance update to Building Safety Committee (BSC) and Board. | |
| 4.2 | CT presented a DMC update and members noted:

<u>St Leger position as at 20 February 2023 – slide 2</u> <ul style="list-style-type: none">• 2,033 customer requests for a damp inspection between 1 December 2021 and 19 February 2023, relating to 1,753 properties.• 503 of the 2,033 have been since 1 January 2023.• Demand in January 2023 approx. double of that in January 2022.• From 20 February 2023 onwards: 448 damp appointment inspections currently booked in that are still to be attended.• Earliest inspection appointment for a tenant calling in on 20 February is currently 11 April 2023. | |
| 4.3 | DW asked if the inspections had been prioritised in anyway? | |

CT advised not currently, however it the intension was to do this - which is on the action plan to triage and prioritise cases.

4.4 Inspections logged since December 2021 – slide 3

Members were shown a graph which detailed the number of inspections since December 2021 to February 2023, demonstrating significant recent demand when compared to the previous year. CT explained we have an opportunity to catch up and work proactively prior to Autumn/Winter 2023.

4.5 St Leger Position – slide 4

Demand (Proactive)

- From stock condition surveys completed between November 2021 and January 2023:
 - 2 category 1 hazards identified
 - 758 category 2 hazards identified (551 slight and 207 moderate). CT can be quite minor, and could just be evidence of a previous leak, penetrating damp or spots of mould. Over spring/summer months we need to focus on those 758 properties.

All cases require further follow-up

- Through customer contact: 1 category 1 hazard identified. (Tenant has been re-housed).

4.6 TM asked – if we knew of the above cases, why wasn't this reported to either BSC or Board?

CT advised that the organisation had only just started to receive the stock condition survey information back from Savills, with whom it had engaged to carry out the work over the past 15 months.

CM highlighted 6,000 stock conditions surveys in 15 months was a lot of data to review. However, the 758 category 2 hazards were not an area for concern, he drew members attention to the 3 category 1 hazards advising these were the cases being closely managed. Nevertheless, he said we are not seeing levels that some organisations are dealing with.

CT added there is an element of customer demand driving this, but also in addition we are looking at what we can do to alleviate and mitigate issues associated with damp, mould and condensation.

4.7 What we are finding – slide 5

- Most inspections are resulting in some follow on works being raised.
- Most issues minor, but some examples of bigger concerns being identified.
- Number of properties with air temperatures below 16 degrees. 14 out of 25 inspections carried out in January that were analysed

showed temps below this – 3 of 10 degrees or below.

- Pockets of dissatisfaction with advice being given regarding ventilation and the conflict between cost of energy.

4.8 SL enquired – is there any guidance regarding thermal comfort for households working throughout the day?

CT advised what we advise tenants is try and heat the property to 18 degrees, with an absolute minimum temperature of 16 degrees.

4.9 DW asked if there was any guidance from the regulator as to where they would look to apportion blame in complex cases?

CM advised once we have exhausted dealing with the property (repairs, follow on work), engaging the Tenancy Sustainability Team and adhering to the recommendations put forward by the housing ombudsman service, the only other option is increased energy usage. There are some additional payments that can be applied for, but they are minimal and a one off short payment – which is a very short term measure. A multi-partnership group approach is where more serious cases are being taken to, to ensure all avenues are considered and exhausted.

4.10 Referring to recent media DW asked – do utility companies have a legal requirement to notify us of a forced entry to fit a prepayment meter?

CM advised no, it's only the incoming supply that SLH are responsible for. It was noted there had been a slight increase seen in tenants capping off the gas, which was an emerging national housing picture not that just seen by SLH.

4.11 What we are finding – slide 6

- Most inspections are resulting in some follow on works being raised. Of 80+ inspections carried out before Christmas that we have analysed:
 - 211 different jobs raised
 - Top 10 type of jobs were: check loft insulation (20), renew extractor fan (17), renew external pointing/repoint brickwork (14), hack off and re-plaster wall (13), mould wash/treat mould (12), asbestos checks (10), repoint brickwork/wall (10), clean out gutter (9), gutter renewal (7), refit skirting (7), reseal windows/doors/bath/shower screen/WHB (6).

4.12 Members were then shown photographs from usual damp and mould inspections.

4.13 Recent Activity & Progress – slide 9

- 429 inspections completed since 01 January 2023.
- Draft Action Plan Developed
 - Covers 26 themes of the 'spotlight on D&M report'

- Covers broad range of issues including: culture, policy, approach, data, communication, training & competency
- Damp & Mould Policy Development Progressing Well.
- DMC team – Interviews for dedicated Damp & Mould team to commence w/c 20 February.
- Demand still more than previous years, but starting to subside.

4.14 TM asked what budget provision have we had to make?

CM advised £0.5m of additional resources have been given by Doncaster Council. Impacts on the team, have been the surveying capacity has been moved over, who were carrying out stock condition surveys. 500 stock condition surveys will be taken care of in the next financial year and form part of future budget proposals. He added the Director of Housing & Customer Services has also submitted future budget proposals due to increased pressures on the Tenancy Sustainability Team.

4.15 Next 6 months – slide 10

- Sign-off, formal adoption and delivery of action plan
- Appoint, induct and embed new dedicated team
- Policy finalised, approved and implemented
- Clean up data & introduce performance reporting
- Further data analysis to look for trends
- Cross-company training developed and introduced
- Review and enhance communications
- Undertake pro-active inspections over summer
- Winter preparedness

4.16 CT advised the organisation had done a lot of work around Communication. For tenants where English might not be their first language, she would be reviewing tenant information/website around DMC.

4.17 TM asked if SLH would be releasing a public press briefing?

CM advised there were no plans to do this, it was anticipated a DMC article would be placed in the autumn 2023 edition of HouseProud.

4.18 DW asked - are there property types more prevalent to DMC?

CT advised she had done some crude analysis – a lot of properties were bungalows, but it was not clear whether this was down to the tenants residing in them. Across the city SLH was also experiencing greater demand for inspections in the central area and Mexborough – again no further analysis had been carried out as yet to drill down and understand the reasons why.

4.19 TM asked if any families had been re-housed due to DMC?

CT advised of only one specific case whereby due to the vulnerabilities

of the tenants, overcrowding and the level of work needed to remedy the issues, work couldn't be carried out with the family in situ.

CM advised of a specific case where the daughter had poorly controlled asthma, the family were adamant that the roof was leaking, letters had been received from the family GP/consultant implicating the property. Following inspection this proved not to be the case. Consideration was given to temporarily moving the family, but given the low level nature of the DMC a decision was made not to decant the family.

4.20 Members noted the DMC update and agreed going forward to receive future updates reported through the Health, Safety & Compliance update to BSC.

Action: DW asked that the BSC terms of reference are checked to ensure the proposed recommendation of reporting DMC to BSC met the governance decision making framework.

CM/MJ

5. Date and Time of Next Meeting

5.1 Wednesday 17th May 2023, 10am

Matters Arising from the minutes

Building Safety & Compliance - Action Log						
NO	Month	Ref	Action	Progress	Completed Y/N	Owner
1.	12-Jan-23	3.2	<u>RSH – Response Letter</u> Action: MJ to circulate the final response provided by SLH to the regulator.	Filed in Convene document library.	Y	MJ
2.	12-Jan-23	4.11	<u>DMC Presentation/Website Info & Video</u> Action: MJ to circulate the DMC presentation, website information & video.	DMC presentation filed in Convene document library.	Y	MJ
3.	12-Jan-23	4.13	<u>DMC Further Cttee Meeting</u> TM requested a second single agenda item committee meeting, to review the DMC action plan. Action: MJ to arrange.		Y	MJ

4.	12-Jan-23	4.15	<p><u>Language Barriers – Tenant Information/Website</u></p> <p>Consider accessibility issues.</p>	CT
5.	12-Jan-23	4.16	<p><u>SLH/DC Partnership Working</u></p> <p>Working Group to be created, where more complex cases can be considered.</p>	CM
6.	12-Feb-23	4.20	<p><u>BSC – Terms of Reference</u></p> <p>DW asked that the BSC terms of reference are checked to ensure the proposed recommendation of reporting DMC to BSC met the governance decision making framework.</p>	CM/MJ

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