

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

**To be held at 1:30pm on Thursday 7 October 2021  
Via Microsoft Teams**

**AGENDA**

- |   |  |                             |                         |
|---|--|-----------------------------|-------------------------|
| 1 | Apologies and Quorum – ( <i>Susan Jones /Joe Blackham</i> )      |                             | <b>Verbal</b>           |
| 2 | Declarations of Interest by Board Members                        |                             | <b>Verbal</b>           |
| 3 | Minutes of the meeting held on 5 August 2021 and matters arising |                             | <b>Enclosed</b>         |
| 4 | Chair and Chief Executive's update                               | D Wilkinson &<br>D Richmond | <b>To be circulated</b> |

***Policy and Strategy Items***

- |   |  |            |                 |
|---|--|------------|-----------------|
| 5 | ICT Strategy update                    | J Crook    | <b>Enclosed</b> |
| 6 | Annual Development Plan – Current Year | J Crook    | <b>Enclosed</b> |
| 7 | Corporate Plan Review                  | D Richmond | <b>Enclosed</b> |

***Financial and Performance***

- |   |                               |                                     |                 |
|---|-------------------------------|-------------------------------------|-----------------|
| 8 | Health, Safety and Compliance | C Margrave                          | <b>Enclosed</b> |
| 9 | KPI Performance               | J Crook/<br>C Margrave/<br>J Davies | <b>Enclosed</b> |

***For Information***

- |    |   |  |                 |
|----|---|--|-----------------|
| 10 | Committee Annual Reports:   |  | <b>Enclosed</b> |
|    | <ul style="list-style-type: none"><li>• Audit &amp; Risk</li><li>• Performance &amp; Improvement</li><li>• Employment &amp; People</li><li>• Building Safety and Compliance</li></ul>     | T Mason<br>S Booth<br>D Wilkinson<br>D Wilkinson |                 |
| 11 | Committee minutes for noting:   |  | <b>Enclosed</b> |
|    | <ul style="list-style-type: none"><li>• Performance &amp; Improvement (1 Sep)</li><li>• Employment &amp; People (14 Sept)</li><li>• Building, Safety &amp; Compliance (21 Sept)</li></ul> | S Booth<br>D Wilkinson<br>D Wilkinson            |                 |
| 12 | <i>Date of next meeting</i><br>2 December 2021 at 2pm   |  |                 |

Company Number 05564649  
A Company Limited by Guarantee  
Registered in England

**St. Leger Homes of Doncaster Limited**

**BOARD MEETING**

**Via MS Teams**

**5 August 2021**

**Present:**

Trevor Mason (Chair), Susan Jones, Anthony French, Steve Lyons, Phil Cole, Richard Allan Jones, Stuart Booth, Dave Richmond.

**Also In Attendance**

Julie Crook (Director of Corporate Services), Chris Margrave (Director of Property Services), Jane Davies (Interim Director of Housing and Customer Services), Maxine Johnson (minutes).

**Members of the public**

Brenda Lennon (partial).

	<b>Action</b>
<b>1 Apologies and Quorum</b>	
1.1 Apologies were received from Dave Wilkinson, Joe Blackham and Sam Bartle.	
<b>2 Declarations of Interest by Board Members</b>	
2.1 There were no declarations of interest.	
<b>3 Minutes of the meeting held on 6 July 2021 and matter arising</b>	
The minutes were agreed as a true reflection with matters arising detailed within the table at the end of the minutes.	
<b>4 Chief Executive and Chair update</b>	
4.1 <u>Covid 19 update</u>	
Members noted that Executive Management Team (EMT) would be reviewing government guidance at their meeting on Tuesday 10 August regarding the proposed changes to the rules around self – isolation. EMT would also consider scope for lifting further restrictions throughout the organisation.	
It was noted that the next scheduled Board meeting and AGM on 7 October would take place face to face.	

#### 4.2 Materials Shortage

The Chief Executive acknowledged the organisation was experiencing a shortage of building related materials, which was impacting the whole of the housing sector. He said it's a changing situation that affects various works in different ways.

#### 4.3 Director of Housing and Customer Services Recruitment

The Chief Executive was pleased to announce Mark McEgan has accepted the offer of appointment to Director of Housing and Customer Services. He commences with the organisation on 1 November 2021. In the interim period Jane Davies, our Head of Housing Management will be covering the role.

#### 4.4 Agile Working

Members noted that discussions continued with staff and managers following the launch of the Agile Working Principles.

This now includes consideration of policies that are impacted by a shift towards a more agile approach: mileage and expenses, working from home and flexible working time. Proposals are being drafted and will form the basis of consultation. In some instances this may involve a closer alignment with Doncaster Council's (DC) policies.

#### 4.5 The One Project Update

Members noted the project is going well and is on track for the revised go-live date of 18<sup>th</sup> October.

#### 4.6 Policy Update

Members were advised since the last Board meeting EMT have approved the following policies: Code of Conduct, Data Protection Policy and Stock Management (Materials) Policy.

#### 4.7 Procurement Services and Activity

The Chief Executive acknowledged appendix A of the report that provided Board with a regular update identifying all current ongoing procurement activity.

#### 4.8 **Board noted the contents of the report.**

### **5 Strategic Risk Register**

5.1 The Director of Corporate Services presented the report that considered the Strategic risk position at the end of Quarter 1 - 2021/22.

It was noted a full review of the Strategic Risk Register (SRR) was undertaken within individual Directorates during quarter 1 2021/22 and also collectively by Leadership at their meeting on 1 July 2021 following Board comments.

It was further noted no risks have been added or removed but there have been updates to causes, effects, controls, assurances and actions. Additionally, the format of the SRR now includes an additional set of ratings to show a new forecast residual risk score.

- 5.2 One member raised that on a number of the risks, particularly 6 and 7 the new 'forecast residual rating' had not reduced the 'current residual rating' and asked for further clarification. He said it looks to be a negative view if we don't slightly reduce the 'forecast residual rating' after taking into account planned controls and completed actions.

The Director of Property Services advised there is only so much of that we can manage from a technical perspective to mitigate the risks and gave sanitising the communal areas as an example. We manage the areas very well and are effective at removing any items that are left however, it is this human element that at time is unpredictable.

- 5.3 The Chair said as a Board we feel the organisation has identified the correct risks however, its view is the scoring of some of those risks are a little cautious.

5.4 **The Board noted the update of the Strategic Risk Register**

**6. Asbestos Management Policy and Plan**

- 6.1 The Director of Property Services advised that Pennington Choices were commissioned to undertake a review of asbestos activities at SLHD to help assist with the provision of the policy and plan.

He advised policy principle workshops were held, involving key staff which led to a number of key decisions and policy principles being agreed that have subsequently formed the basis of the new asbestos policy and asbestos management plan.

He said the policy and plan sets out how we are to meet our legal obligations and establishes for operational teams the processes required to be compliant.

Members noted the policy is due for review in two years unless there is a requirement due to regulation changes. The plan however, needs to be reviewed after 12 months to ensure it is fit for purpose.

- 6.2 The Chair queried why the policy/plan stated the organisation 'may' provide tenants with an asbestos report and not 'will'?

The Director of Property Services advised we wouldn't be able to provide a report to all tenants based on the quality of data that we currently hold.

6.3 It was noted as part of the service re-alignment there are 5 subject matter experts one of which is dedicated to asbestos.

6.4 A member queried why there were several references to tenanted homes being treated as 'work places'?

The Director of Property Services advised 'work places' brings the tenanted homes under the Control of Asbestos Regulations (CAR) 2012, to allow for any intrusive work or surveys to be carried out.

6.5 **Board approved the newly drafted Asbestos Policy and Asbestos Management Plan.**

## 7. **Asset Management Strategy 2021 - 2024**

### 7.1 Introduction

The Director of Property Services advised we have been working closely with Savills to understand the challenges of Net Zero and how this would impact both the Asset Management and Environmental Strategy (next on the agenda). Both strategies have links to Carbon Zero which is only one of the challenges. Extensive consultation has been carried out where feedback and comments had been taken into account on both strategies.

7.2 He explained the Asset Management Strategy comes at a time of great change; Social Housing White Paper, Fire Safety Act 2021 and the Building Safety Bill are challenging the housing sector to change the way it builds and manages people's homes.

The strategy is developed on 8 key priority areas with an emphasis on building safety: safe, energy efficient, sustainable, resilient, well placed, modern, digitally included and contributing.

7.3 The Chair referred to 5.9 of the report highlighting in some situations we may choose not to invest in a property due to the cost viability – he asked if the result of non-investment would mean demolition?

It was noted each property would be considered on a case by case basis.

7.4 The Director of Corporate Services said it is envisaged the initiatives in the short term strategy (2021 – 2024) can be achieved, however funding beyond these years will be very challenging. The

organisation will be in a better position to forecast costs over the next 12-18 months once the property data has been refined.

A lengthy discussion took place regarding the Net Present Value (NPV) of a property and viability costs. Additionally, the requirement to carry out full and detailed stock condition surveys over the next 12-18 months.

The Chair summarised by asking that stock condition survey timescales are incorporated into the strategy and he highlighted the importance of starting them asap. He said Board recognise the implications of viability costs and the associated management costs as well as the need for buy in from the tenants for the surveys to be carried out in their homes.

CM

7.5 **Board approved the Asset Management Strategy 2021 – 2024.**

**8. Environmental Strategy 2021 - 2024**

8.1 The Director of Property Services advised the strategy focuses on eight key priority areas and has a number of ambitions targets such as Net Zero Carbon.

Over the lifetime of the 3 year strategy, the organisation has committed to:

- Year 1 – Undertake detailed design and technical appraisal of building archetypes.
- Year 2 – Trial technical solutions at pilot scale.
- Year 3 – Develop a long term investment plan and procurement strategy.

8.2 Affordable Warmth

He advised the organisation will continue to invest in heating upgrades to be on target for all homes to be minimum EPC 'C' by 2030 to reduce fuel poverty.

8.3 He further explained what the organisation had committed to in terms of: resilience to climate change, raising awareness amongst customers, innovation and technology, biodiversity and sustainability.

8.3 The Chair commented on the excellent report and welcomed questions from other members.

8.4 The Director of Corporate Services highlighted whilst it is envisaged that the initiatives in the 3-year strategy can all be achieved within existing budgets, funding beyond the 3-years has its challenges – with a funding gap to deliver what is required.

The Director of Corporate Services to include future financial challenges beyond 2024 within the strategy. **JC**

- 8.5 A member asked if a viability study had been carried out to identify any high risk properties for flooding?

The Director of Property Services advised that some flood defence measures had been carried out in the borough, however national consideration also needs to be taken into account – as flood defence work in one area can potentially affect another.

8.4 **Board approved the Environmental Strategy 2021 - 2024**

9. **Health & Safety Strategy 2021 - 2025**

- 9.1 The Director of Property Services presented the newly developed Health and Safety Strategy that sets out SLHD's overall commitment to health and safety and the key policy principles it will adopt in order to meet its legal obligations.

Referring to point 5.5 of the report he advised the strategy will span a period of 4 years, from 2021-2025 and is centred around the 5 key themes.

Members noted to facilitate delivery, an action plan will be developed with progress reported to board annually and six monthly to Building Safety & Compliance Committee.

- 9.2 The Chair raised that now agile working is being implemented throughout the organisation, the health & safety risk is being dispersed. He sought assurance that all staff are skilled to the appropriate level.

The Director of Property Services advised staff are used to dispersed and lone working. The organisation uses a tracker and appointment system and is in regular contact with colleagues throughout the day. However, he did feel there could be some additional potential measures to explore around lone working. He said we need to ensure staff are trained appropriately.

- 9.3 Agreement was reached to bring the high level action plan referred to at point 5.6 of the report to Building Safety Committee within the next quarter. **CM**

- 9.4 Another member queried if there were any concerns regarding the 5 key themes?

The Director of Property Services advised there were no concerns and emphasised the importance he placed on embedding a health & safety culture throughout the organisation.

9.5 Another member shared his experience of an estate walk and the housing staff involved benefiting from further health & safety training. The same member requested an estate walk programme and also highlighted issues when trying to complete an incident report on the SLHD website following the estate walk.

JD

**9.6 Board approved the newly developed Health & Safety Strategy.**

## **10. Review of the Fairness and Equality Statement**

10.1 The Interim Director of Customer Services advised the Fairness and Equality Statement has been reviewed following a recommendation that SLHD adopt the Islamophobia and Antisemitism definitions, both of which have been adopted by DC. Only minor amendments have been made to the Statement.

Members noted benchmarking has been undertaken with other organisations such as Your Homes Newcastle, Six Town Housing etc when considering revisions and to take on board best practice.

10.2 One member asked that the imaging on the front cover page of the statement is reviewed - particularly the bottom left image.

JD

**10.3 Board approved the revised Fairness and Equality Statement.**

## **11. Key Performance Information**

11.1 The Director of Corporate Services presented the report that provided Board members with the KPI dashboard as at 30 June 2021 – quarter 1, 21/22 and brief commentary.

Referring to page 3 of the report she said commentary has also been included for the 3 homeless indicators where we had agreed not to set a target for the early part of the year.

11.2 The Chair commented his view was that the figures overall this year were going to show a 'recovery year' rather than see any significant improvements.

The Chief Executive advised whilst we are not on target for a number of indicators the travel of direction is in the right direction, the majority are improving however slower than we anticipated. We have focused on specific issues such as fire doors to ensure we have done all we can do to keep high expectations. It can be frustrating at times but we know staff are working hard.

11.3 The Director of Property Services highlighted the issues experienced in terms of voids: shortage of materials, delays waiting for the delivery



of non-stock items and a reduction in resources due to isolation or Covid-19.

A member sought assurance that staff motivation was being managed, so staff are not feeling disappointed when targets can not be met. She said it's about being realistic and making sure staff are not impacted by this.

**11.4 Board noted the KPI dashboard at at 30 June 2021.**

**12 Revenue Monitoring**

12.1 The Director of Corporate Services presented the quarter 1 report as at 30 June 2021.

She said after three months an overall deficit for the year of £231k is projected. This comprises a surplus on Housing Revenue Account (HRA) operations of £15k and a £246k deficit on Housing Options activities, which are funded from the General Fund. Approval of additional Management Fee from the General Fund is anticipated and is included within the Council's Q1 report.

Referring to 3.4 of the report she highlighted the need for Board approval under SLHD's Scheme of Delegation with regards to postponed electrical testing work and stock condition survey work. Each being in the region of £600k over a two year period – circa £1.2m in total.

12.2 A member queried why the stock condition surveys hadn't been accounted for?

The Director of Corporate Services explained that the recent refresh of the Asset Management Strategy and Environmental Strategy has highlighted the need to hold good quality data and a greater depth of data. The data will also enable us to do a much better future investment plan.

It was noted there was no opportunity to capitalise the above costs.

The Director of Corporate Services anticipated that costs this current year would be in the region of £600k for the surveys. She said if the organisation couldn't find the funding it would be a strategic issue. Members noted DC were fully aware of the situation.

12.3 The Director of Property Services added that in respect of the electrical testing programme there is no legislation that stipulates testing is carried out every 5 years. Therefore, if the money cannot be sourced to do this, the programme could be pushed back to carry out testing every 10 years.

12.4 There was general consensus from Board members that they accepted the stock condition survey work and the electrical testing work needed to be done. Although they recognised the need to find a solution to financing both works.

12.5 **Board noted the Revenue Monitoring report as at 30 June 2021 and approve the unbudgeted expenditure on stock condition surveys and electrical testing works, subject to the funding being identified.**

### **13. Capital Monitoring**

13.1 The Director of Corporate Services presented the report as at 30 June 2021. Members noted the reported projections at quarter 1 showed the planned, in-year spend on the Housing Capital Programme would be £28.20m, an underspend to budget of £7.15m.

She explained the largest variance is on the new build programme seeing significant delays. Additionally, one of our main contractors has abruptly ceased works and we are currently in negotiations with them.

13.2 The Chair commented although there was a large underspend, there is an approved four year plan and it was anticipated that we would get back on track over that period.

13.3 **Board noted the Capital Monitoring report as at 30 June 2021**

### **14. Islamophobia and Antisemitism Commitments**

14.1 The Interim Director of Housing and Customer Services advised following a recent Board Strategic Planning day, specifically focusing on Equality and Diversity, the report recommends that St Leger Homes adopts the APPG on British Muslims definition of Islamophobia and adopts the definition of Antisemitism proposed by the International Holocaust Remembrance Alliance.

It was noted that both of these definitions have been adopted by Doncaster Council and are consistent with St Leger's Equality and Diversity Statement.

14.2 **Board agreed to adopt both definitions.**

### **15. Committee Minutes for Noting – Audit & Risk Committee**

15.1 Members noted the committee minutes that included the annual financial statements as the main item.

### **16. AOB**

16.1 Civic Building

It was agreed any dialogue with DC regarding future possibilities of SLHD staff relocating to Civic Building to be included in the next CEO & Chair update to Board.

DR

16.2 Procurement Services

The CEO advised of discussions with DC regarding the potential of 3 members of SLHD staff to be TUPE'd from SLHD with a view to developing a Service Level Agreement for the service going forward.

The meeting ended at 16:15hrs

**Matters Arising from the previous minutes**

Month	Ref	Action	Progress	Completed Y/N	Owner
January'21	3.7	<p><b>From Agenda Item 8.0 – Fire Management Policy and Fire Management Plan</b></p> <p>Members noted the milestone plan with timeframes would be produced and brought to Board once the programme had been established.</p> <p><u>5 August 2021 update:</u> Members noted actions are inter-dependent and reliant on the implementation date of the C365 system. Therefore, it was difficult to determine a realistic timescale at this time.</p>	<p>In progress</p> <p>Detailed piece of work.</p>	N	CM
May'21	6.4	<p><b>People Strategy Update</b></p> <p>Agreement was reached to submit a report to the next Employment &amp; People Committee on 14.09.21 on the impact of Covid-19 on staff attendance, shielding and productivity.</p>	In progress.	Y	JC
Aug'21	7.4	<p><b>Asset Management Strategy 2021 - 2024</b></p>	In progress	N	CM

		The Chair summarised by asking that stock condition survey timescales are incorporated into the strategy and he highlighted the importance of starting them asap.			
Aug'21	8.4	<b>Environmental Strategy</b> Future financial challenges beyond 2024 to be reflected in the strategy.	In progress	N	JC
Aug'21	9.3	<b>Health &amp; Safety Strategy 2021-2025</b> High level action plan to be taken to the BSC Committee within the next quarter - date of next meeting 18.11.2021.	In progress	N	CM
Aug'21	9.5	<b>Health &amp; Safety Strategy 2021-2025</b>  -Estate walk programme to be forwarded to Cllr RAJ. - The same member highlighted issues when trying to complete an incident report on the SLHD website.	In progress	N	JD
Aug'21	10.2	<b>Review of Fairness and Equality Statement</b> Front cover page – particularly bottom left image to be reviewed and changed.	In progress	Y	JD

# **ST LEGER HOMES OF DONCASTER LTD**

Company limited by guarantee registered in England  
Company Number 05564649

## **Board Meeting**

# **REPORT**

**Date** : 7 October 2021

**Item** : 04

**Subject** : Chief Executive and Chair's Update

**Presented by** : Dave Richmond, Chief Executive

**Prepared by** : Dave Richmond, Chief Executive

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

### **Recommendation:**

That Board;

1. Note the content of this report.
2. Review the proposed changes to the Boards' Terms of Reference and agree any changes.
3. Agrees to receive a report early in the new year, concerning the review of committees as indicated in 8.1
4. Identifies a preferred approach to the recording of the Chief Executives' appraisal as highlighted in section 9.3

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: 7 October 2021**

**1. Report Title**

1.1 Chief Executive and Chair's Update Report

**2. Executive Summary**

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

**3. Purpose**

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

**4. Recommendations**

4.1 That Board;

1. Note the content of this report.
2. Review the proposed changes to the Boards' Terms of Reference and agree any changes.
3. Agrees to receive a report early in the new year, concerning the review of committees as indicated in 8.1
4. Identifies a preferred approach to the recording of the Chief Executives' appraisal as highlighted in section 9.3

**5. Covid 19 and Agile Update**

5.1 Covid 19

There continues to be an impact of the ongoing pandemic on the workforce. We provided a detailed summary of the impact to date at the September Employment and People Committee. In recent weeks, sickness due to covid has remained steady and at relatively low levels with a total of 9 reported cases over the last 4 weeks (on average 2-3 per week). However as at today's date (27/09) we have seen 8 new cases reporting this week alone, the highest since the end of July (4 cases) and potentially sees the impact of the return to education settings in September. This sits higher than levels we were seeing earlier in the year (between February and June) but is still far lower than our peaks.

As at (27/09) we have a total of 2 colleagues self isolating due to being identified as a close contact and being required to isolate and a further 7 employees recorded as taking sickness leave. Of the 7 sick employees, 2 are passed in property and 4 in Housing.

## 5.2 Agile Update

Following agreement at EMT in July, detailed discussions have now taken place with DMBC regarding proposed policy changes to enable agile working and a way forward has been agreed. Draft policies and communications will be finalised along with the detailed consultation plan in the coming weeks. Agile working guidance is being finalised with Unions ready for launch with colleagues shortly, to further enable managers and colleagues to embed agile working.

A review of our existing office accommodation is ongoing with consideration to our future head office space. We have communicated to the workforce that whilst no decision has been made one option which is actively being pursued is co locating our head office within the civic building. A site visit is taking place by the project team leading this work to further understand possibilities. Follow up meetings are planned to agree next steps and timelines of any potential changes to ensure that communications are appropriately timed and planned.

## 6. **Board Allowances**

- 6.1 Doncaster Council, as shareholder, agreed last year that Board Allowances would be increased in October each year by the same percentage as the nationally negotiated annual employee pay award. The employers' side of the negotiations have offered a 1.75% pay award (with 2.75% for those on the lowest scale point) however, at the time of writing both sides have not come to an agreement. As soon as it is agreed we will notify all Board Members and apply the same percentage increase to Board allowances, this will also be backdated to October.

## 7. **Board Terms of Reference**

- 7.1 The Board approved the current Terms of Reference (ToR) in July 2019 along with the ToR for all committees. Each committee reviews its ToR on an annual basis as part of its annual reporting. The Board has not previously had a process to review its own ToR.

We have reviewed the ToR and the amended version is attached at Appendix A, with the suggested changes highlighted. As part of this review we have checked that they are consistent with the memorandum and articles of association (Mem & Arts) and we have reviewed them against the National Housing Federation (NHF) Code of Governance to ensure that the ToR reflects best practice.

The main changes are to include the appraisal and performance management of the Chief Executive but also to remove from the ToR the responsibility of The Board to review the performance of Executive Management Team (EMT) as the performance review of Directors is carried out by the Chief Executive.

The paragraphs on quoracy have been amended to mirror the Mem & Arts.

A new section on Declarations of Interest has been included in accordance with recommendations arising from the NHF Code of Governance. If the ToR are approved, we will review all the declarations of interest forms completed by Board Members and publish them following the next Board meeting.

## **8. Board Governance – Subcommittees**

- 8.1 Board Members will recall that at the March 2020 Board meeting, in the light of the increasing requirement to have oversight of safety issues it was agreed to create a fourth subcommittee dedicated to Building Safety. This committee is now established and operating well, and an independent advisor has been appointed to support the committee as previously agreed by the Board. At the March Board meeting it was agreed that the Building Safety Committee should in the first instance be established for a period of one year and then be subject to review. It was recognised that the existence of four committees would place additional pressure on Board Members. This is undoubtedly the case however despite the summer holiday period all committees have been able to operate and have been quorate.

It is probable that the Building Safety Committee will be required for longer than one year, but as the existing arrangements have only been in place for six months, it is proposed to undertake a further review of the committee structure early in the new year. This will consider:

- a) Whether four committees are required or if they could be consolidated into three.
- b) The ability of Board Members to support the current arrangements
- c) Whether there is a need for additional Board Members.

## **9. Chief Executive Appraisal**

- 9.1 Following discussion concerning the National Housing Federation Code of Governance, the Board agree that a formal 360 degree appraisal of the Chief Executives performance should be undertaken.

In the early summer feedback forms were sent to a range of stakeholders including

- SLHD Non Executive Directors
- SLHD Executive Directors
- SLHD CEO Executive Assistant
- The Chief Executive of DMBC
- Executive Directors from DMBC to include:
  - Director ASC
  - Director Economy and Environment
  - Director of Corporate Resources
- DMBC Assistant Director Strategic Housing
- DMBC Mayor and Portfolio Holder
- A combined response from the Tenants and Residents Involvement



Panel.

- 9.2 Ten returned forms were received from Board Members, EMT, tenants and the Deputy Mayor. The Chief Executive then met with the Chairman and Vice Chairman to work through the feedback and determine future priorities. There is a process on going to ensure that these issues align with priorities identified as part of the successful completion of the Chief Executives' probationary period.
- 9.3 For future reference as part of any forthcoming inspection regime, it would be helpful to formally record that the appraisal for 2021 has taken place.

This could take one of two forms: 1) it could be noted as part of the recommendations arising from this report, or 2) if there is a desire amongst the Board to have a wider understanding and oversight of this process a report could be taken to the Employment and People Committee for consideration.

The Board is asked to determine which approach they prefer.

## **10. Operational Issues**

- 10.1 A rise in homelessness presentations throughout the pandemic has proven extremely challenging. As a result of the Governments' 'everyone in' initiative the numbers of people accommodated in temporary accommodation, hotels and B&Bs rose significantly with numbers of people placed in hotels and B&Bs peaking at approximately 110 households in January 2021. Since then the numbers have consistently fallen and now stand around 45 households, however, there are a number of family households within this figure. It is believed that approximately 38 people are sleeping outdoors, however this figure can vary considerably and does not represent a static group of people with many moving between sleeping outdoors and finding short-term accommodation.

The number of individuals and households presenting to the Housing Options service as potentially homeless has not similarly declined and in fact continues to rise. Currently we are experiencing around 100 presentations each working day. The vast majority of such presentations are from people that fear, but are not in immediate danger of homelessness and homelessness can be avoided; this accounts for approximately 1,800 of the 2,000 monthly presentations. It is notable that prior to the pandemic the Home Options service received in the region of 500 referrals per month. Concerns exist that with the ending of the furlough scheme and the universal credit reduction coming soon; it may be some time before referrals return to numbers that are more normal.

Consequently, the pressure on the Home Options service is considerable and this pressure has been exacerbated by a significant number of staff vacancies and some incidents of staff absence.

There are a large number of initiatives underway across the homelessness partnerships to address these issues. From a St Leger perspective as a short-term measure, we have seconded staff from other service areas into the Home Options Team, sought a major recruitment drive, including agency staff and are talking to other stakeholders about operational support. Three temporary staff have been made permanent and five vacancies are currently being advertised. This is allowing some operational improvements, but until all vacancies are filled it will prove challenging and it is difficult to identify how well the current size of the team can manage the rise in demand.

Despite this bleak picture, there have been some successes; the reduction in hotel placements has been difficult to achieve but welcome, this includes 29 people moving out of the Doncaster International Hotel in August with only one believed to have unfortunately returned to rough sleeping. The backlog of enquires to the Home Options service has reduced with 450 at the start of September to 292 by mid-September.

This issue will remain a major priority for Managers in St Leger Homes and colleagues at DMBC. A joint update report is being provided to the Council's Regeneration and Housing Overview and Scrutiny Panel.

## **11. The One Project Update and other software activity**

- 11.1 Considerable organisational resource is still engaged in TOP but phase 2 is progressing well, issues are being ironed out and the planned go live date of 18 October remains on track. Training of staff has commenced and is also progressing well.
- 11.2 Directors will remember that earlier in the year we agreed to purchase Compliance 365 (C365) to enable us to modernise our management of compliance activity. The implementation of the system is advancing really well, the initial data validation exercise completed as part of the Pennington Health Check has created a foundation of data for the system to be built on.

We are currently in the process of populating the system with compliance data one area at a time. This validation and control of the data applied in C365 has started to populate the dashboard, providing SLHD with a real time view of compliance activity, further improving organisation assurance.

Over the next six months, more compliance activity will be included in the database and more data included, resulting in a final fully functioning system by early spring 2022.

- 11.3 Voicescape technology has been operational since 11<sup>th</sup> August. This technology is being utilised in rent collection. It takes data from our RentSense system and automatically calls our tenants where rent payments are overdue, enabling them to pay automatically over the phone or speak directly to one of our staff. As such it erases wasted time cold calling customers who are not available or do not wish to speak to us.

## **12. Improving our Repairs Service (Repairs Excellence)**

- 12.1 EMT team have agreed a programme of work designed to fundamentally review how we undertake the repairs function and bring forward proposals for improvement. A number of issues have sparked the review, including the way in which the determination of which repairs are classified as responsive repairs and which are determined to be scheduled and the potential delay this can cause undertaking scheduled repairs. Other issues relate to a large volume of repairs being dealt with through the call out process, sometimes poor communication with tenants and an old fashioned approach to dealing with 'no access' issues.

The review is to be split into four workstreams; track and text, callout, planned/scheduled and no access. It is anticipated that the review will be split in phases with the analysis and recommendation phases concluding within the next 3 months. Performance and Improvement Committee will be kept abreast of the work as it progresses.

## **13. Strategy and Policy Update**

- 13.1 Since the last Board meeting the EMT have approved a revised Dignity at Work Policy and Procedure. The main changes involved streamlining both documents to make them easier to follow, providing links to the ACAS website to illustrate examples of harassment and bullying and providing links to our own policies and procedures such as the employee code of conduct and grievance policy.
- 13.2 The revised Tenants Voice Strategy was due for inclusion on the Board papers but it has been decided to delay this to allow further work to take place to ensure the proposed strategy truly reflects the importance of tenant influence as envisaged by the Social Housing White Paper and as required by The Board. In the meantime, the Tenant Participation Advisory Service (TPAS) accreditation of SLHD is moving forward and onsite inspections will take place in October.

## **14. The Impact of the Health & Social Care Tax**

- 14.1 The Health & Social Care tax will be collected by an increase in the rates of National Insurance (NI) paid by both employers and employees from April 2022. The estimated impact of this for us as an employer is £190k in the 22/23 financial year and we will discuss how this is funded with the Council as part of our management fee discussions.

## **15. Procurement Activity**

- 15.1 Attached, as Appendix B, is a spreadsheet identifying all current ongoing procurement activity, which is split to show contracts that will be signed by Doncaster Council, and SLHD will be the managing agent and contracts that will be SLHD contracts.

15.2 The TUPE transfer of procurement staff to DMBC has been slightly delayed from the date advised at the last board in order to ensure appropriate staff consultation. It is now expected that three staff will transfer over in December 2021.

**16. VFM Considerations**

16.1 Not Applicable.

**17. Financial Implications**

17.1 The tupe transfer of procurement staff will have financial implications, which will require the creation of a service level agreement with DMBC.

**18. Legal Implications**

18.1 Not Applicable.

**19. Risks**

19.1 No specific risks inherent in this report, however a number of the issue referenced, for example TOP, have very significant risks that are managed as part of the project plan.

**20. Health, Safety & Compliance Implication**

20.1 Not Applicable.

**21. IT Implications**

21.1 Not Applicable.

**22. Consultation**

22.1 Consultation as part of the tupe process has taken place.

**23. Diversity**

23.1 Not Applicable

**24. Communication Requirements**

24.1 Not Applicable.

**25. Equality Analysis (new/revised Policies)**

25.1 Not Applicable.

**26. Environmental Impact**

26.1 Not Applicable.

**27. Report Author, Position, Contact Details**

27.1 Dave Richmond, Chief Executive  
[Dave.richmond@stlegerhomes.co.uk](mailto:Dave.richmond@stlegerhomes.co.uk)  
01302 862700

**28. Background Papers**

28.1 Appendix A – Board Terms of Reference  
Appendix B – Ongoing Procurement Activity



## **St. Leger Homes of Doncaster**

### **Terms of Reference**

#### **The Board**

##### **1. Lead Executive Officer**

1.1 The Chief Executive

##### **2. Overall Responsibilities of the Board**

2.1 Members of the Board are collectively responsible to ensure that the Company has sufficient robust mechanisms and procedures to ensure that the interest of its Shareholder, tenants and other stakeholders are protected and enhanced, where possible, by the Company's activities.

##### **3. Role of the Board**

3.1 The functions of the Board are detailed at Article 18 of the Company's Articles of Association.

3.2 All Board members are required to act in accordance with the Nolan Principles of public life and code of conduct:

- Selflessness – Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.
- Integrity – Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.
- Objectivity – In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.
- Accountability – Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

- Openness – Holders of public office should be as open as possible about all the decisions and actions they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.
  - Honesty – Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.
  - Leadership – Holders of public office should promote and support these principles by leadership and example.
- 3.3 In accordance with the Company's Articles and Memorandum of Association the Board manage the business and exercise all the powers of the organisation in law.
- 3.4 The powers, duties and responsibilities including, but not exhaustive are:

### **Strategy and Management**

- **Contributing to and approving** the vision and values and strategic objectives for the Company.
- Approving the Business Plan in consultation with DC.
- Approving and amending corporate strategies, policies and guidance dealing with the conduct of the Company's business.
- To ensure the Company complies with Health and Safety legislation and responsibilities.
- Monitoring and driving forward Company performance, to ensure successful service delivery.
- Oversight of operations ensuring: competent and prudent management, sound planning, an adequate system of internal control and compliance with statutory and regulatory obligations.
- Determining the risk capacity, profile and appetite for the Company.
- Ensuring that a robust risk management framework is in place for the identification and management of risk.
- Recommending major changes to the Company's staffing structure (major is defined as a change which affects more than 10% of staffing numbers) to DC.
- Appointment of the Chief Executive and Executive Directors.
- Making recommendations to DC on Allocations Policy, Anti-Social Behaviour policy and other relevant policies the Council set in consultation with the Company.
- Approving proposals to provide services on behalf of other organisations and approving arrangements for the discharge of Company functions by another company, subject to agreement by DC.
- Approving the forming of any substantial partnerships to facilitate the delivery of the objectives of the Company.
- Ensuring equality and diversity, in particular in service delivery and Human Resources policies.

- Making decisions about any functions that by law are the responsibility of the Company and have not been delegated to a Sub-Committee or an officer.

### **Budget, Financial Controls and Contracts**

- Agreeing and reviewing the Management Fee arrangements with DC following advice from the negotiations between DC and the Company's representatives.
- Approval of the Company's operating budgets and any material changes to them.
- Approve expenditure not provided for in Company approved budgets as set out in the scheme of delegation.
- Approving of Financial Regulations and Contract Standing Orders and ensuring adherence to these in respect of all activities.
- Receiving and approving the Annual Report and Accounts.

### **Governance**

- Ensuring compliance with Law.
- Approving and reviewing governance arrangements and policies (including Code of Conduct and Scheme of Delegation).
- Undertaking a rigorous review of the performance and effectiveness of the Board collectively and that of individual Board Members and Sub Committees.
- Having a formal review and performance framework for the Chief Executive
- Establishing and disbanding Sub-Committees as seen appropriate and delegating appropriate functions to the Sub-Committees.
- Having a regular board appraisal system.

## **4. Equality**

- 4.1 The Board shall carry out regular equality monitoring of the Board to ensure it reflects the community it represents and that positive recruitment principles are followed where there is under representation.

## **5. Board Membership**

- 5.1 The Board membership is defined in the Memorandum and Articles of Association.

## **6. Frequency of Meetings**

- 6.1 The Board is scheduled to hold 6 meetings per annum.

## **7. Special Meetings**



- 7.1 Special Meetings of the Board can be called by the Chair or by at least one third of the Board members giving notice to the Company Secretary. Each member must be given five clear days' notice of such a meeting.

## **8. Quoracy**

- 8.1 The quorum required for the transaction of business is at least four, no fewer than one Tenant Board Member, one Independent Board Member, one Council Board Member and one other Board Member.

8.2 If quorum is not present within half an hour from the time appointed for a Board Meeting the Board Meeting shall, if requested by a majority of those Board Members present be adjourned to the same day in the next week at the same time and place or to such day and at such other time and place as the Board Members present may determine.

8.3 If at the adjourned meeting a quorum is not present within half an hour from the time appointed for the meeting then notwithstanding Article 34(1) two Board Members present shall constitute a quorum.

## **9. Conflicts of Interest**

- 9.1 Individual Board members are responsible for the declaration of interests at the commencement of each meeting. Any conflict of interest should be reported to the Chair of the Board.

## **10. Declarations of Interest**

10.1 There is a publicly available register for board and committee member declarations of interest which is reported on annually to the Board.

## **11. Agendas and Reports**

- 11.1 The Chair and Chief Executive will agree agendas and the content of Board Meetings.

## **12. Members of the Public**

- 12.1 Board meetings are open to members of the public and dates and times are to be publicised regularly.

## **13. Confidential Items**

- 13.1 Confidential items will be conducted within the Confidential Board Meeting, where press and public are excluded by virtue of Part 1, Schedule 12A of the Local Government Act 1972.

## **14. Indemnity**

- 14.1 Board members are covered by the Company's Professional indemnity insurance to the value of £5m per claim.



## APPENDIX B

Procurement Exercise	Projected Contract Value Based on a 4 year term	Framework or Tender	Work or Supply or Service	Service Area
Primarily capital expenditure, so Contracting Authority to be Doncaster Council				
The survey, supply & installation of windows and doors	£1,000,000	Tender	Supply and Works	Repairs and Maintenance
Contract for undertaking works following FRA's	£750,000	Framework	Works	Health Safety and Compliance
The supply and fit of fencing.	£500,000	Tender	Supply and Works	Asset Management and Estate Management
Primarily revenue expenditure, so Contracting Authority to be St. Leger Homes of Doncaster				
To undertake the repair, maintenance and installation of door entry systems	£300,000	Tender	Service and Works	Repairs and Maintenance
Undertake lift consultancy & associated services	£180,000	Framework	Service	Repairs and Maintenance
Purchase, repair and maintenance of power tools (Building)	£250,000	Tender	Supply and Service	Repairs and Maintenance
Provision of Ecology Services	£200,000	Tender	Service	Asset Management
Purchase, repair and maintenance of power tools (Grounds Maintenance)	£200,000	Framework	Supply and Services	Housing Management
Manned Security Services (to be placed in Hotels where our rough sleepers have been placed)	£100,000	Framework	Services	Housing Options
To supply gas spares and associated parts	£800,000	Framework	Supply	Asset Management
To supply outhouse doors, gates and fencing	£360,000	Tender	Supply	Asset Management
To supply kitchen units and associated materials	£750,000	Framework	Supply	Asset Management
Emergency Accommodation Lease Scheme	£400,000	Tender	Service	Housing Options
Communal Aerial Repair and Maintenance	£120,000	Tender	Service	Repairs and Maintenance
VOID care scheme (Gas and Electric meter changing)	Nil Value (Concession Contract)	Tender	Service	Repairs and Maintenance
Removal Services	£80,000	Tender	Service	Repairs and Maintenance and Estate Management
Maintenance and Repairs Agreement for Sprinklers Sited within High Rise Dwellings.	£100,000	Tender	Service	Repairs and Maintenance
Provision of Security for Site Compound	£120,000	Tender	Service	Repairs and Maintenance
Project Design and Consultancy Services	£200,000	Tender	Service	Asset Management
Welfare Combi Safe Hire	£25,000	Quote	Service	Repairs and Maintenance
Intranet Maintenance & Hosting	£40,000	Framework	Service	ICT and Transformation
Optifime (Field Management Solutions)	£120,000	Framework	Service	ICT and Transformation
Postal Services	£120,000	Framework	Service	ICT and Transformation
Tenants Own Contents Insurance	Nil Value (Concession Contract)	Framework	Service	Finance and Governance
Waste Management	£2,400,000	Tender	Service	Repairs and Maintenance and Estate Management
Managed Print Solutions	£160,000	Tender	Service	Communication Team
Provision to undertake Stock Condition Surveys	£500,000	Framework	Service	Asset Management
Supply of DGU's	£200,000	Tender	Supply	Repairs and Maintenance
Supply of PPE	£250,000	Framework	Supply	Companywide
Supply of Decoration Materials and Paint Packs	£300,000	Framework	Supply	Repairs and Maintenance

# ST LEGER HOMES OF DONCASTER

## Board Meeting Briefing Note

<b>Title:</b>	ICT Strategy update
<b>Action Required:</b>	Note Progress/Plans against ICT Year 1 Action Plan and approve the Year 2 Action Plan
<b>Item:</b>	05
<b>Prepared by:</b>	Andrew Gravill – ICT Support Manager & Mark Haughey – Head of ICT and Business Transformation
<b>Date:</b>	7 <sup>th</sup> October 2021

### 1. Report Title

- 1.1 Information, Communication and Technology (ICT) Strategy 2020 – 2024 update for Board.

### 2. Background

- 2.1 Board approved the ICT Strategy 2020 – 2024 and the associated one year Action Plan in July 2020. The Strategy supports the embedding and ongoing improvements to an agile and mobile workforce, implementation of the new Housing Management solution and delivering the infrastructure and tools to enable channel shift and self service approach through our online services for both staff and tenants.
- 2.2 The ICT Strategy sets out the ‘technical’ strategic direction for the organisation and, as a back-office service, is intended for internal staff and departments.
- 2.3 This briefing note is intended to provide Board with an update on the progress made against the Year 1 Action Plan and seek approval for the Year 2 Action Plan.

### 3. Progress Made (Year 1 Action Plan)

- 3.1 A dynamic Action Plan was provided alongside a new ICT Strategy produced in July 2020. Although the first year Action Plan was limited in the number of projects, they are all significant in size, not only for the ICT Team but to the whole organisation. Details on the progress can be found in Appendix A.
- 3.2 Of the Actions planned in Year 1, three of the six actions were successfully completed on target within the year. The remaining three are ongoing from year 1 and have been carried forward to the Year 2 plan.
- 3.3 ICT played a key role in mobilising staff to work in an agile way during the Covid-19 emergency and continue to ensure staff have reliable and secure access to the network and systems.

- 3.4 ICT were also involved in some projects not on the Action Plan, including :-
- VoiceScape – The implementation and rollout of an autodialling solution to reduce the calls made by staff.
  - C365 – Following an evaluation of the OpenHousing Compliance module, an alternative solution was procured and is in the process of being implemented.
- 3.5 In addition to the tasks reflected in the ICT Action Plan, ICT have continued to work towards the key aims of the ICT Strategy by ensuring the operational 'business as usual' tasks are completed in a timely fashion and to a high standard.
- 3.6 In summary, despite the challenges of the Covid-19 situation, progress against the Action Plan was good with delivery on a majority of the actions, while still reacting to the operational needs of the business. Some actions are ongoing and will be carried forward to the successive Action Plan.

#### **4. Plans for next period (Year 2 Action Plan)**

- 4.1 ICT continue to focus on the priorities as well as supporting developments in line with other departments Strategies & Action Plans. The proposed ICT Action Plan for the next period, with nine key Actions, can be found at Appendix B.
- 4.2 TOP (delivery of Phase II and supporting the enhancements/developments) and Agile Working (remote working and rolling out Office 365) continue to be the primary priorities and feature highly on the Action Plan.
- 4.3 TOP Phase II is planned to go live mid October, however while the solution will be live it is recognised that ICT will still be required to help embed, resolve issues, administer and support the post-go live activities.
- 4.4 Similarly, ICT will continue to support and drive the strategy to enable staff to work remotely and in an agile way through the implementation and rollout of Office 365 and the underlying infrastructure technologies.
- 4.5 Supporting strategies, such as the Customer Access Strategy (CAT) and the Environmental Strategy, along with the Annual Development Plan/Service Delivery Plans will be key and will be delivered with the goal of ensuring modern, innovative and appropriate technology is implemented and utilised.
- 4.6 As reliance on IT increases and as we become more agile, one key area that will need attention is that of Cyber Security and Business Continuity. The threats and risks have increased as Covid-19 forced remote working initially and now as the strategy encourages it in moving forward. ICT will be key in ensuring the environment is protected and any outages are addressed quickly and effectively.

#### **5. Conclusion**

- 5.1 Board are asked to note the progress made against the ICT Action Plan for Year 1 and approve the updated ICT Action Plan for Year 2.

## Appendix A – Progress Against Year 1

Ref	Action	Progress Made	Status
1	<p>Implement technical aspects of The One Project (TOP). A number of ICT related milestones are documented as part of the overall project. Actions include:-</p> <ul style="list-style-type: none"> <li>• Server and database configuration</li> <li>• Data extract and take-on</li> <li>• Integration and interfaces</li> <li>• Hardware and software provision</li> </ul>	<p>All technical elements of The One Project, including the creation of 10 RDS servers &amp; 8 database &amp; application servers for hosting OpenHousing were all completed in early 2020.</p> <p>Other completed tasks include a successful data migration &amp; the development of interfaces that were required for the Phase 1 go-live.</p>	Complete
2	<p>Phase 1 of TOP implementation, to support the technical access, rollout and support on the go-live of Open Housing.</p>	<p>ICT supported the successful go-live of the Phase 1 OpenHousing implementation in November 2020. ICT has since played a key role in supporting users &amp; further enhancing the system through developments such as reports and workflow.</p>	Complete
3	<p>Phase 2 of TOP implementation, to support the technical access, rollout and support on the go-live of Open Housing.</p>	<p>The implementation of the Phase 2 OpenHousing go-live has been postponed until October 2021. However ICT have continued to support key aspects of the project, such as inputting system config settings and providing support for User Acceptance Testing (UAT), which is a key learning point from the Phase 1 implementation.</p>	Ongoing
4	<p>A number of ICT related actions to support the growth of the Customer Access Team (CAT) and the associated Customer Access Strategy (CAS).</p> <ul style="list-style-type: none"> <li>• Hardware and peripheral provision</li> <li>• Network configuration</li> <li>• New communication channels (eg WhatsApp)</li> <li>• Develop tenant portal</li> <li>• Reception digital face-to-face</li> </ul>	<p>ICT has supported the growth of the CAT team by providing the relevant hardware equipment.</p> <p>ICT have supported the TOP team in developing the new Tenant Portal via OpenHousing and although the standard portal is now live and allows tenants to view their rent balance &amp; tenancy information, we continue to work with the TOP team to look at implementing more complex and integrated functionality.</p> <p>Actions still to be progressed are in line with the Customer Access Strategy.</p>	Ongoing
5	<p>Review of ICT Acceptable Usage and Information Security policies, and the Document Retention policy.</p>	<p>A new version of the ICT Acceptable Use Policy was published in June 2021.</p> <p>Other key policies, such as the Information Security Policy, were updated and published in September 2020 and are valid for 4 years.</p>	Complete
6	<p>Remote access servers implemented to cater for increased mobile workforce and production, with OD, of O365 and software training and guidance material to help staff maximise working remotely.</p> <ul style="list-style-type: none"> <li>• Server and infrastructure implementation</li> </ul>	<p>Working alongside DMBC, there have been significant improvements made to the performance, usability &amp; stability of Remote Access servers in the last 12 months. This includes the implementation of new servers in early 2021 for users logging in with AnyConnect.</p> <p>Further progress has been made with the implementation of O365, including more use of applications such as Teams, Forms, PowerAutomate and PowerApps.</p> <p>ICT also started the roll out of OneDrive, however this has been paused, pending an update from DMBC.</p>	Ongoing

## Appendix B – Year 2 Action Plan

The primary objective of the ICT Strategy for 2021/22 will be the implementation of the TOP and CAT projects. These are significant projects which will lay the foundation for future years and will require all resources being prioritised accordingly. Therefore, the Action Plan will be mostly limited to these projects this year, but the action plan is expected to expand as these projects are delivered:-

Ref	Action	Timescales
1	<p>Implement technical aspects of The One Project (TOP). Several ICT related milestones are documented as part of the overall project. Actions include:-</p> <ul style="list-style-type: none"> <li>• Data extract, take-on and go-live (Phase II)</li> <li>• Integration and interfaces</li> <li>• Decommission TotalMobile and Keystone</li> </ul>	<p>October 2021 December 2021 March 2022</p>
2	<p>A number of ICT related actions to support the growth of the Customer Access Team (CAT) and the associated Customer Access Strategy (CAS).</p> <ul style="list-style-type: none"> <li>• New communication channels (e.g. WhatsApp)</li> <li>• Develop tenant portal</li> <li>• Reception digital face-to-face</li> </ul>	<p>In line with CAS In line with CAS In line with CAS</p>
3	<p>Expand on Agile Working approach through consolidating tools and solutions to enable MS Teams to be core collaboration tool.</p> <ul style="list-style-type: none"> <li>• Remove Jabber</li> <li>• Reduce S: and U: drive use (OneDrive)</li> <li>• Rollout Office 365 tools (including Sharepoint) and updates</li> </ul>	<p>March 2022 March 2023 Ongoing</p>
4	<p>Enable true Agile Working at SLHD premises.</p> <ul style="list-style-type: none"> <li>• Utilise ICT Kit for agile working in offices and meeting rooms.</li> </ul>	<p>October 2022</p>
5	<p>Implement and support rollout of VoiceScope (automated dialling solution).</p>	<p>July 2021 (ongoing rollout)</p>
6	<p>Assist/support implementation of Planned Maintenance and Choice Based Letting and Homelessness solution(s).</p> <ul style="list-style-type: none"> <li>• Planned Maintenance within Open Housing</li> <li>• CBL Development within OpenHousing</li> <li>• Homelessness Procurement</li> </ul>	<p>December 2021 March 2022 March 2022</p>
7	<p>Implement Compliance solution (C365)</p>	<p>October 2021</p>
8	<p>Review and support DMBC in preparation and response to Cyber Attacks</p>	<p>Ongoing</p>

# ST LEGER HOMES OF DONCASTER

## Board Briefing Note

<b>Title:</b>	Annual Development Plan (ADP) Update
<b>Action Required:</b>	For information
<b>Item:</b>	06
<b>Prepared by:</b>	Mark Haughey - Head of ICT & Transformation
<b>Date:</b>	7 October 2021

### 1. Purpose

- 1.1. To provide Board members with an update of the Annual Development Plan (ADP) for 2021/22. The ADP was agreed in March 2021 following extensive review and discussion by Leadership, Senior Management Team (SMT) and at the Board's strategic away day.
- 1.2. The 2021/22 ADP proposes a number of key developmental activities or "actions" aligned to the strategic objectives set out in the SLHD Corporate Plan 2019 to 2024.
- 1.3. The ADP does not include operational service developments, which are progressed through local Service Delivery Plans, or 'business as usual' service delivery.

### 2. Background

- 2.1. The ADP has been developed from the Corporate Plan 2019 to 2024.
- 2.2. The Corporate Plan 2019 to 2024 aims to deliver our vision of "providing homes in neighbourhoods that tenants are proud to live in" through four strategic objectives over the five-year period:
  - All our homes are modern, decent, and energy efficient;
  - Our tenants live successful and fulfilling lives;
  - We will be a nationally recognised provider of housing services; and
  - Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together.
- 2.3. The Corporate Plan sets out actions or plans to be delivered over the five-year period. Each year the actions set out in the original Corporate Plan are reviewed to ensure they are still relevant and to reflect any legal, legislation, political or environmental changes, and this year has been subject to a mid-term review. The response to Covid-19 has had an impact on the plans over the past twelve months, though Management and Staff have responded promptly and outstandingly to all situations.



### 3. 2021/22 ADP

3.1. The 2021/22 ADP at **Appendix A** contains individual actions relating to the Corporate Plan actions/plans. Some are related to current pieces of work that are already underway.

3.2. Alignment with the four strategic objectives:

<b>Objective</b>	<b>Number of 2021/22 ADP Actions</b>
All our homes are modern, decent, and energy efficient	9 of which 4 are on track; 4 amber and 1 red
Our tenants live successful and fulfilling lives	7 of which 3 are on track; 3 amber and 1 red
We will be a nationally recognised provider of housing services	11 of which 6 are on track; 5 amber and 0 red
Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together	5 of which 1 are on track; 2 amber and 2 red

3.3. A member of the leadership team is assigned responsibility for each ADP action. As with the current ADP oversight arrangements, progress will be reported to EMT quarterly, and to Board every six months.

3.4. At the time of writing, good progress had been made on a number of the ADP Actions with the following highlights:-

- The review of the structures to support the implementation of a robust Health Safety and building compliance model is complete and implementation of the re-alignment is well underway.
- A new product is being introduced to enable improved management of building safety compliance records. C365 has been procured and is currently being implemented to complement the new Housing Management solution (TOP Project).
- Implementing Agile Working continues to develop as the restrictions and guidance changes. Agile Working Principles were launched and associated guidance and policies are ready for consultation.
- A new Repairs Excellence forum has been implemented, with a dedicated Governance arrangement with a Repairs Excellence Board. A number of key stakeholders from across the business will be involved as we look to modernise our Repairs service for our Customers.

3.5. The TOP Project is on track for the revised go-live and recently completed the testing stage and currently in an extended period of training all staff. There are a number of actions and outcomes within the ADP that are dependent on the delivery of TOP and so will follow on post the Phase II go-live mid October.

3.6. Significant commitment has been put into developing and implementing the roadmap out of Covid and the operational delivery of services have been maintained during the pandemic, in line with government guidelines.

### 4. What Next

- 4.1. The implementation and embedding of TOP in October will continue to be the priority. The TOP Team members will return to their substantive posts in December however the follow-on work to embed, support, fine-tune and enhance the functionality not able to be delivered in Phase I and II (such as the Planned Maintenance module and Choice Based Letting functionality) will continue the rest of the ADP period.
- 4.2. Agile working is now well established however while the impact of the Covid emergency is reducing there are activities and back-logs that will require addressing.
- 4.3. While a number of the ADP Actions are considered on track, the delays of TOP and general workloads may result in slippage and the ADP will continue to be monitored and reviewed by Leadership.
- 4.4. The Board will review the Corporate plan at this meeting and work has already begun to start the planning for the 2022/23 ADP which will form the main part of the agenda at the next Board Strategic planning event.

## **5. Recommendation**

- 5.1. That Board is asked to note the ADP update.

## **6. Appendices**

- Appendix A - 2021/22 ADP

Appendix A

All our homes are modern, decent, safe and energy efficient	Corporate Plan Objective	Plans	ADP Actions 2021/22	Date	Status	Q2 Update
	Ensure our homes are safe and free from hazards.	1.1: Review current structures to support the implementation of a robust Health Safety and building compliance model.	Mar-22	HoBS / HoHM	Amber	Structure reviewed on target by July 21. Six positions have subsequently been advertised in the compliance team. These are being progressed through to interviews in the middle of September 2021. Additional positions in the H&S team have been sent for grading. The JD for the Building Safety Manager has been written and is currently being evaluated by HR with the intention to advertise in October 2021.
		1.2: Review and implement compliance software as part of an external health check across all 6 areas of compliance.	Jul-21	HoBS	Amber	Compliance software selected and property information continues to be loaded into the system, along with other areas of compliance. Asbestos information is to be included from go live date (October in line with TOP Phase II). Other data is being loaded including information for properties with Solid Fuel and Lifts.
		1.3: Continue to monitor changes arising from the Building a Safer Future review and implement accordingly.	Mar-22	HoBS	Amber	The Building Safety Bill is continuing its route to approval. The Building Safety Regulator (BSR) has been established and consideration is being given to the Building Safety Cases for each in scope building so that a gap analysis can be undertaken. The buildings can then be registered with the BSR and the Building Assurance certificate sought. This is likely to be 2023 with the current implementation plan.
	Continue to invest in homes and neighbourhoods.	1.4: Deliver the first phase of a Gypsy & Traveller and Residential investment plan.	Mar-22	HoAM	Red	This was approved by Cabinet on 22 <sup>nd</sup> September. Given the timing of the approval, the need for planning permission and the appointment of a suitable contractor (with capacity), it is unlikely that first phase will be completed by the end of the financial year, although it is hoped that work can at least start in this financial year.
		1.5: Implement outcomes from reviewed Age Designation Policies.	Mar-22	HoAtH	Amber	This will be undertaken as part of the full review of the allocations policy (2.2). A scoping report is scheduled to go to EMT in November 2021 with a view of delivering the review within the timescale.
	Deliver an efficient and effective repairs and maintenance service.	1.6: Explore agile working and current working hours for trade staff aligned to customers (Inc. Out of Hours).	Mar-22	HoR&M	Green	Will be delivered as a part of the TOP implementation and SLHD's agile principles for March 22, change from the original October 21 timeline, due to the links with Agile.
		1.7: Undertake full R&M service review informed by the Phase II TOP implementation.	Mar-22	HoR&M	Green	A full review of all R&M activities will commence as a part of our Repairs Excellence board and sub-group with a separate Governance structure across Property Services.
	Deliver our environmental strategy.	1.8: Implement Borough wide project to recycle furniture.	Oct-21	HoHM	Green	3 of the 5 areas are now operational albeit on a limited basis as stock levels are built up again following the long periods of storage and stock having to be disposed of. Remaining 2 areas are working to be operational by the end of October.
	Offer a sustainable gardening service.	1.9: Explore the possibility and benefits of extending the garden service to the private sector.	Mar-22	HoHM	Green	Review not yet started but will still complete in timescale.

Corporate Plan Objective	Plans	ADP Actions 2021/22	Date		Status	Q2 Update
<b>Our tenants live successful and fulfilling lives</b>	<b>Help tenants to sustain their tenancies.</b>	2.1: Full review of housing management functions and structures (after TOP).	Mar-22	HoHM	Green	Scoping report and project plan in place. Initial roadshows with staff held in July to start the consultation process and communicate high level outcomes.
	<b>Ensure the allocations policy reflects the changing needs of tenants and residents.</b>	2.2: Review the Allocations Policy.	Mar-22	HoAtH	Amber	A scoping report and project plan is scheduled to be considered by EMT in November 2021 including stakeholder and customer consultation. The implementation of the changes will be undertaken in 22/23 due to the need to specify and source a robust IT solution to replace Abritas.
	<b>Improve communication with tenants and residents.</b>	2.3: Further develop and implement customer insights data.	Oct-21	HoCS	Amber	This action relates solely to the review of customers' personal data to give insight into how we need to deliver our services to meet their needs. Report to be submitted to EMT in October/November following a review of what we collect manually, how and who collects it and what we collect electronically. The outcome of these discussions will impact on the implementation of any changes. This action may involve new areas of the business collecting insight data in the future who will not be able to do so until the technology is in place to support this. The implementation part of this action therefore is not likely to be place until March 2022.
		2.4: Review our Customer Involvement Strategy and model to ensure the tenant voice is integral to everything we do, including Tenant Participation Advisory Service (Tpas) accreditation.	Oct-21	HoHM	Red	Consultation completed and draft Customer Voice Strategy has been developed. After discussions at EMT and SMT we have agreed that further consultation is required and a review of the structure and resources to deliver significant change to how we deliver this. Rescheduled Board approval pending further discussions.
	<b>Increase engagement with the diverse communities of Doncaster.</b>	2.5: Develop engagement strategies for high risk buildings in consultation with tenants to deliver the requirements of the Building a Safer Future.	Mar-22	HoHM	Green	We continue to develop our High Rise Forum and are achieving good outcomes with this small group of tenants. We will need to develop engagement strategies for each high rise building and have done lots of consultation with other housing organisations and best practice around this. We will deliver these in the timescale.
	<b>Ensure our homes are safe and free from hazards.</b>	2.6: Review and implement regulatory requirements embedded in the Building Safety Bill, Fire Safety Bill and Social Housing White paper.	Ongoing	HoBS	Amber	We continue to consider the implications arising from legislation related to the safety of residents. Considerable work has been completed through the high rise improvement program and the installation of sprinkler systems. The recommendations from emerging legislation and best practice documents are considered actioned and progressed. These actions are monitored through the Building Safety Committee.
	<b>Ensure tenants with disabilities are able to secure appropriate homes.</b>	2.7: Review the operational arrangements for the accessible housing register (AHR).	Dec-21	HoAtH	Green	Contacted DMBC and have arranged to meet the sponsors in September in order to re-commence the review in Autumn 2021 following TOP 'go-live'. As the initial process mapping took place in winter 2019, the plan is to get the original group back together for a recap before recommencing the review. We believe that it is worth re-doing the 'to-be' process mapping in order to assess how the working environment has changed over the last two years, and also take any opportunities for utilising our new Housing Management system during the AHR process.

Corporate Plan Objective	Plans	ADP Actions 2021/22		Date	Status	Q2 Update	
<b>We will be a nationally recognised provider of housing services</b>	<b>Embed a positive health, safety and wellbeing culture.</b>	3.1: Achievement of workplace wellbeing gold award		Mar-22	HoHR&OD	Green	Activity on track to achieve by end of March 22.
	<b>Deliver value for money services.</b>	3.2: Identify efficiencies and improvements achieved through service transformation as a result of The One Project (TOP) and the Customer Access Team (CAT).		Mar-22	HoF&BA	Amber	Phase 1 Nov 20.(UH). Phase 2 now Oct 21 (TOTAL). Inefficiencies being built out where possible from OH. With Phase 2 go-live moved back to October, the timetable for this action has moved back to end of March 22 for completion. A before and after review will be undertaken post phase 2 when OH is embedded. Planning has commenced with HoS and Service Managers on the methodology to identify where efficiencies and improvements have resulted from TOP and CAT, and this will accelerate up to end of December. Once the areas have been identified, methods of measurements will be developed and applied to capture cashable and non cashable efficiencies.
	<b>Use technology to modernise and transform service delivery.</b>	3.3: Implement The One Project, replacing key IT systems and driving Customer Focussed culture change.		Dec-21	HoICT&BT	Green	Delays over some showstoppers resulting in a revised date of 18th October, though project still on course to be complete by Dec 21. Work being revisited around the Tenant Portal and what functionality is out-of-the-box and can be implemented. Planned Maintenance Module to immediately follow Phase II go-live (planned work will be managed through the Servicing and Scheme Management modules).
		3.4: Consider and Implement technology to create a digital engagement route to improve performance and drive efficiencies.		Sep-21	HoHM / HoCS	Amber	There are a number projects linked to this action at various stages of progress and included in the Customer Access Strategy. The majority are linked to the implementation of TOP: <ul style="list-style-type: none"> <li>Ability for customers to appoint and monitor progress of repairs - Not yet started linked to Phase 2 TOP and will commence Q3;</li> <li>My Access Tenant Portal - Portal is live. Development of the portal to increase number of services available delayed due to service provider support. Project has recommenced and development areas are currently being prioritised.</li> <li>ChatBot - not yet started - needs to integrate with back office systems - Will commence investigations following the implementation of Phase 2 of TOP;</li> <li>CTI (computer telephony integration) for first point of contact calls - linked to TOP, commenced and nearing completion;</li> <li>Digital face to face contact - commenced (linked to action 3.10 below);</li> <li>WhatsApp or similar platform - linked to TOP due to the need for integration. Will commence Q3.</li> </ul>
		3.5: Consider and implement technology to enable improved management of building safety compliance records.		Sep-21	HoBS	Amber	Work is ongoing to roll out the use of C365 which is a web based compliance monitoring and management tool. Once implemented this system will assist SLHD in managing its building safety and compliance programmes and subsequent records. The adoption of C365 will be incremental and roll out will start in October 2021.

<b>Continue to develop our workforce.</b>	3.6: Having Implemented development programs for first line managers, develop future leaders, and grow the workforce skill set to meet the changing operating environment.	Mar-22	HoHR&OD	Green	On track, development framework is continuing and CIH membership for interested employees is in place.
	3.7: Finalise and implement Agile Working approach.	Mar-22	HoHR&OD	Amber	Principles launched. Guidance ready for approval along with policy element. Further discussions taking place with DMBC before approval is confirmed.
	3.8: Refresh our early careers framework, achieving external recognition for the provision.	Dec-21	HoHR&OD	Green	On track, Career Start Framework agreed by EMT and actions supporting the delivery of this are being finalised. A further award has been submitted for the Employer category of the National Apprenticeship Awards.
<b>Ensure our business accommodation is fit for purpose.</b>	3.9: Review accommodation requirements, including partner co-location opportunities as part of wider move towards agile working.	Jun-22	HoAM	Green	Discussions continue around the potential for co-location, including the development of SLHD's initial accommodation 'ask'. However, no firm proposals have yet been put forward or any decisions made. It is envisaged that further progress will be made during quarter 3 where it is hoped a confirmed way forward will be agreed, allowing implementation to begin during quarter 4.
	3.10: Investigate alternative methods for customers to interact with us and to access our services at our office/partner locations	Oct-21	HoCS	Amber	Customer survey completed and feedback analysed and reported to EMT. Further report to EMT on the options for alternative methods for access and delivery model at office locations. If approved for digital route any system will require procuring, consultation with tenants, testing and implementation. Given resources currently being used on Phase 2 TOP implementation of any approved option is likely to take place at the beginning of 2022.
<b>Increase the range of support for tenants.</b>	3.11: Progress accreditation to Domestic Abuse Housing Alliance (DAHA).	Mar-22	HoHM	Green	Consultation plan created for the new policy and revised procedure. Consultation on-going via SurveyMonkey, telephone surveys and focus groups. A workplan has been created for the new Domestic Abuse (DA) policy and revised procedure. The current co-ordinated community response process DA map has been completed which will be used as a starting point for improvement. The initial social media campaign is near completion and will be launched in October - DA Awareness Month. Pin Badges for the DA Awareness month ordered for members of the groups, frontline staff and managers. EMT report completed, titled The implications of the Domestic Abuse Act 2021 for St Leger Homes - to be included in October agenda.

Corporate Plan Objective	Plans	ADP Actions			Q2 Update	
		2021/22	Date	HoS		Status
<b>Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together</b>	<b>Living: Reduce and prevent homelessness.</b>	4.1: Review temporary accommodation model with Council & partners.	Sep-21	HoAtH	Red	This action is heavily influenced by the Council's strategic review of the supported accommodation pathway. This is being discussed and managed via bronze accommodation meetings and ultimately Homeless Board. This action is not on track due to the volume of homeless presentations and the need to support and prevent. We are however progressing positive initiatives such as accommodation for care leavers and domestic abuse victims.
		4.2: Develop and begin implementing action arising from the homeless prevention strand of the Homelessness & Rough Sleeping Strategy	Sep-21	HoAtH	Amber	Homelessness Prevention Partnership Group established. Chaired by SLHD to lead on Homelessness & Rough Sleeper Strategy objective. Some good ideas identified to begin developing themed around homeless reasons and self help and information, including the review of the website.
		4.3: As part of the DGT homelessness board, seek to reduce the incidence of rough sleeping and the use of temporary accommodation.	Mar-22	HoAtH	Red	This work is ongoing. Road Map out of Covid currently being worked within the milestones agreed. Ministry of Housing, Communities and Local Government (MHCLG) have advised July 21 that Action Plans should be reviewed. We are working closely with the Council to develop effective wrap around support to enable accommodation to be sustainable and reviewing the role of the Single Point of Access officer to work closer with rough sleepers.
		4.4: Develop and implement roadmap out of covid related temporary accommodation placements.	Jun-21	HoAtH	Amber	Some excellent progress been made in the last quarter mainly due to one of the main hotels giving us notice to vacate all placements. We achieved this successfully and are using the learning from this to deliver the rest of the road map.
	<b>Living: Safer neighbourhoods through reduced anti-social behaviour and crime.</b>	4.5: Develop and implement an evaluation framework for anti-social behaviour to monitor and measure satisfaction and effectiveness.	Dec-21	HoHM	Green	This will link with the development of the tenancy sustainability model and the measurement of outcomes for housing plus. OpenHousing is being set up to process and monitor these cases. In the meantime, we are undertaking transactional surveys for closed ASB cases to measure satisfaction and outcomes and the results will be analysed and reported to Board along with other transactional surveys.

# **ST LEGER HOMES OF DONCASTER LTD**

Company limited by guarantee registered in England  
Company Number 05564649

## **Board Meeting**

# **REPORT**

**Date** : 7 October 2021

**Item** : 07

**Subject** : Corporate Plan Refresh

**Presented by** : Dave Richmond, Chief Executive

**Prepared by** : Dave Richmond, Chief Executive

**Purpose** : To consider updates to the Corporate Plan following a mid-term review.

### **Recommendation:**

The Board is asked to consider the possible changes as expressed in the draft Corporate Plan attached at Appendix A and accept or propose revisions.



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. 07  
Date: 7 October 2021**

**1. Report Title**

1.1 Corporate Plan Refresh

**2. Executive Summary**

2.1 The SLHD Corporate Plan was launched in 2019 and is due to run until 2024. This report details a mid-term review that has taken place and identifies potential changes to the plan. These changes seek to ensure that relevant issues arising over the past few years are reflected.

**3. Purpose**

3.1 To consider updates to the Corporate Plan following a mid-term review.

**4. Recommendations**

4.1 The Board is asked to consider the possible changes as expressed in the draft Corporate Plan attached at appendix 1 and accept or propose revisions.

**5. Process**

5.1 The Board agreed in May that it was appropriate to undertake a mid-term review of the plan. The review was intended to be limited in scope, with the Board being clear that wholesale changes to the plan were not required or appropriate at this time.

5.2 A range of consultation events have been held with key stakeholders. These have focussed on the mission, values and strategic objectives in the plan.

The majority of consultations were held via MS Teams, with one being a face to face meeting with a TARA. Consultees include:

- 5 tenants sessions including tenants drawn from TRIP, a range of TARAs and the Get Involved Group
- The DMBC Directors Group.
- The Doncaster Together Partnership Horizon Policy and Design Group, which includes a wide range of partners including the Mayor and Deputy Mayor.
- Ward Members as part of the area based forums.
- The Executive Team of SLHD

## 6. Key Issues Identified.

- 6.1 The Corporate Plan 2019-24 was well researched and has proven useful in setting the strategic direction for SLHD. It covers all the main issues pertinent at the time of its inception. Where changes are felt by consultees to be appropriate, these are limited to updating on issues arising over the past 2-3 years, or a change in emphasis and tone.

Feedback, in no particular order, from consultees has identified the following issues:

- **Safety and personal safety** - Building safety and compliance needs to be a clear top priority. In addition to building safety, personal safety and domestic abuse needs to be reflected in the plan. Dealing with anti-social behaviour in its various guises is a recurring theme for those consulted.
- **The plan should not stray too far from core purpose** - Some respondents have felt that St Leger Homes needs to focus on effectively undertaking its core business and that a danger exists in seeking to be too ambitious about what can be achieved by a landlord with finite resources. VFM is a key issue and tenancy and estate management should be key priorities. 'Simple services delivered well'.
- **Support for Environmental agendas** - This issue was a recurring theme. In particular, it included better environmental / green space management, energy efficiency and the challenge of reducing our carbon footprint. Green actions relating to tree planting and horticultural schemes were popular issues. Interesting points concerning how we plan for changes in technology not merely relating to heating homes, but also the switch to electric vehicles and the implications for housing capital investment were raised.
- **A strengthened focus on people** – There was strong support for a shift in emphasis from the plan focussing on housing per se towards a focus on the people who live in St Leger Homes' managed properties. This was not to downplay the need to build our foundations on delivering great housing services, but that a shift in thinking towards what could we do to ensure we had a business wide approach to great customer service, how could we do more to focus on greatest need and seek to promote the wider wellbeing of our tenants. In raising these points some felt the mission statement ("*Provide homes in neighbourhoods that people are proud to live in*") could be adjusted to reflect the core values of social housing and a focus on supporting those in the most need.
- **Ensuring that the plan is felt to be inclusive** and reflective of the needs of a diverse tenant base.

- **Homes and services need to be appropriate for an ageing population** (a key element in our ageing demographic) – Matters raised included future proofing our homes for increasing incidence of disability and frailty and considering the implications for a potentially changing service offer.
- **Poverty** - There was some support for St Leger Homes to contribute to borough wide initiatives aimed at addressing poverty, particularly where this could be related to our core purpose, such as by supporting tenants with budgeting issues and potentially developing a furnished offer.
- **What do we do different and better than other forms of tenure** - In what ways is / should social housing be a tenure of choice and how can the plan reflect this.
- **Thinking about the interplay with the council on aligning values and behaviours.**
- **SLHD as a key player and agent for change in new build council housing and accessing the private rental market.**
- **How we work with our customers** - Maximising the contribution from tenants especially in supporting them to make an impact in their communities and facilitating volunteering opportunities.
- **Ensure that tackling homelessness is a key priority. .**
- **A need to reflect the Regulator of Social Housings' consumer standards.**

## 7. Possible changes

- 7.1 A range of valid constructive issues have been identified. Some of these potentially conflict and a balance has to be struck between ambition and realism. It is unlikely that the management fee will increase and hence for the most part, any new services will have to be delivered within existing resource. That said many of the suggestions relate to approach and emphasis, rather than specific expenditure, for example the shift of approach to people is in large part one of staff focus and attention rather than any significant financial commitment.

A revised Corporate Plan, which adopts many of the changes suggested by consultees is attached as Appendix A.

Key changes include:

1. Potentially changing the mission statement to reflect a focus on supporting people to thrive in our homes.

2. Potentially addressing the importance of our staff within the mission statement.
3. Reordering the objectives so that the people objective comes first.
4. Changing the emphasis of the people objective from 'successful lives' to wellbeing to accord more with the Borough Strategy and in recognition that many of our tenants are not and will not become economically active.
5. Ensuring that building safety, compliance and personal safety are explicitly addressed.
6. Including specific reference to meeting regulatory standards, Decent Homes MK2 and council house new builds.
7. Strengthening the references to seeking the views of our tenants, listening to and acting upon them.

The Board is asked to consider these possible changes as expressed in the draft Corporate Plan attached at Appendix A and accept or propose revisions.

For easy reference, Appendix B is a clean version of the current Corporate Plan.

## **8. Next Steps**

- 8.1 Subject to Board agreement a clean version of the revised plan will be shared with the Council and staff of SLHD prior to it being turned into a final document with appropriate artwork for agreement at a following Board meeting.

## **9. VFM Considerations**

- 9.1 Nothing specific at this point. The importance of VFM has been stressed within the plan.

## **10. Financial Implications**

- 10.1 The plan itself does not commit St Leger Homes to any additional financial implications, however staff resource and potentially expenditure could be required to operationalise some of the issues referenced. If these are in addition to existing commitments they will be carefully considered as part of any scheme development and any significant commitments will be subject to a business case appraisal

## **11. Procurement Implications**

11.1 None.

**12. Legal Implications**

12.1 Not Applicable.

**13. Risks**

13.1 The plan deals with a number of risk issues including a commitment to meeting health, safety and compliance regulations. No specific adverse risks arise from the commitments in the plan.

**14. Health, Safety & Compliance Implication**

14.1 The plan gives specific commitments to meeting these implications.

**15. IT Implications**

15.1 A range of IT implications exist arising from commitments to modernise services and from specific software issues. Any developments will be subject to appropriate business case planning.

**16. Consultation**

16.1 As described above in paragraphs 5.2 and 8.1

**17. Diversity**

17.1 The issue is raised in the report and a commitment given to understanding and meeting the diverse needs of our tenants.

**18. Communication Requirements**

18.1 A communication plan will need to be developed to promote any changes agreed as part of this plan. There could be considerable internal implications to ensure that the changes within the plan are understood and adopted by the workforce. There will also be a need to communicate these changes to both tenants and other stakeholders.

**19. Equality Analysis**

19.1 None undertaken so far, however this will be required and be finalised before the report is presented for final ratification.

**20. Environmental Impact**

20.1 The plan promotes the commitment to energy efficiency and carbon neutrality along with potentially opening up a series of measures designed to improve local neighbourhoods.

**21. Report Author, Position, Contact Details**

21.1 Dave Richmond, Chief Executive  
[Dave.richmond@stlegerhomes.co.uk](mailto:Dave.richmond@stlegerhomes.co.uk)  
01302 862700

**22. Background papers**

22.1 Appendix A – Corporate Plan 2019-24 revised.  
Appendix B – Current Corporate Plan

## Introduction

Welcome to our Corporate Plan for 2019-2024.

Since 2005 St Leger Homes has worked hard on behalf of tenants and residents to deliver high quality, efficient and effective services. We add significant social value to the Doncaster communities we serve as Doncaster Council's award winning social housing company. There has been significant change in social housing in recent years. Whilst challenging, we have seen changes as opportunities to adapt and deliver even better services. We expect the next five years to present us with new challenges and opportunities. Whatever happens, we will be there to support our tenants to sustain their homes. We will continue to champion Doncaster as a great place to live, work, learn and care for others, and we'll keep working with other organisations to improve the Borough for everyone. We will transform our services by taking advantage of modern technology and fulfil our ambition to remain a top performing housing provider. But at its heart housing is a people business, and because we are a social housing provider, we believe in supporting those who face the greatest challenges, therefore it is our mission to be an organisation that :

“provide homes in neighbourhoods that people are proud to live in”

Possible ideas for changing the emphasis of the mission statement:

‘Where tenants are proud to live in a St Leger home and staff are proud to work.’

‘That promotes the wellbeing of our tenants with pride, passion and performance’

‘That enables our tenants’ to live the best possible lives’

“provide homes in neighbourhoods that our tenants are proud to live in and support them to live happy and successful lives”

“Deliver excellent services to our customers and make a difference to their lives”

We have listened to our tenants , customers, staff and partner organisations to produce a plan that reflects our collective ambitions for the next five years. We will focus on the following:

- Promote our customers wellbeing, helping them to lead fulfilling lives
- Create successful, thriving, sustainable tenancies
- Ensure all our homes are **safe**, modern, decent and energy efficient
- Be a top performing housing services provider with national recognition and delivering outcomes for tenants
- Deliver the vision for the borough through innovation and partnership

Our plans to deliver these four strategic objectives are summarised on pages 6 and 7.

Our recent Annual Reviews and Social Audit reports provide detailed information about our performance, which demonstrates how we help transform lives, whether it's cutting down the time our properties are left empty, completing 100% of gas appliance services', or creating new opportunities through our apprenticeships and World of Work schemes. We always strive for excellence in everything we do and we are proud of what we've achieved. You can find out more about our performance on our website at [www.stlegerhomes.co.uk](http://www.stlegerhomes.co.uk)

We will continue to set ourselves ambitious and challenging targets, and review these regularly to make sure we are always improving. We will closely monitor each aspect

of our service delivery and report our progress openly, celebrating our successes and challenging ourselves to do even better. We are flexible and responsive, so each year we will adjust our plans based on emerging priorities. Our detailed plans are presented toward the end of this document. As you read our plans, we hope you will share our pride, ambition and optimism for the future. Working together with others, we believe we can help Doncaster thrive and grow. Thank you for your contributions and continuing support.

#### Profile

St Leger Homes is an Arm's Length Management Organisation (ALMO), established in 2005 to manage the Council's housing stock. We manage over 20,000 council homes, shops, community facilities, garages, Gypsy and Traveller sites, and other residential sites. We manage properties on behalf of private sector landlords via our St Leger

#### Page 2

Lettings service, and undertake the Council's statutory homeless function. Our Board of Directors ensures that St Leger Homes is well managed and takes decisions that promote the long-term success of the company, our tenants and the local area. Reporting to the Board, our Executive Management Team (EMT) oversees the day-to-day running of the business. St Leger Homes is wholly owned by Doncaster Council, so we will continue to present our performance regularly to the Council for scrutiny.

#### Our Values and Behaviours

Our plans are ambitious and optimistic. What we do is important but we also believe in doing things the right way for the right reasons, so we place great emphasis on living our values of Fairness, Empowerment, Excellence and Local. Our values are the foundations for everything we do at St Leger Homes and they influence our behaviour at all times. The four strategic objectives set out in this Corporate Plan align with our four values, keeping us focused on delivering high quality services every day, and helping us to improve. By living our values we set high expectations for ourselves and others.

#### Fairness

We are a customer centred organisation.  
We treat everyone fairly and with respect  
We do the right thing for the right reasons  
We maintain professional boundaries and confidentiality  
We show interest in and empathy for others  
We work safely and considerately.

#### Empowerment

We are optimistic and 'can do'  
We listen and learn from our customers, staff and stakeholders to contribute their views  
We care about our work  
We actively help and support others  
We ask for help and support when needed



We celebrate success.

Excellence

Page 3

We demonstrate a positive attitude

We embrace and support change

We keep up to date with information relevant to our role

We contribute our ideas and solutions

We take personal responsibility for delivering against our commitments.

Local

We positively contribute to the neighbourhood and community of Doncaster

We present a professional and positive image of St Leger Homes

We actively collaborate and work well with others

We inspire others to be part of the continued success of St Leger Homes

We share knowledge and information appropriately

We put customers at the heart of all we do. Make this the first point

Page 5 Promote our tenants wellbeing helping them to lead fulfilling lives

As a social housing provider we seek to promote the wellbeing of our tenants wherever possible. A critical way we can do this is by listening to our tenants and making sure our services meet their needs. Where required we will provide support to help tenants manage their tenancies and also to maximise their opportunities to find and sustain work, manage their finances, improve and maintain their wellbeing and be active participants in shaping their communities.

We will:

- Increase the opportunities for tenants to shape the services they receive.
- Help tenants to sustain their tenancies
- Increase the range of support for tenants especially those with the greatest needs and work closely with external support providers to optimise outcomes for tenants
- Ensure the allocations policy reflects the changing needs of tenants and residents
- Increase engagement with the diverse communities of Doncaster
- Deliver excellent communication with tenants and residents
- Expand our World of Work programme

- Increase the opportunities for volunteering and improving neighbourhoods.
- Work with our partners to prevent homelessness at the earliest opportunity and achieve the vision that no one has to sleep outdoors

Key Indicators For: tenants wellbeing helping them to lead fulfilling lives

Measure	Aim
Number of tenants involved	Increase
Improvements made due to tenant involvement	Increase
Tenancies sustained	Increase
Rent arrears	Decrease
Percentage of anti-social behaviour (ASB) cases resolved	Increase
Tenant satisfaction levels	Increase
Number of tenants and residents helped into training and employment	Increase

## Objective

All our homes are **safe**, modern, decent, and energy efficient

We will provide high quality accommodation in safe, well kept neighbourhoods that people want to live in. We will ensure our homes meet all regulatory safety standards, that they are accessible and meet the evolving needs and demands of our tenants. We will help build sustainable communities, work hard to meet the challenges of the climate emergency, work with the Council to develop our housing stock, providing valued community spaces and regularly reviewing our lettings policies to ensure they continue to be fit for purpose.

We will:-

- Ensure our homes are safe and free from hazards and **meet all regulatory standards**

## Page 4

- 
- Deliver an efficient and effective repairs and maintenance service
- Make best use of Doncaster Council's housing stock
- Maximise opportunities to grow the Council's housing stock
- Review age designation and local lettings policies
- Provide communal halls and spaces which the community value
- Deliver our environmental and asset management strategies
- Improve the thermal efficiency and flood resilience of tenants homes
- *Grasp any opportunities arising out of a future Decent Homes programme*
- Work with partners to increase the numbers of social housing and the opportunities for accessing other housing tenures by forming strategic and operational partnerships with Registered Social Landlords and the Private Rented Sector
- Offer a sustainable and value for money gardening service

Key Indicators For: All our homes are Safe modern, decent and energy efficient

Measure	Aim
Percentage of homes maintaining Decent Homes standard	Maintain
Repairs completed at first visit	Increase
Gas servicing percentage of properties attended against target	Maintain
Number of properties managed	Increase
Level of tenant satisfaction with property condition	Increase
Energy efficiency of properties	Increase

Objective

Page 9 & 10

Objective -

We will be a top performing housing service.

We will continue to improve our performance and be recognised for delivering outstanding customer outcomes. in ways that are modern, efficient, effective and safe. Key to this will be ensuring our staff have the knowledge, skills, equipment and working conditions they need to excel in their jobs now and in the future. Offering great value for money is an important element of why we exist. To ensure we can deliver this we will modernise the ways we work, delivering our services as efficiently as possible and at times and places that make the most sense for our customers.. As well as becoming better at what we do, we will remain true to our values and move towards a workforce that reflects the population we serve.

We will:

- Embed a positive health, safety and wellbeing culture
- Work in ways which reflect our values
- Deliver value for money services
- Use technology to modernise and transform service delivery
- Continue to develop our workforce
- Continuously improve our business processes
- Improve the extent to which our workforce reflects the Doncaster population
- Deliver award winning services and achieve appropriate accreditations
- Operate commercially
- Ensure our business accommodation is fit for purpose
- Improve communications internally and with external stakeholders

Key Indicators For: We will be a nationally recognised provider of housing services

Measure

Aim

Number of standard void re-let days	Decrease
Percentage of complaints upheld against interactions	Decrease
Staff sickness absence levels	Decrease
Proportion of invoices paid on-time	Increase
Our performance against comparable organisations	Increase
Rent loss from empty properties	Decrease
Compliance with ISO45001 health and safety management system	Maintain
Health & Safety outcomes	Improve

Page 11

Objective Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together

We know that our services are vital to the communities of Doncaster. As a member of the Team Doncaster partnership, we will continue to work closely with local public, private, voluntary and community organisations to deliver the aims of Doncaster Growing Together, making Doncaster an even better place to work, learn, live and care for others. Our plans are aligned with the four priorities of Doncaster Growing Together.

We will:-

Working

- Increase employment opportunities
- Maximise use of local suppliers

Learning

- Continue to develop our workforce
- Continue to provide learning and development opportunities for members of Doncaster communities

Living

- Reduce and prevent homelessness
- Support the development of new homes
- Provide support to help improve tenancy sustainability
- Play our part in helping to reduce poverty
- 
- Support the 'This is my Doncaster' campaign and ensure all our land and assets are clean, green and well maintained
- Provide safer neighbourhoods through reduced anti-social behaviour and crime

## Caring

- Work with Doncaster Council to develop housing that is appropriate to the changing needs of tenants
- Work hard to ensure the personal safety of our tenants
- Provide systems to support independent living
- Help to provide supported accommodation
- Support the development of the health and social care partnership
- Enable people to live independently for longer

Key Indicators For: Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together

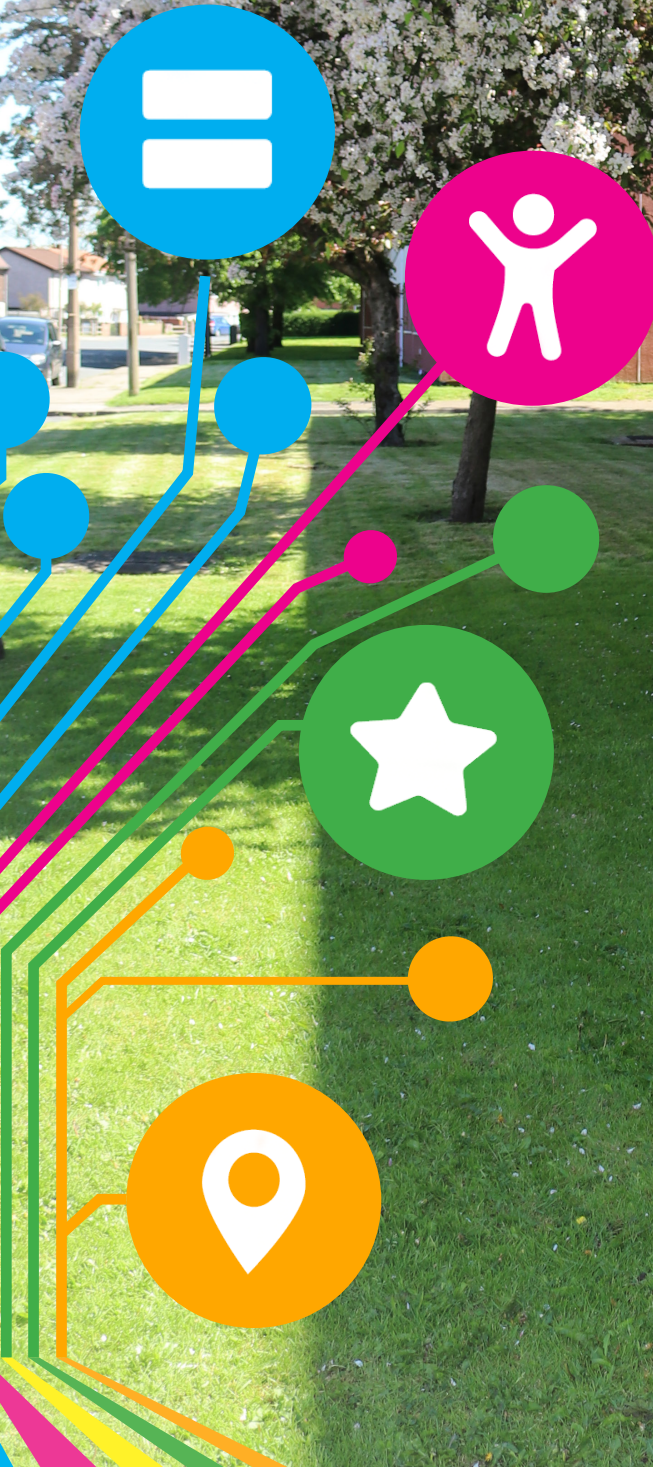
Measure	Aim
Number of households in “bed and breakfast”	Decrease
Number of homelessness acceptances	Decrease
Number of homelessness preventions	Increase
Proportion of our expenditure spent in Doncaster	Increase
Recognition for our contribution to a growing and successful Doncaster	Improve
Public sector apprenticeship target	Increase
Contribution to partnerships	Improve

Customer Involvement evaluation	Improve
World of Work participation rates and outcomes	Increase

Page 12

Pages 13 and 14 – are the ADP with 5 year action plan  
Delivering Our Objectives: 5 Year Action Plan

*If you need this detail, I'll do it but all the actions are in separate text boxes so may take some time and I'll still need to pop them into text boxes so you can read across them*



# CORPORATE PLAN 2019 - 2024

*Provide homes in neighbourhoods  
that people are proud to live in*



# Introduction

Welcome to our Corporate Plan for 2019-2024.

Since 2005 St Leger Homes has worked hard on behalf of tenants and residents to deliver high quality, efficient and effective services. We add significant social value to the Doncaster communities we serve as Doncaster Council's award winning social housing company. There has been significant change in social housing in recent years. Whilst challenging, we have seen changes as opportunities to adapt and deliver even better services. We expect the next five years to present us with new challenges and opportunities. Whatever happens, we will be there to support our tenants to sustain their homes. We will continue to champion Doncaster as a great place to work, live, learn and care for others, and we'll keep working with other organisations to improve the Borough for everyone. We will transform our services by taking advantage of modern technology and fulfil our ambition to remain a top performing housing provider. It is our mission to:

*“provide homes in neighbourhoods that people are proud to live in”*

We have listened to our tenants and customers, our staff and partner organisations to produce a plan that reflects our collective ambitions for the next five years. We will focus on the following:

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

Our plans to deliver these four strategic objectives are summarised on pages 6 and 7.

Our recent Annual Reviews and Social Audit reports provide detailed information about our performance, which demonstrates how we help transform lives, whether it's cutting down the time our properties are left empty, completing 100% of gas appliance services', or creating new opportunities through our apprenticeships and World of Work schemes. We always strive for excellence in everything we do and we are proud of what we've achieved. You can find out more about our performance on our website at [www.stlegerhomes.co.uk](http://www.stlegerhomes.co.uk)

We will continue to set ourselves ambitious and challenging targets, and review these regularly to make sure we are always improving. We will closely monitor each aspect of our service delivery and report our progress openly, celebrating our successes and challenging ourselves to do even better. We are flexible and responsive, so each year we will adjust our plans based on emerging priorities. Our detailed plans are presented toward the end of this document. As you read our plans, we hope you will share our pride, ambition and optimism for the future. Working together with others, we believe we can help Doncaster thrive and grow. Thank you for your contributions and continuing support.



Alan Tolhurst OBE  
Chair of the Board



Paul Tanney  
Chief Executive

## Organisational Profile

St Leger Homes is an Arm's Length Management Organisation (ALMO), established in 2005 to manage the Council's housing stock. We manage over 20,000 council homes, shops, community facilities, garages, Gypsy and Traveller sites, and other residential sites. We manage properties on behalf of private sector landlords via our St Leger Lettings service, and undertake the Council's statutory homeless function. Our Board of Directors ensures that St Leger Homes is well managed and takes decisions that promote the long-term success of the company, our tenants and the local area. Reporting to the Board, our Executive Management Team (EMT) oversees the day-to-day running of the business. St Leger Homes is wholly owned by Doncaster Council, so we will continue to present our performance regularly to the Council for scrutiny.

# Our Values and Behaviours

Our plans are ambitious and optimistic. What we do is important but we also believe in doing things the right way for the right reasons, so we place great emphasis on living our values of Fairness, Empowerment, Excellence and Local. Our values are the foundations for everything we do at St Leger Homes and they influence our behaviour at all times. The four strategic objectives set out in this Corporate Plan align with our four values, keeping us focused on delivering high quality services every day, and helping us to improve. By living our values we set high expectations for ourselves and others.



## Fairness

- We treat everyone fairly and with respect
- We do the right thing for the right reasons
- We maintain professional boundaries and confidentiality
- We show interest in and empathy for others
- We work safely and considerately.



## Empowerment

- We are optimistic and 'can do'
- We listen and encourage others to contribute their views
- We care about our work
- We actively help and support others
- We ask for help and support when needed
- We celebrate success.



## Excellence

- We demonstrate a positive attitude
- We embrace and support change
- We keep up to date with information relevant to our role
- We contribute our ideas and solutions
- We take personal responsibility for delivering against our commitments.



## Local

- We present a professional and positive image of St Leger Homes
- We actively collaborate and work well with others
- We inspire others to be part of the continued success of St Leger Homes
- We share knowledge and information appropriately
- We put customers at the heart of all we do.



# Objective: All our homes are modern, decent, safe and energy efficient

We will provide high quality accommodation in safe, tidy neighbourhoods that people want to live in. We will use modern tools and materials to improve properties, ensuring they are safe, accessible and meet the evolving needs and demands of our tenants. We will help build sustainable communities, working with the Council to develop our housing stock, providing valued community spaces and regularly reviewing our lettings policies to ensure they continue to be fit for purpose.

We will:

- Ensure our homes are safe and free from hazards
- Continue to invest in homes and neighbourhoods
- Deliver an efficient and effective repairs and maintenance service
- Make best use of Doncaster Council’s housing stock
- Maximise opportunities to grow the Council’s housing stock
- Review age designation and local lettings policies
- Provide communal halls and spaces which the community value
- Deliver our environmental strategy
- Offer a sustainable gardening service

## Key Indicators For: All our homes are modern, decent and energy efficient

Measure	Aim
Percentage of homes maintaining Decent Homes standard	Maintain
Repairs completed at first visit	Increase
Gas servicing percentage of properties attended against target	Maintain
Number of properties managed	Increase
Level of tenant satisfaction with property condition	Increase
Energy efficiency of properties	Increase



Image: New House Builds, Doncaster

# Objective: Our tenants live successful and fulfilling lives

We will provide a range of support not only to help tenants manage their tenancies, but also to maximise opportunities for tenants and residents to find and sustain work, manage their finances, maintain their wellbeing, use technology, and participate in community activities – as well as helping those with more complex needs. We will increase engagement with all the diverse communities across Doncaster, and involve more people in shaping our business, so that the services we provide continue to reflect the changing needs of our tenants and their local communities.

We will:

- Help tenants to sustain their tenancies
- Increase the range of support for tenants
- Ensure the allocations policy reflects the changing needs of tenants and residents
- Increase engagement with the diverse communities of Doncaster
- Increase tenant and community member involvement in our business
- Improve communication with tenants and residents
- Expand our World of Work programme

## Key Indicators For: Our tenants live successful and fulfilling lives

Measure	Aim
Number of tenants involved	Increase
Improvements made due to tenant involvement	Increase
Tenancies sustained	Increase
Rent arrears	Decrease
Percentage of anti-social behaviour (ASB) cases resolved	Increase
Tenant satisfaction levels	Increase
Number of tenants and residents helped into training and employment	Increase



Image: BeFriend Community Group



**Our Plans**

**Working:**

- Increase employment opportunities
- Maximise use of local suppliers

**Learning:**

- Continue to develop our workforce
- Continue to provide learning and development opportunities for members of Doncaster communities

**Living:**

- Reduce and prevent homelessness
- Support the development of new homes
- Provide support to help improve tenancy sustainability
- Help to deliver anti-poverty commitments
- Support the 'this is my Doncaster' campaign and ensure all our land and assets are clean, green and well maintained
- Provide safer neighbourhoods through reduced anti-social behaviour and crime

**Caring:**

- Work with the Council to develop housing for older people
- Promote the Commitment to the Safeguarding agenda to keep our customers safe
- Provide systems to support independent living
- Help to provide supported accommodation
- Support the development of the health and social care partnership
- Enable people to live independently for longer

**Measures of Success**

- Number of households in "bed and breakfast"
- Number of homelessness acceptances
- Number of homelessness preventions
- Proportion of our expenditure spent in Doncaster
- Recognition for our contribution to a growing and successful Doncaster
- Public sector apprenticeship target
- Contribution to partnerships
- Customer Involvement evaluation
- World of Work participation rates and outcomes

ALL OUR  
ARE MOD  
DECENT  
ENER  
EFFICI

THROUGH  
INNOVATION AND  
PARTNERSHIP,  
WE WILL DELIVER  
THE AIMS OF  
DONCASTER  
GROWING  
TOGETHER

PROVI  
HOME  
NEIGHBOU  
THAT PE  
ARE PRO  
LIVE

**Our Plans**

- Embed a positive health, safety and wellbeing culture
  - Work in ways which reflect our values
  - Deliver value for money services
- Use technology to modernise and transform service delivery
  - Continue to develop our workforce
- Continuously improve our business processes
  - Improve the extent to which our workforce reflects the Doncaster population
- Deliver award winning services and achieve appropriate accreditations
  - Operate commercially
- Ensure our business accommodation is fit for purpose
  - Improve communications internally and with external stakeholders

**Measures of Success**

- Number of standard void re-let days
- Percentage of complaints upheld against interactions
  - Staff sickness absence levels
- Proportion of invoices paid on-time
  - Our performance against comparable organisations
- Rent loss from empty properties
- Compliance with ISO45001 health and safety management system
- Health & Safety outcomes

WE WILL  
NATION  
RECOGN  
HOUS  
SERVIC  
PROVID



### Measures of Success

- Percentage of homes maintaining Decent Homes standard
- Repairs completed at first visit
- Gas servicing percentage of properties attended
- Number of properties managed
- Level of tenant satisfaction with property condition
- Energy efficiency of properties

OUR HOMES  
MODERN,  
EFFICIENT AND  
ENERGY  
EFFICIENT

### Our Plans

- Ensure our homes are safe and free from hazards
- Continue to invest in homes and neighbourhoods
  - Deliver an efficient and effective repairs and maintenance service
- Make best use of Doncaster Council's housing stock
- Maximise opportunities to grow the Council's housing stock
  - Review age designation and local lettings policies
    - Provide communal halls and spaces which the community value
  - Deliver our environmental strategy
    - Offer a sustainable gardening service

PROVIDING  
HOMES IN  
OURHOODS  
PEOPLE  
PROUD TO  
LIVE IN

OUR TENANTS  
LEAD  
SUCCESSFUL  
AND FULFILLING  
LIVES

### Our Plans

- Help tenants to sustain their tenancies
- Increase the range of support for tenants
  - Ensure the allocations policy reflects the changing needs of tenants and residents
  - Increase engagement with the diverse communities of Doncaster
  - Increase tenant and community member involvement in our business
- Improve communication with tenants and residents
  - Expand our World of Work programme

WILL BE A  
PERSONALLY  
RECOGNISED  
USING  
SERVICES  
PROVIDER

### Measures of Success

- Number of tenants involved
- Improvements made due to tenant involvement
  - Tenancies sustained
    - Rent arrears
- Percentage of ASB cases resolved
  - Tenant satisfaction levels
- Number of tenants and residents helped into training and employment



# Objective: We will be a nationally recognised provider of housing services

We will continue to improve our performance and be recognised as an award winning housing provider delivering high quality services in ways that are modern, efficient, effective and safe. Key to this will be ensuring our staff have the knowledge, skills, equipment and working conditions they need to excel in their jobs now and in the future. We will take advantage of modern technology where appropriate, improving how we use IT, and also making use of innovations in the tools and materials we use for the wide range of tasks that we carry out every day. As well as becoming better at what we do, we will remain true to our values and move towards a workforce that reflects the population we serve.

We will:

- Embed a positive health, safety and wellbeing culture
- Work in ways which reflect our values
- Deliver value for money services
- Use technology to modernise and transform service delivery
- Continue to develop our workforce
- Continuously improve our business processes
- Improve the extent to which our workforce reflects the Doncaster population
- Deliver award winning services and achieve appropriate accreditations
- Operate commercially
- Ensure our business accommodation is fit for purpose
- Improve communications internally and with external stakeholders

## Key Indicators For: We will be a nationally recognised provider of housing services

Measure	Aim
Number of standard void re-let days	Decrease
Percentage of complaints upheld against interactions	Decrease
Staff sickness absence levels	Decrease
Proportion of invoices paid on-time	Increase
Our performance against comparable organisations	Increase
Rent loss from empty properties	Decrease
Compliance with ISO45001 health and safety management system	Maintain
Health & Safety outcomes	Improve



Image: Tenants' Choice Awards

# Objective: Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together

We know that our services are vital to the communities of Doncaster. As a member of the Team Doncaster partnership, we will continue to work closely with local public, private, voluntary and community organisations to deliver the aims of Doncaster Growing Together, making Doncaster an even better place to work, learn, live and care for others. Our plans are aligned with the four priorities of Doncaster Growing Together.

We will:

## Working

- Increase employment opportunities
- Maximise use of local suppliers

## Learning

- Continue to develop our workforce
- Continue to provide learning and development opportunities for members of Doncaster communities

## Living

- Reduce and prevent homelessness
- Support the development of new homes
- Provide support to help improve tenancy sustainability
- Help to deliver anti-poverty commitments
- Support the 'This is my Doncaster' campaign and ensure all our land and assets are clean, green and well maintained
- Provide safer neighbourhoods through reduced anti-social behaviour and crime

## Caring

- Work with Doncaster Council to develop housing for older people
- Promote the Commitment to Safeguarding agenda to keep our customers safe
- Provide systems to support independent living
- Help to provide supported accommodation
- Support the development of the health and social care partnership
- Enable people to live independently for longer



Image: Staff conference consultation

## Key Indicators For: Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together

Measure	Aim
Number of households in "bed and breakfast"	Decrease
Number of homelessness acceptances	Decrease
Number of homelessness preventions	Increase
Proportion of our expenditure spent in Doncaster	Increase
Recognition for our contribution to a growing and successful Doncaster	Improve
Public sector apprenticeship target	Increase
Contribution to partnerships	Improve
Customer Involvement evaluation	Improve
World of Work participation rates and outcomes	Increase



# Delivering Our Objectives: 5 Year Action Plan

Objective	Our Plans	2019/20
 <p><b>All our homes are modern, decent, safe and energy efficient</b></p>	<ul style="list-style-type: none"> <li>• Ensure our homes are safe and free from hazards</li> <li>• Continue to invest in homes and neighbourhoods</li> <li>• Deliver an efficient and effective repairs and maintenance service</li> <li>• Make best use of Doncaster Council's housing stock</li> <li>• Maximise opportunities to grow the Council's housing stock</li> <li>• Review age designation and local lettings policies</li> <li>• Provide communal halls and spaces which the community value</li> <li>• Deliver our environmental strategy</li> <li>• Offer a sustainable gardening service</li> </ul>	<p>Understand the implications of the Independent Review of Building Regulations and Fire Safety (Hackitt) and plan changes based on recommendations.</p> <p>Develop and deliver a Gypsy &amp; Traveller and Residential investment plan.</p> <p>Carry out a review of scheduled repairs and begin implementing any resulting improvements.</p> <p>Review the Housing Revenue Account Asset Management Strategy</p> <p>Support the Council in the development of its new house building programme.</p> <p>Review all Local Lettings Policies</p> <p>Implement findings from Communal Hall Review</p> <p>Undertake a review of the gardening service</p>
 <p><b>Our tenants live successful and fulfilling lives</b></p>	<ul style="list-style-type: none"> <li>• Help tenants to sustain their tenancies</li> <li>• Increase the range of support for tenants</li> <li>• Ensure the allocations policy reflects the changing needs of tenants and residents</li> <li>• Increase engagement with the diverse communities of Doncaster</li> <li>• Increase tenant and community member involvement in our business</li> <li>• Improve communication with tenants and residents</li> <li>• Expand our World of Work programme</li> </ul>	<p>Produce Housing Management Strategy 'Support to Sustain'</p> <p>Review Customer Access Strategy</p> <p>Review External Communications</p> <p>Deliver WOW Strategy</p>
 <p><b>We will be a nationally recognised provider of housing services</b></p>	<ul style="list-style-type: none"> <li>• Embed a positive health, safety and wellbeing culture</li> <li>• Work in ways which reflect our values</li> <li>• Deliver value for money services</li> <li>• Use technology to modernise and transform service delivery</li> <li>• Continue to develop our workforce</li> <li>• Continuously improve our business processes</li> <li>• Improve the extent to which our workforce reflects the Doncaster population</li> <li>• Deliver award winning services and achieve appropriate accreditations</li> <li>• Operate commercially</li> <li>• Ensure our business accommodation is fit for purpose</li> <li>• Improve communications internally and with external stakeholders</li> </ul>	<p>Review the health, safety and wellbeing strategy</p> <p>Deliver current People Strategy action plan and produce revised People Strategy</p> <p>Review internal communication</p> <p>Develop and begin implementing a Channel Shift Strategy</p> <p>Implement The One Project, replacing key IT systems and driving Customer Focussed culture change.</p> <p>Implement iTrent HR</p> <p>Develop new/revised ICT Strategy</p> <p>Produce revised People Strategy</p> <p>Develop and deliver a programme of Business Transformation reviews</p> <p>Review annual awards and accreditations plan</p> <p>Review the St. Leger Lettings model</p> <p>Carry out a review of internal and external communications</p>
 <p><b>Through innovation and partnership working, we will deliver the aims of Doncaster Growing Together</b></p>	<p><b>Working:</b></p> <ul style="list-style-type: none"> <li>• Increase employment opportunities</li> <li>• Maximise use of local suppliers</li> </ul> <p><b>Learning:</b></p> <ul style="list-style-type: none"> <li>• Continue to develop our workforce</li> <li>• Continue to provide learning and development opportunities for members of Doncaster communities</li> </ul> <p><b>Living:</b></p> <ul style="list-style-type: none"> <li>• Reduce and prevent homelessness</li> <li>• Support the development of new homes</li> <li>• Provide support to help improve tenancy sustainability</li> <li>• Help to deliver anti-poverty commitments</li> <li>• Support the 'this is my Doncaster' campaign and ensure all our land and assets are clean, green and well maintained</li> <li>• Provide safer neighbourhoods through reduced anti-social behaviour and crime</li> </ul> <p><b>Caring:</b></p> <ul style="list-style-type: none"> <li>• Work with the Council to develop housing for older people</li> <li>• Promote the Commitment to the Safeguarding agenda to keep our customers safe</li> <li>• Provide systems to support independent living</li> <li>• Help to provide supported accommodation</li> <li>• Support the development of the health and social care partnership</li> <li>• Enable people to live independently for longer</li> </ul>	<p>Produce revised People Strategy</p> <p>Support the Council to develop its Homelessness and Rough Sleeping Strategy</p> <p>Carry out a borough-wide pilot of the furniture re-use project</p> <p>Increase effectiveness of estate walks</p> <p>Develop and implement an Empty Property strategy</p> <p>Embed internal support. Managed by local offices offer support, refer if required.</p>

	2020/21	2021/22	2022/23	2023/24
	<p>Implement recommendations resulting from the Independent Review of Building Regulations and Fire Safety (Hackitt)</p> <p>Deliver a Gypsy &amp; Traveller and Residential investment plan.</p> <p>Undertake asset modelling.</p> <p>Review age designated housing and begin delivery of resulting actions</p> <p>Phase 2 review of communal halls</p> <p>Develop and deliver revised Environmental Strategy</p> <p>Pilot implementation of retro-fit energy efficient building improvements</p> <p>Implement a Borough wide pilot to re-use furniture</p> <p>Delivery of ECO "round 2"</p> <p>Implement actions from the gardening service review</p>	<p>Deliver a Gypsy &amp; Traveller and Residential investment plan.</p> <p>Implement a Borough wide pilot to re-use furniture</p> <p>Expand gardening service to private sector</p>	<p>Deliver a Gypsy &amp; Traveller and Residential investment plan.</p>	<p>Deliver a Gypsy &amp; Traveller and Residential investment plan.</p>
	<p>Embed the 'support to sustain' culture across the organisation</p> <p>Review tenancy sustainment team and implement any resulting actions</p> <p>Full review of housing management functions and structures</p> <p>Develop estate profiling to target resources effectively</p> <p>Review housing support to enable independent living</p> <p>Review Gypsy &amp; Traveller and Residential Allocations Policy</p> <p>Gypsy and Traveller Strategy</p> <p>Review the Fairness and Equality Strategy</p> <p>Develop revised WOW Strategy</p>	<p>Review the Allocations Policy</p> <p>Review Tenant Engagement Strategy</p>		
	<p>Implement Channel Shift Strategy Action Plan</p> <p>Conduct a social audit and publish Social Accounts</p> <p>Implement The One Project, replacing key IT systems and driving Customer Focussed culture change.</p> <p>Deliver ICT Strategy Action Plan</p> <p>Deliver revised People Strategy action plan</p> <p>Review the Fairness and Equality Strategy</p> <p>Review opportunities to expand commercially</p> <p>Develop business accommodation strategy</p>	<p>External Re-accreditation for workplace wellbeing</p> <p>Implement Channel Shift Strategy Action Plan</p> <p>Deliver ICT Strategy Action Plan</p> <p>Deliver revised People Strategy action plan</p>	<p>Deliver revised People Strategy action plan</p>	<p>External Re-accreditation for workplace wellbeing</p> <p>Conduct a social audit and publish Social Accounts</p>
	<p>Review Procurement Strategy</p> <p>Develop revised WOW Strategy</p> <p>Begin to implement revised model of homeless accommodation</p> <p>Review temporary accommodation model</p> <p>Review impact of Homeless Reduction Act</p> <p>Review future of furniture re-use</p> <p>Develop and implement an evaluation framework for anti-social behaviour to monitor and measure satisfaction and effectiveness</p> <p>Develop and begin implementing action plan to reduce the use of temporary accommodation</p> <p>Review product and work specs to aid lifetime homes in our properties</p>	<p>Review technologies to support independent living and develop action plans for implementation of opportunities identified</p>		



Corporate Plan 2019 - 2024  
St Leger Homes of Doncaster Ltd  
St Leger Court  
White Rose Way  
Doncaster  
DN4 5ND

[www.stlegerhomes.co.uk](http://www.stlegerhomes.co.uk)

# **ST LEGER HOMES OF DONCASTER LTD**

Company limited by guarantee registered in England  
Company Number 05564649

## **Board Meeting**

# **REPORT**

**Date** : 07 October 2021

**Item** : 08

**Subject** : Health, Safety and Compliance Report

**Presented by** : Chris Margrave  
Director of Property Services

**Prepared by** : Laura Dougan  
Health, Safety & Compliance  
Service Manager

**Purpose** : Provide an update on health, safety  
and compliance performance

### **Recommendation :**

Members of the Board are asked to note the contents of this report alongside current performance in relation to health, safety and compliance as detailed at Appendix 1.

**To the St Leger Homes of Doncaster Board**

**Agenda Item No. 08**  
**Date: 07 October 2021**

**1. Report Title**

1.1 Health, Safety and Compliance Report – August 2021.

**2. Executive Summary**

2.1 The following report gives an overview of the current position relating to key areas of health & safety compliance. Key issues to note are:

- 100% lift statutory inspections and routine maintenance completed.
- 100% water hygiene management risk assessments completed
- 100% of properties are compliant with SLHD process for gas compliance
- 100% of buildings that require a fire risk assessment have an in date assessment.
- 791/1106 (71.5%) recommendations from fire risk assessments for level 1 buildings completed; a 5.23% increase on the previous month. Of the actions outstanding, 137 are within timescale. 194 recommendations have exceeded the original target deadline; this is a decrease of 42.
- 509/923 (55.14%) recommendations from fire risk assessments for level 2 buildings completed; this is a decrease (1.54%) on previous as the number of overall actions has increased with new FRAs. Of the actions outstanding, 277 are within the timescale. 137 recommendations have exceeded their original target date; this is an increase of 2.
- 1974/6797 (29.4%) recommendations from fire risk assessments for level 3 buildings completed; a 2.2% increase on the previous month. Of the actions outstanding, 4439 are within timescale. 384 recommendations had exceeded their original target date; this is an increase of 38.
- 99.94% of the domestic housing stock has had an electrical periodic test within the last 10 years. (12 properties have not)
- 55.00% of the domestic housing stock has had an electrical periodic test within the last 5 years.
- 99.82% compliance on the re-inspection programme as required by Control of Asbestos Regulations 2012.

2.2 The format of this report including performance measurement indicators will continue to be reviewed over the next few months taking into account the findings from the Compliance Health Checks and Data Validation exercise. The aim will be to present a new report format to relevant stakeholders by the third quarter of 2021/22 at the latest.

**3. Purpose**

3.1 The purpose of this report is to provide an update on health, safety and compliance performance as at the end of August 2021.

## **4. Recommendation**

- 4.1 Members of the Board are asked to note the contents of this report alongside current performance in relation to health, safety and compliance as detailed at Appendix 1.

## **5. Background**

- 5.1 This health, safety and compliance report is updated monthly and provides information and assurances that St Leger Homes has compliant processes and controls in place to effectively manage key health, safety and compliance risks to the company.

This includes the six key compliance areas of fire safety management, gas, electrical, asbestos, lifts and water hygiene; along with other compliance areas that St Leger Homes needs to monitor performance on.

- 5.2 Wider health and safety issues are also covered within this report. This includes the health, safety and wellbeing of our employees, customers and contracting partners.

Performance is monitored within each section.

The report is shared with St Leger Homes Board (every other meeting), St Leger Homes Executive Management Team (monthly), Joint Safety Committee (quarterly) and the Building, Safety and Compliance Committee (quarterly).

## **6. Coronavirus (COVID-19)**

Following government guidance and national review of self-isolation risk assessments were reviewed in August. Changes follow this guidance and will be reviewed with any national or local changes.

The impact of employees testing positive or self-isolating, following new government rules, continues to be monitored. Cumulatively at the end of August 133 employees have tested positive for COVID-19 and have followed government guidance on isolating.

## **7. Fire Safety Management**

### **7.1 Key Legislation and Guidance**

- Regulatory Reform (Fire Safety) Order 2005
- Fire Safety Act 2021
- Local Government Association Guidance – Fire Safety in Purpose Built Blocks of Flats (updated May 2012)
- The Housing Act 2004
- The Housing Health and Safety Rating System (HHSRS)

## 7.2 Fire Risk Assessment (FRA) Status

A smoothed programme has been developed for FRAs to run over 3 years. This will retain all anniversary dates of assessments but smooths the programme out which is easier for delivery of actions.

<b>Smoothed FRA Programme Update</b>	
Total number of properties on programme	907
Total number CAT B properties (not requiring an FRA)	428
Total number communal properties (requiring an FRA)	479
Total number of communal properties, with an in-date FRA	479
Total number of communal properties that require an anniversary survey (2021/22)	207
Total number of communal properties that have had an anniversary survey carried out (2021/22)	86
Total number of communal properties that have an anniversary survey planned in (2021/22)	121

### **Smoothed Programme Update – August 2021**

<b>Risk Level of Building</b>	<b>Number required in August</b>	<b>Number completed in August</b>
Level 1	3	3
Level 2	3	3
Level 3	12	12

### **Smoothed Programme Upcoming – September 2021**

<b>Risk Level of Building</b>	<b>Number required in September</b>
Level 1	3
Level 2	3
Level 3	12

## 7.3 FRA Recommendations

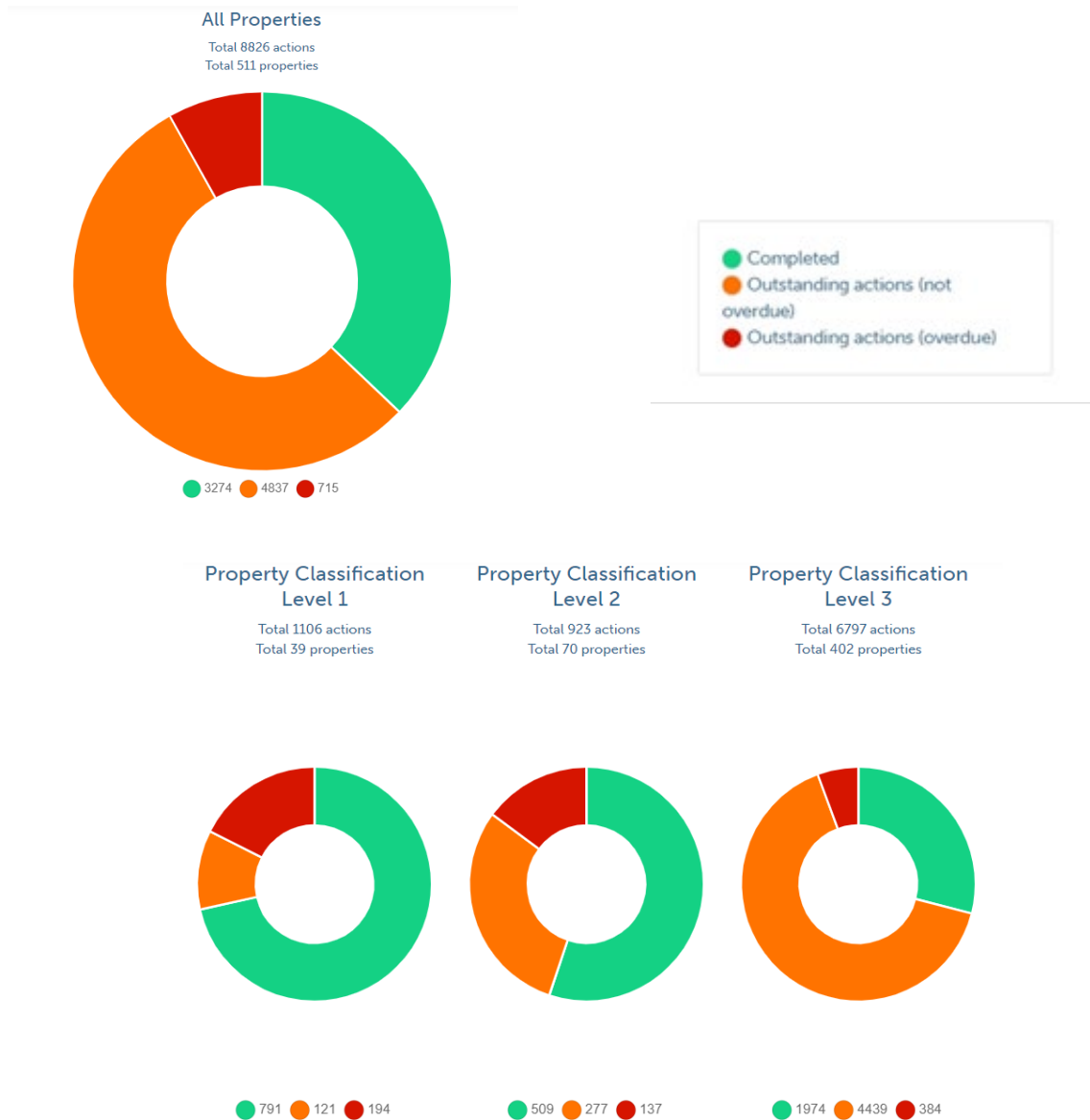
Recommendations from all the FRAs that Savills have completed are shown below. Any further recommendations as a result of fire risk assessments will be managed in the same way through Riskhub (Savills database).

Programmes of work are being created to address the recommendations that will need to be delivered. This will require in house and contract resources. These are being managed with the aim of avoiding recommendations becoming overdue unnecessarily.

Our fire safety consultants categorise buildings depending on risk with three levels of buildings (below with examples of building types) –

- Level 1 – high rises, specialised housing, group homes
- Level 2 – communal halls, caravan sites, low rises (dependent on storeys / number of flats), offices
- Level 3 – low rise blocks (dependent on storeys / number of flats).

Due dates on recommendations are based on the level of risk.



In total there were 8826 recommendations from FRA. To date 3274 have been completed, 4837 are outstanding but not overdue this is a significant reduction overall. There are however 715 outstanding and overdue

During August a further 204 recommendations were completed. Ongoing focus has been placed on closing these actions and it involves communication and action from teams all across the organisation.



## 7.4 Overdue Recommendations

At the end of August there were 715 recommendations overdue.

Work is ongoing with Savills to close a number of management related actions. This requires a detailed review of all actions and agreement of approach with Savills. These numbers will be reflected in the next report when they are closed out on riskhub.

This is an increase in all levels buildings and appendix 2 gives more details of the overdue recommendations.

Fortem had been engaged to deliver works from FRAs but gave notification that they would not be continuing with these works. Discussions have been ongoing with Fortem to achieve a resolution to this. A commercial agreement has been made to start work on actions relating level 1 buildings with sleeping accommodation (17). This equates to 162 actions. Further contract arrangements are to be made to deliver other contract actions. Other overdue recommendations are either works items to be delivered internally by in-house teams or management recommendations; these are being actively worked on to complete as soon as practicable.

## 8. **Asbestos Management**

### 8.1 Key Legislation and Guidance

- Health and Safety at Work etc. Act 1974
- The Control of Asbestos Regulations 2012

### Surveys and Re-inspections

The legislation for asbestos management places a responsibility primarily with the common areas of properties (regulation 4 of the Control of Asbestos Regulations 2012) and where this impacts on our own workforce and contractors. This extends into domestic properties where they become workplaces i.e. where we are carrying out work in domestic properties.

St Leger Homes have a duty of care under the Health & Safety at Work etc. Act and Housing legislation to protect both workers and residents.

There are two main types of asbestos surveys –

- Management surveys
- Refurbishment and demolition surveys

Surveys may identify actions required including re-inspections of asbestos containing material that may need to be managed in place.

- 8.2 A programme of new communal management surveys was carried in 2020/21 giving us complete and up to date information. This information is now driving our re-inspection programme and will help with developing any planned programmes of work.

Number of communal with Compliant CAR2012 Reg4 Management survey <b>NO ASBESTOS IDENTIFIED</b>	326
Number of communal with Compliant CAR2012 Reg4 Management survey <b>WITH ASBESTOS IDENTIFIED</b>	559
Number of communal properties with asbestos that have had a re-inspection carried out within anniversary date of Management survey	355
Number of communal properties with asbestos that have <b>NOT</b> had a re-inspection carried out within anniversary date of Management survey	1
Number of communal properties with asbestos identified that have re-inspection survey planned to meet the anniversary date of Management survey	204
Number of remedial works actioned and closed following recommendations from re-inspection survey	11
Number of remedial works pending following recommendations from re-inspection survey	1

The one reinspection outstanding relates to access to loft for re-inspection survey, loft hatch has been padlocked potentially by a tenant, Housing Management are investigating.

### 8.3 Domestic Properties

We hold some form of asbestos information for 19,563 properties out of 20,055. The type and quality of the information varies dependent on a number of factors such as when the information was collected and the surveying contractor. For the move to Open Housing and C365 a review of this data has taken place. This has identified that a proportion of the data is not valid and does not support the new surveying strategy in the recently approved Asbestos Management Policy and Plan. This data will be cleansed before going into the new asbestos register to leave us with a valid and robust data set that we can build on in the future surveying strategy.

## 9. Water Hygiene (Legionella)

### 9.1 Key Legislation and Guidance

- Control of Substances Hazardous to Health regulations 2002
- Approved Code of Practice and Guidance L8 (ACoP) 2013
- Health Safety Guidance Part 2 2014

## 9.2 Management of Water Hygiene

	<b>Number of required</b>	<b>Number completed</b>	<b>Number outstanding</b>
<b>Water Hygiene Risk Assessments</b>	73	73	0

St Leger Homes have a comprehensive management and monitoring regime of all areas as required by the ACOP, including periodic sampling and testing by an accredited laboratory.

Domestic housing stock risk assessments are completed when void. These are completed by the voids inspector; all remedial works are completed before re-letting. This is in line with the Approved Code of Practice (ACoP) for landlords and they are part of a rolling programme.

## 10. **Electrical Safety**

### 10.1 Key Legislation and Guidance

- Electricity at Work Regulations 1989
- Electrical Safety BS7671:2018 18<sup>th</sup> Edition
- Guidance on the Electricity at Work regulations 1989

### 10.2 Periodic Testing

<b>Total No. of Domestic Properties requiring a periodic test</b>	<b>No. &amp; % of properties with a test &lt; 10 years</b>	<b>No. &amp; % of properties with a test &lt; 5 years</b>
20,055	20,043 (99.94%)	11,032 (55.00%)

The way in which electrical compliance information is presented has been changed for this report to show both the 10 (statutory) and 5 year (best practice) position.

Historically St Leger Homes has tested all properties on a 10 year cycle in line with statutory requirements. At the time of this report, 99.94% of properties have been tested within the last 10 years. 0.06% (12 properties) last had a test 10+ years ago. All cases are correctly being progressed through the no access process by the housing management team.

In order to demonstrate best practice, SLHD is now moving towards a 5 yearly testing cycle and the aim is to have all properties compliant to this by 31 March 2023. At the time of the report, 55.00% of properties have been inspected/tested within the last 5 years.

The domestic electrical testing programme was suspended from March 2020 to April 2021 due to the Covid-19 pandemic. A revised programme is now in place utilising contractor support where required to achieve the target by 2023.

## 11. Gas Safety

### 11.1 Key Legislation and Guidance

- Health and Safety at Work etc Act 1974
- Gas Safety (Installations and Use) Regulations 1998
- The Gas Industry Unsafe Situations Procedure 8<sup>th</sup> Edition

11.2	<b>Number landlord gas safety record (LGSR) required</b>	18,985
	<b>Number of properties compliant with SLHD process for gas compliance</b>	18,985 (100%)

Whilst SLHD can demonstrate full compliance within their own process, there were 19 properties without a current LGSR at the end of August ; these are being actively pursued through the no-access procedure. 99.89% of properties have a compliant LGSR. The Compliance Team will review performance indicators around no access for when the 2022 programme commences.

The 2021 programme began in February 2021 resetting the programme of the MOT style anniversary allowed by the regulations this will re-profile and flatten out the programme for 2021 and coming years.

### 11.3 Solid Fuel Heating

<b>Number of properties with solid fuel heating</b>	93
<b>Annual servicing complete</b>	93

Solid fuel heating is removed from properties when they are void. Servicing is undertaken annually and began in April 2021. All properties are in date. An additional 6-monthly maintenance visit takes place that is over and above statutory requirements.

## 12. Passenger Lifts

### 12.1 Key Legislation and Guidance

- Health and Safety at Work etc Act 1974
- The Lifting Operations and Lifting Operations Regulations (LOLER) 1998
- The Provision and Use of Work Equipment Regulations 1998

No. of Passenger Lifts	Statutory examinations	Routine maintenance in date	Routine maintenance out of date
27	27	27	0

A routine monthly maintenance programme is in place carried out by specialist lift contractors. Statutory mandatory examinations are carried out by an independent insurance inspection engineer (Zurich). These are carried out on a 6-monthly basis.

### 13. RIDDORs, Incidents and Accidents Update

#### 13.1 Key Legislation and Guidance

- Health and Safety at Work etc Act 1974
- The Reporting of Injuries, Diseases and Dangerous Occurrences regulations 2013 (RIDDOR)

	2019/20	2020/21	2021/22
<b>Reportable Injuries</b>	4	5	1
<b>Dangerous Occurrences</b>	1	1	1
<b>All Injuries</b>	39	17	13
<b>Near Misses</b>	12	9	1

There were no RIDDOR reportable injuries recorded in August 2021.

### 14. Audit and Governance

- 14.1 A new health and safety strategy was taken to Board in August. This document will set out the strategic vision, direction and specific actions needed going forward to ensure the continued growth and development in this area.
- 14.2 A report was provided to EMT in April with an overview of the report from the British Safety Council. This also identified the actions required which have been put into an action plan.
- 14.3 An externally led, independent health check of all six areas of compliance has been completed and the key issues shared with Board as part of the compliance report. A report on the health check will be provided to EMT in October to go to the Building Safety Committee in November.

### 15. Proactive Activities

#### 15.1 Health, Safety and Wellbeing Inspections

A fundamental review of our approach to audits and inspections is included in the Health, Safety and Compliance Strategy that was approved by Board in August. The way we are working has changed and a new approach needs to reflect this. Regular discussions are still taking place with individuals as part of one-to one processes and in team meetings / team briefs around health and safety. The process needs to address potential requirement from the new draft Building Safety Bill.

### 16. Link to Risk Register/Any New Risks

- 16.1 Items within this report directly link to items in the Strategic Risk Register specifically:

- managing all issues surrounding high rise accommodation and any emerging new requirements
- managing corporate health, safety and compliance risks.

A new strategic risk has been developed around failure to manage all issues surrounding the impact of the Coronavirus (Covid19) pandemic across the borough. This was added in July 2020 and will remain on the strategic risk register indefinitely.

## 17. Procurement

17.1 Outsourced contracts such as lift maintenance follow SLHD procurement processes.

## 18. VFM Considerations

18.1 Not applicable.

## 19. Financial Implications

19.1 There is budget provision available within SLHD to carry out all the necessary and regular checks (fire risk assessments, gas safety and solid fuel checks, electrical testing, legionella, lift inspections and asbestos surveys). An additional £400k expenditure is required for Electrical tests to be carried out by contractor due to the backlog created by the pandemic as the testing programme was suspended until April 2021. Additional management fee approved by the Council will fund this additional expenditure.

19.2 There are a number of budgets within SLHD and in the capital programme to address the issues arising out of these checks. The most notable ones are with current year end projections at Period 5 with no changes from Q1;

	Budget £000s	Year-End Forecasts £000s
Heating conversions/upgrades	2,142	1,400
Electrical planned works	750	703
Mechanical planned works	61	61
Fire safety works	2,120	1,200
Asbestos Surveys and removal	700	700
Total	5,773	4,064

These are the budgets for 2021/22 and are the first year of an approved four year capital programme, they are reviewed and updated regularly to ensure that they are sufficient to address all the issues arising.

19.3 Currently there are significant underspends in Heating conversions due to resource constraints around vacant posts, ensuring the servicing programme is complete and the number of repairs increasing from the services carried out. Any urgent replacements where the tenant's welfare is at risk would be carried out by contractor if the works are unable to be done in-house.

Also £920k Fire safety works will be slipped into next year's programme as the contractor has suspended works due to risks currently affecting the whole sector.

## **20. Legal Implications**

- 20.1 SLHD has a duty to comply with all legal statutory requirements and legislation as outlined in this report.

## **21. Risks**

- 21.1 The consequences of not meeting the Health and Safety Executive (HSE) statutory and regulatory compliance requirements are significant. A breach of health and safety regulations is a criminal offence and as such, any company or individual manager found to be in breach of these regulations could face prosecution by the HSE. If found guilty, the company or person responsible could face a fine or even imprisonment.

If the Regulator for Social Housing deems that a Landlord/housing provider has breached their Consumer Standards and placed its tenants at risk then the regulator will intervene. The Housing White Paper intends to make regulation of ALMOs more explicit and in line with that of other social housing providers.

## **22. Health, Safety & Compliance Implications**

- 22.1 Within the report.

## **23. IT Implications**

- 23.1 The implementation process for C365, a dedicated compliance software solution has started. This will better enable SLHD to manage its legal obligations in respect of compliance by automating servicing, inspection and risk assessment cycles, and providing a central repository for any resultant actions. It will enable 'live' performance management of compliance and eliminate the need for manual record keeping through spreadsheets, which is currently commonplace for many areas of compliance.

## **24. Consultation**

- 24.1 Not applicable.

## **25. Diversity**

- 25.1 Not applicable.

## **26. Communication Requirements**

- 26.1 Not applicable.

## **27. Equality Analysis (new/revised Policies)**

- 27.1 Not applicable.

## **28. Environmental Impact**

- 28.1 Not applicable.

## **29. Report Author, Position, Contact Details**

29.1 Laura Dougan  
Health, Safety & Compliance Service Manager  
01302 862956

**30. Background Papers**

30.1 Appendix 1- Compliance Dashboard

30.2 Appendix 2 – Details of Overdue FRA Recommendations



## Appendix 1 – Compliance Dashboard

COMPLIANCE REQUIREMENT	REQUIRED	COMPLETED	Compliance Position	Notes
<b>FIRE</b> - Fire Risk Assessments	479	479	100.00%	All FRAs are up to date. A smoothed programme has been developed starting in 2021/22 that will ensure that all FRAs remain in date, but delivered in a more linear way, avoiding peaks of FRAs all being due at the same time.
<b>ASBESTOS</b> - Re-inspection Programme required by CAR 2012	559	558	99.82%	The re-inspection programme continued in August. One reinspection was not completed due to access issue into a loft which had been padlocked.
<b>GAS</b> - Properties compliant with SLHD process for gas compliance	18,895	18,895	100.00%	The 2021 servicing programme started in February taking advantage of change in legislation. There are 19 properties where the certificate has exceeded 12 months, but these properties are in the no access procedure and can therefore be classified as compliant with SLHD process.
<b>ELECTRICAL</b> - Electrical Periodic Testing - 10 Year Compliance	20,055	20,043	99.94%	Statutory requirements require that all properties are tested on a 10 year cycle. 12 properties last had a test 10+ years ago. All cases now being progressed through the no access process by the housing management team.
<b>LIFTS</b> - Monthly routine planned preventative maintenance	27	27	100%	There are 27 passenger lifts and these are subject to a monthly routine planned preventative maintenance programme. During July the programme was completed as planned.
<b>WATER</b> - Water Management Risk Assessments	73	73	100%	73 properties require a water management risk assessment (these include communal halls / community / centres/ office facilities / high rise tank systems / communal blocks at mobile homes) and these are all complete and in date.

## Wider Compliance Progress

<b>FIRE SAFETY PROGRESS</b>	<b>Cumulative Total No. of Recommendations Identified (since January 2019)</b>	<b>No. Completed to date</b>	<b>% Overall Progress</b>	<b>Notes</b>
Level 1 Buildings - FRA recommendations	1,106	791	71.50%	Level 1 buildings include high rises, specialised housing and group homes. In total there are 1,106 recommendations. 791 are completed actions and 121 were within the timescale. <b>There are 194 level 1 recommendations that are outstanding / overdue; this is a decrease of 42 on previous month.</b>
Level 2 Buildings- FRA recommendations	923	509	55.14%	Level 2 buildings include communal halls, caravan site and low rise blocks (dependent on storeys and flat numbers). In total there are 923 recommendations. 509 are completed actions and 277 were within the timescale. <b>There are 137 level 2 recommendations that are outstanding / overdue; an increase of 2 on previous month. .</b>
Level 3 Buildings - FRA recommendations	6,797	1,974	29.40%	Level 3 buildings are low rise blocks (dependent on storeys and flat numbers). In total there are 6,797 recommendations. 1,974 are completed actions and 4,439 were within the timescale. <b>There are 384 level 3 recommendations are outstanding / overdue; an increase of 38 on previous month.</b>
<b>ASBESTOS PROGRESS</b>	<b>Total stock No. of domestic dwellings</b>	<b>No. with a management survey</b>	<b>% Overall Progress</b>	
Asbestos management survey data for all domestic dwellings	TBC	TBC	TBC	To be updated upon completion of compliance data validation exercise, approval of new asbestos management plan and implementation of C365.
<b>ELECTRICAL PROGRESS</b>	<b>Total stock No. of domestic dwellings</b>	<b>No. Completed to date</b>	<b>% Overall Progress</b>	
Electrical Periodic Testing - 5 Year Compliance (Best Practice	20,055	11,032	55.00%	In order to demonstrate best practice, SLHD is now moving towards a 5 yearly testing cycle and the aim is to have all properties compliant to this by 31 March 2023. At the end of August, 55% of properties have been inspected / tested within the last 5 years.

<b>BUILDING SAFETY PROGRESS</b>			
<b>Issue</b>	<b>Milestone</b>	<b>Target Date</b>	<b>Progress</b>
Residential Site Fire Barriers	Formal approval to proceed given	Jul-21	Decision on approval to be made in September
Residential Site Fire Barriers	Planning submitted	TBC	Planning application is currently being prepared. Aiming for submission by early to mid-October, if not sooner.
Residential Site Fire Barriers	Contractor Appointed	TBC	Work will commence on this once the planning application has been submitted.
Residential Site Fire Barriers	Contractor start on site	TBC	This cannot be confirmed until the contractor has been appointed.
Residential Site Fire Barriers	Project Completed	TBC	A project timetable, including anticipated start and end date, will not be available until a contractor has been appointed.

## **Appendix 2 – Details of Overdue FRA Recommendations**

### **Level 1 Buildings –**

As of the date of this report there were 194 recommendations that are overdue. This is a decrease of 42.

#### **Jubilee Court 9 recommendations-**

- 6 relate to planned fire safety improvements that require issuing to a contractor. These will be prioritised when a contractor is in place.
- 1 relates to a desk top review of the flat entrance doors information following MHCLG guidance. Depending on the outcome this could require all the flat entrance doors to be replaced.
- 2 relate to the social care alarm system in the building and ensuring it works in conjunction with the common and flat alarm systems – these cannot be completed until contractor works are completed.

#### **Milton Court 20 recommendations –**

- 16 relate to planned fire safety works that require issuing to a contractor. These include common area doors repairs and replacements, checking of firestopping in a number of areas and remediation as required. These will be prioritised when a contractor is in place.
- 1 relates to confirmation that the common area fire alarm system supports the ‘Stay Put’ strategy. This requires inspection of all individual flats.
- 2 relate to implementing a rolling inspection programme for flat entrance doors which will require inspection of individual flats.
- 1 relates to a rolling programme for provision and working condition of smoke alarm systems in flats.

#### **Heartswood 13 recommendations–**

- 6 relate to planned fire safety works that require issuing to a contractor. These include common area doors repairs and replacements, checking of firestopping in a number of areas and remediation as required. These will be prioritised when a contractor is in place.
- 2 relate to the implementation of a rolling programme of checks to flat entrance doors
- 1 relates to confirmation of the Grade A/Part 1 common area fire alarm system being designed and installed to support the Stay Put strategy.
- 4 relate to installation of social alarm system which works with the fire alarm system- these cannot be completed until contractor works complete.

#### **High rises 79 recommendations –**

- 36 relate to planned fire safety works that have been issued to Fortem. These include common area doors repairs and replacements, ensuring fire resistance on ceilings, checks on cabling in common areas, improved access to roof access space. These works will be prioritised as part of the 2021/22 planned fire safety programme.
- 18 relate to the implementation of a rolling programme of checks to flat entrance doors.
- 9 relate to evidence of flat entrance doors conforming to MCHLG guidance. This will focus on doors not currently being replaced by Fortem.
- 1 relates to replacement letterbox – door on current Fortem replacement programme
- 5 relate to confirmation that all required fire stopping work has been completed by an external contractor.

- 1 relates to information being available in regards to external wall construction in terms of surface fire spread requirements.
- 9 relate to a rolling programme for provision and working condition of smoke alarm systems in flats.

#### Communal Houses and Halls 12 recommendations –

- 3 relate to actions in Sandycroft which are being carried out by Doncaster Council. These are around a compartmentation check, emergency lighting remedial work and confirmation on fire alarm coverage
- 7 relate to planned fire safety works that have been issued to Fortem. These include common area doors repairs, compartmentation remediation. These works will be prioritised as part of the 2021/22 planned fire safety programme
- 2 relate to ensuring management controls in place over hot works.

#### Multi-Occupancy Flat (leased through Target Housing) 60 recommendations –

- 42 relate to fire safety improvements that require issuing to a contractor
- 5 relate to evidence of flat entrance doors conforming to MCHLG guidance
- 6 relate to confirming arrangements for shared responsibility on property
- 2 relate to checking cupboards in properties for combustibles – to be carried out by Target Housing
- 5 relate to ensuring management controls in place over hot works.

#### Offices 1 recommendation –

- 1 relates to planned fire safety works that require issuing to a contractor around fire detection improvements.

### **Level 2 Buildings**

As of the date of this report there were 137 recommendations that were overdue; this is an increase of 2.

#### Caravan Sites (G&T and Residential) 20 recommendations –

- 1 relates to confirming provision and condition of at least Grade D LD3 smoke alarm systems.
- 5 relate to the separation distances between caravans and fencing / hedges. Work is ongoing, in discussion with fire risk assessors, to implement a solution. Ongoing management discussions with residents about what is being stored on sites.
- 7 relate to planned fire safety works that require issuing to a contractor. These include common area doors repairs and replacements and improved external emergency lighting. These works will be prioritised when a contractors is in place.
- 1 relates to confirming if cables left following removal of meter have been made safe
- 1 relates to removal of combustible items and regular clearing of site
- 1 relates to street lighting not working onsite – reported to Doncaster Council awaiting repair
- 4 relate to having documented protocol for sharing FRA and other fire related documentation

#### Low Rise Block 90 recommendations –

- 43 relate to planned fire safety works that require issuing to a contractor. These include common area doors and flat entrance repairs and replacements, improvements to means of escape and compartmentation checks. These works will be prioritised when a contractor is in place.
- 12 relate to a desk top review of the flat entrance doors information following MHCLG guidance. Depending on the outcome this could require flat entrance doors to be replaced.
- 16 relate to implementing a rolling inspection programme for flat entrance doors which will require inspection of individual flats.
- 15 relate to checking provision and working condition of smoke detection in flats
- 2 relate to restricting car parking outside blocks which requires longer term plan
- 1 relates to confirmation of smoking policy in block
- 1 relates to removal of trip hazards / combustibles from common area

#### Communal Halls 23 recommendations

- 7 relate to planned fire safety works that require issuing to a contractor. These include common area doors repairs and replacements and compartmentation within electrical cupboards. These works will be prioritised when a contractor is in place.
- 1 relates to fire blanket being put in place
- 3 relate to removal of combustible material from the externals of the building inside cupboard / roof spaces
- 12 relate to changing locks on final exit doors, these are being carried out in house repairs

#### Office buildings 4 recommendations -

- 3 relate to planned fire safety work that require issuing to a contractor. These are common area door repairs.
- 1 relate to repairs to final exit door that will be carried out by in house team

### **Level 3 Buildings**

As of the date of the report there were 384 recommendations overdue; this is an increase of 38.

#### Low rise blocks of flats including common areas serving shops 381 recommendations -

- 331 relate to planned fire safety works that require issuing to a contractor. These include removal of external timber structures, repairs / replacement flat entrance doors. These works will be prioritised when a contractor is in place.
- 3 relate to removal of hold open devices on common area doors to be carried out by in house team
- 18 relate to fire action notices being required in common area
- 1 relates to fire alarm system equipment being defective.
- 1 relates to bins being stored in correct storage area
- 1 relates to removal of combustible items from loft space
- 18 relate to confirming that the external wall cladding meets building regulations requirements.
- 2 relate to locking of common area doors
- 3 relate to putting programme of cleaning in place
- 5 relate to removal of combustible materials
- 1 relates to change in evacuation strategy after unauthorised work by leaseholder

Residential caravan sites 3 recommendations –

- 2 relate to the separation distances between caravans. Work is ongoing, in discussion with fire risk assessors, to implement a solution. Ongoing management discussions with residents about what is being stored on sites.
- 1 relates to planned fire safety works that require issuing to a contractor. This is a common area doors repair. These works will be prioritised as part of the 2021/22 when a contractor is in place.

# ST LEGER HOMES OF DONCASTER LTD

## Board Briefing Note

<b>Title:</b>	Month end 31 August 2021 KPI dashboard
<b>Action Required:</b>	For information
<b>Item:</b>	09
<b>Prepared by:</b>	Nigel Feirn Head of Finance and Business Assurance
<b>Date:</b>	7 October 2021

### 1. Purpose

1.1. To provide Board members with the KPI dashboard as at 31 August 2021 and brief commentary. The KPI dashboard is attached at **Appendix A**.

### 2. Executive summary

2.1. For 2021/22 :

- there are 19 KPIs;
- two are measured quarterly – residents supported in training and employment;
- four are measured annually - STAR survey (2), energy efficiency and Decent Homes Standard numbers;
- three KPIs relating to Homelessness do not yet have a target due to ongoing Covid19 requirements. Targets will be considered during Quarter 2; and
- the only KPI change from 2020/21 is for gas servicing; we are now reporting properties with a valid safety certificate rather than properties attended.

2.2. The table below summarises the KPI dashboard as at 31 August 2021. Comparatives have been included from 2020/21 as the KPIs are the same this year, apart from the gas KPI. There are **six KPIs not meeting target** – data appears below.

	Aug 21/22	Jul 21/22	Jun 21/22	May 21/22	Apr 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Green (meeting target)	3	3	4	3	5	8	5	6	6
Amber (within tolerance)	1	1	2	2	1	2	3	1	1
Red (not meeting target)	6	6	6	5	4	7	7	8	8
No target until Q2 (homelessness)	3	3	3	3	3	0	0	0	0
Quarterly / Annual KPIs	6	6	4 <sup>2</sup>	6	6	0	4	4	4
Total	19	19	19	19	19	17 <sup>1</sup>	19	19	19

#### **NB :**

<sup>1</sup> For 2020/21, there were four annual KPIs. Two of these are related to STAR survey results for overall satisfaction and property condition satisfaction. STAR was planned for January 2021 but deferred until July 2021 as part of a wider programme.

<sup>2</sup> residents supported in training and employment measured quarterly



### 3. KPI commentary

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

**Target** **0.50%**  
**31 August YTD Performance** **0.82%** **WORSE THAN TARGET – RED**

	Aug 21/22	Jul 21/22	Jun 21/22	May 21/22	Apr 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Void rent loss YTD %	0.82%	0.83%	0.82%	0.81%	0.86%	1.00%	1.02%	0.97%	0.97%
Void numbers at month/quarter end	157	165	142	139	162	159	216	195	209

Worse than target but void numbers are recovering slowly from the high levels in early 2020/21 due to Covid19.

The number of voids held at the end of August shows a reduction at 157. This figure includes 14 properties made up of 5 non-lettable voids and 9 acquired properties.

The year to date (YTD) number of terminations at 515 continues to exceed the YTD number of re-lets at 498. It is imperative that the number of re-lets exceeds the number of terminations to improve performance. It is pleasing to note that as at mid-September the total number of voids shows a reduction at 146.

A number of issues are contributing to targets not being achieved; increased delays waiting for R&D survey results, asbestos containing materials (ACM) removals, shortage of materials, delays waiting for the delivery of non-stock items, and a reduction in resources due to isolation or Covid-19.

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

**Target** **20.00 days**  
**31 August YTD Performance** **31.21 days** **WORSE THAN TARGET – RED**

	Aug 21/22	Jul 21/22	Jun 21/22	May 21/22	Apr 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Re-let days	31.21	31.36	32.72	32.81	34.61	46.11	48.27	49.32	55.05

In month performance for August stands at 30.67 days, this shows a decline when comparing to July's 27.85 days. However, cumulative performance shows a slight improvement, standing at 31.21 days, but remains worse than target.

Within the number of lettable voids, 89 require standard repair work. Of these 89 voids, 18 are above the 20 day target (20%). This shows a sharp reduction compared to July, with 58% of standard voids held above the target of 20 days.

In addition to this, Accessible Housing Register (AHR) voids continue to accrue lengthy delays before re-let as a result of the availability of DMBC's occupational therapist attending viewings.

Frequently, nominations are exhausted which results in the property requiring to be advertised again for general re-let. As of 14 September all AHR properties will be advertised with a note to show that the property is a priority to AHR nominations, this will reduce delays if all AHR nominations are exhausted, short listing can commence immediately as a general needs re-let.

Since 1 April 2021, 86 properties have been sent to AHR for nomination of which 40 have been allocated, 27 were exhausted and then went to be advertised, and 19 are currently in nomination /awaiting outcome of viewings.

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

3.3. KPI 4: Number of Households placed in B&B Accommodation

**Target**  
**31 August YTD**

**No target until Q2 (Covid19 restrictions dependent)**  
**323**

	<b>21/22</b>	20/21
	<b>no.</b>	no.
April	<b>78</b>	78
May	<b>54</b>	83
June	<b>61</b>	82
July	<b>73</b>	64
August	<b>57</b>	35
<b>Total YTD</b>	<b>323</b>	342

Total number of nights in B&B remains high. Progress remains on target against our projected milestones within the 'Roadmap' out of 'Everyone-In' to reduce single people placed in hotels. The number of placements reduced to 57 during August following a spike of 73 in July.

3.4. KPI 5: Number of Full Duty Homelessness Acceptances

**Target**  
**31 August YTD**

**No target until Q2 (Covid19 restrictions dependent)**  
**178**

	<b>21/22</b>	20/21
	<b>no.</b>	no.
April	<b>31</b>	29
May	<b>45</b>	18
June	<b>36</b>	30
July	<b>23</b>	31
August	<b>43</b>	26
<b>Total YTD</b>	<b>178</b>	134

The number of cases reaching full duty decisions was 43 in August. This reflects the high volume of cases opened during the last 3 months and the reduced opportunities to prevent and secure alternative accommodation, resulting in a Full Duty decision having to be made at the end of the 56 days of relief.

3.5. KPI 6: Number of homeless preventions

**Target**  
**31 August YTD**

**No target until Q2 (Covid19 restrictions dependent)**  
**234**

	<b>21/22</b>	20/21
	<b>no.</b>	no.
April	<b>50</b>	68
May	<b>41</b>	47
June	<b>63</b>	44
July	<b>47</b>	44
August	<b>33</b>	55
<b>Total YTD</b>	<b>234</b>	258

We successfully prevented or supported a successful intervention for 33 households during August compared with 47 in the previous month. Opportunities to prevent homelessness remain limited as the reasons for homelessness continue to be at the 'Relief' stage of the process.

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

**Target**

**0.070%**

**31 July 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.

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

	Interactions	Complaints	Upheld	% upheld
<b>21/22</b>	<b>128,259</b>	<b>372</b>	<b>127</b>	<b>0.099%</b>
20/21	109,488	283	65	0.059%
19/20	106,266	359	66	0.062%

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

The main themes for upheld complaints relate to time taken to complete a repair, lack of information / communication and staff actions.

3.7. KPI 10 : Gas Servicing - percentage of dwellings with a valid gas safety certificate

**Target**

**100.00%**

**31 August YTD Performance**

**99.90%**

**WORSE THAN TARGET – RED**

At the end of August, there were 19 properties without a valid gas certificate and as at mid-September this has increased to 23. However, all are in the legal process for access during September and therefore SLHD remain 100% compliant with gas servicing legislation.

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

**Profiled target** **3.03 days**  
**31 August YTD Performance** **4.11 days** **WORSE THAN TARGET – RED**

The tables below summarises the days lost to sickness per WTE for the five month period to 31 August, with comparatives and the main causes.

	Days lost to sickness	Ave WTE	Cumulative sickness per WTE
<b>21/22</b>	<b>2,929.2</b>	<b>713.2</b>	<b>4.11</b>
20/21	1,550.4	706.8	2.20
19/20	2,472.2	729.9	3.39

5 months to 31 August	21/22 days lost	20/21 days lost
Other Musculo / Skeletal (MSK)	754.1	384.0
Work Related and Personal Stress	452.5	288.7
Depression / Anxiety	375.0	255.8
Non Work Related/Personal Stress	356.3	128.7
Coronavirus (COVID-19)	329.8	14.0
Infection / Virus	141.2	75.2
Stomach / Liver / Kidney / Digestion	129.6	96.4
Back / Shoulder	82.5	47.7
Skin Conditions	60.8	0.0
Neurological / Headache / Migraine	60.7	43.9
Head/Dental / Sinus	58.5	15.9
Heart / Blood Pressure / Circulation	54.5	145.3
Chest / Respiratory	33.5	18.0
Genito Urinary / Gynaecological	22.5	0.0
Pregnancy Related	17.8	37.0
	<b>2,929.2</b>	1,550.4

The cumulative YTD absence is 4.11 days against a target of 3.03 days, and the year end projection of 8.25 days is above the 7.9 days target.

Property Services has the highest high levels of absence accounting for 49.8% of all absence this month and 1.22 days per WTE within the directorate. Housing and Customer Services sees 0.75 days per WTE with Corporate under target at 0.47.

The highest cause of absence remains stress, depression and anxiety, accounting for a 40.4% of the absence, however, this month sees no cases citing work related stress alone as their cause of absence. The second highest reason for absence remains MSK accounting for 25.7%, followed by Coronavirus which now accounts for 11.3% of all absence to date, however, there has been a significant decrease this month in the number of days lost from 214.3 days in July to 48 days in August.

A number of long-term cases continue to be managed with a small number of Stage 4 attendance hearings in progress. NHS waiting times continue to impact on absence levels and where possible we are looking for alternatives to achieve a return in some capacity whilst this wait is ongoing.

### 3.9. KPI 12 : Local expenditure

**Target** **70.0%**  
**31 August YTD Performance** **56.7%** **WORSE THAN TARGET – RED**

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

	Doncaster spend YTD	Total spend YTD	KPI%
<b>21/22</b>	<b>£2,736k</b>	<b>£4,827k</b>	<b>56.7%</b>
20/21	£1,691k	£3,312k	51.1%
19/20	£2,191k	£3,722k	58.9%

Cumulatively, YTD performance stands at 57% and under-performance of £643k.

The Procurement Strategy and Contract Standing Orders have been developed to try to optimise local spend and social value, but changing the balance of local spend is only potentially possible at the point that contracts are renewed and if local suppliers are appointed as part of this process. This is not always possible if local suppliers do not exist, do not tender, are not part of consortia frameworks or are unable to demonstrate value for money. SLHD continues to actively participate in supplier events to encourage local business engagement in as many new procurement exercises as possible.

The procurement service will transfer to Doncaster Council later in the year. This presents an opportunity for further joined up procurement. The impact this will have on the ability to buy local is not yet clear, but is one of the factors that will be built into the service level agreement as the service transfers.

However, based on the types of goods and services due to be procured over the next few months, for the reasons already specified above, it is not anticipated that SLHD will be able to increase local revenue spend much further than it is currently.

Nigel Feirn  
Head of Finance and Business Assurance  
01302 737485

Appendix A – 31 August 2021 2021/22 KPI dashboard

# St Leger Homes of Doncaster Performance Dashboard August 2021

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

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



# **ST LEGER HOMES OF DONCASTER LTD**

Company limited by guarantee registered in England  
Company Number 05564649

## **Board**

# **REPORT**

**Date** : 07 October 2021

**Item** : 10.1

**Subject** : Audit & Risk Committee Annual Report

**Presented by** : Trevor Mason  
Chair of the Audit & Risk Committee

**Prepared by** : Julie Crook  
Director of Corporate Services

**Purpose** : To provide an annual overview of the activities undertaken by the Audit & Risk Committee and give assurance to Board that the Committee has fulfilled its Terms of Reference.

### **Recommendation :**

That Board note the 2021 Audit and Risk Committee Annual Report and that Audit and Risk Committee have reviewed the Terms of Reference and agree that they have been fulfilled.

Company Number 05564649  
A Company Limited by Guarantee  
Registered in England

**To the Chair and Members of the  
AUDIT & RISK COMMITTEE**

**Agenda Item No: 9.1  
Date: 7 October 2021**

**1. Report Title**

1.1 Audit & Risk Committee Annual Report.

**2. Purpose**

2.1 To provide an annual overview of the activities undertaken by the Audit & Risk Committee and give assurance to Board that the Committee has fulfilled its Terms of Reference.

**3. Recommendation**

3.1 That Board note the 2021 Audit and Risk Committee Annual Report and that Audit and Risk Committee have reviewed the Terms of Reference and agree that they have been fulfilled.

**4. Introduction**

4.1 The Audit & Risk Committee is accountable to the Board for the fulfilment of the responsibilities delegated to it as set out in the Committee's Terms of Reference. The Terms of Reference requires that Audit & Risk Committee will provide the Board with an Annual Report summarising its conclusions from the work undertaken during the year. The current Terms of Reference are attached at Appendix A, these were updated by the Board in July 2019.

**5. Meetings and Attendance**

5.1 Since the Board's AGM in September 2020, the Audit & Risk Committee has met on three occasions:

- 4 November 2020
- 3 March 2021
- 24 June 2021

5.2 The Terms of Reference for the Audit & Risk Committee states that the Committee will comprise of four members as follows:

- One DMBC nominated Director
- One Tenant Director
- Two Independent Directors

5.3 The current members of the Audit & Risk Committee are as follows:



<b>Member</b>	<b>Constituent Group</b>
Trevor Mason	Independent (Chair)
Allan Jones	Councillor
Anthony French	Tenant (joined 01.04.2021)
Steve Lyons	Tenant (left 01.04.2021)
Susan Jones	Independent

The membership of the committee changed following Board's decision in March 2021 to review the membership of all committees taking into consideration the addition of the new Building Safety and Compliance Committee. For a temporary period of approximately 18 months the Committee will only have 3 permanent members while Susan is seconded to Employment & People Committee.

- 5.4 Attendance at the meetings has been as follows (all meetings have been quorate):

	4 November	3 March	24 Jun
Trevor Mason	✓	✓	✓
Allan Jones	✓	✓	✓
Anthony French			
Steve Lyons	✓	✓	
Sam Bartle			✓
Susan Jones	✓	✓	

- 5.5 The Director of Corporate Services has attended all meetings, as have Internal Audit. Richard Graham - Audit Director and Lee Cartwright - Partner at Beever & Struthers, the external auditors for the company attended the meeting in March to present the External Audit strategy and in June to present the financial statements.

## **6. Work of the Audit & Risk Committee**

- 6.1 During the year the Audit & Risk Committee carried out work in relation to the following areas:
- Internal Audit
  - External Audit
  - Risk Management
  - Statutory Financial Statements
  - Fraud
  - Financial Information
  - Financial Regulations and Contract Standing Orders review
  - Procurement Update
  - Supplies & Logistics Update
  - Business Continuity Plan
  - SLHD Emergency Plan
  - Gifts and Hospitality Register
  - The One Project (TOP)

## **7. Internal Audit**

- 7.1 Internal audit services are provided through a SLA by DMBC. The annual audit plan is developed jointly between SLHD and Internal Audit and was approved by Audit & Risk Committee in March 2021. The plan is reviewed on a continual basis to allow some flexibility so that areas identified as an increased risk can be included in the plan at short notice. Audit & Risk Committee has monitored progress against audit work contained in the agreed plan over the year.
- 7.2 The 2021/22 Audit Programme consists of 79 audit days, which compares to 77 days in the 2020/21 plan. In both years, the plan also contains five days for contingency.
- 7.3 Work during 2020/21 has continued to focus on implementing audit actions to ensure that SLHD's ways of working are increasingly more robust. Despite the restrictions around staff working from home, the work against the programme has progressed.
- 7.4 Audit & Risk Committee received the following audit reports in the course of the year:
- General Financial Audit – Payroll & Creditors elements (substantial assurance)
  - Procurement (substantial assurance)
  - Housing Rents (substantial assurance)
- 7.5 Audit & Risk Committee has monitored the implementation of Internal Audit's recommendations and challenged managers where there has been a lack of progress. The number of outstanding actions at this time last year was 15 when compared to five at the current time. The committee are pleased to see this reduction following concerns raised last year.

## **8. External Audit**

- 8.1 Beever and Struthers were re-appointed as external auditors at the AGM in October 2020. Beever and Struthers were appointed in the summer of 2019 to a two year contract, with the option to extend for a further two years. Audit & Risk Committee members were involved in this procurement. This contract is being extended for a further 12 months.
- 8.2 Specific tasks carried out by Audit & Risk Committee in relation to external audit are set out below:
- Received and approved the External Audit Strategy.
  - Received the Financial Statements, Audit Statement and Management Letter and made recommendations to the Board.

## **9. Risk Management**

- 9.1 There are quarterly updates to the Risk Register, three of these are reported directly to the Board and one is reported to the Audit & Risk Committee (Q2

November 2020). The scoring within the Strategic Risk Register is currently being reviewed in detail following feedback from Board in March and will be presented to Board again in July.

## **10. Statutory Financial Statements**

10.1 The Audit & Risk Committee receive a presentation of the draft Financial Statements, Management Letter and Letter of Representation from Beever and Struthers, External Auditors. These documents are examined in detail by the Audit & Risk Committee prior to submission to the Board for approval.

## **11. Fraud**

11.1 Instances of fraud or potential fraud and any associated investigation and follow up actions are reported to Audit & Risk Committee at each meeting through the fraud register. Since the Board's AGM in October 2020 there have been;

- An allegation of theft and resale of company property and two employees were suspended and investigated. Following the investigation both employees returned to work and no further action was taken. This highlighted some weaknesses in our systems and we are working to address these and an item has been added to the 2021/22 internal audit plan.
- An anonymous allegation that one of our employees was selling company property on ebay for their own personal gain. The employee was suspended while an investigation was completed. Following the investigation the employee returned to work and no further action was taken.
- An allegation that an employee was making unauthorised use of company property and was working elsewhere while being absent from work at St Leger Homes due to illness. This investigation has concluded and we are waiting for the investigating officer to write the report.

11.2 Anti fraud and corruption training was delivered digitally on 11<sup>th</sup> and 15<sup>th</sup> March 2021 by Internal Audit, as part of the 2020/21 Internal Audit Programme.

## **12. Money Laundering Guidance**

12.1 Money laundering guidance was approved by the committee in November 2020 prior to roll out within the organisation.

## **13. Q2 Financial Information**

13.1 The Audit & Risk Committee reviewed the financial information for the period ending 30 September 2020 at its meeting in November prior to this information being submitted to Board in November 2020. When quarterly financial reporting was agreed by the Board, this approach was taken to ensure that financial information is scrutinised as soon as possible after the

quarter end.

#### **14. Procurement Update**

- 14.1 Following the annual report on procurement activity received by Audit & Risk Committee in June 2020, future regular update reports were requested due to concerns raised regarding the high number of breaches.

An update report was received by Committee in March 2021 and June 2021 where members were pleased to see a reduction of procurement breaches, however they were keen to see that we achieved the progress against the action plan and anticipated completion of the all but one of breaches by September 2021.

#### **15. Supplies & Logistics Update**

- 15.1 The Audit & Risk Committee received an annual report on supplies and logistics activity, there were no areas of concern.

#### **16. Gifts and Hospitality Register**

- 16.1 Included in the Terms of Reference for the Committee is a responsibility to review the Gifts and Hospitality Register. The annual report was received in June 2021, there were no areas of concern.

#### **17. The One Project (TOP)**

- 17.1 The committee has received assurances from Internal Audit that the significant change that this project brings has not affected service delivery or the integrity of core systems.

#### **18. Other Responsibilities**

- 18.1 The Audit & Risk Committee also has responsibility to review revisions and activity in relation to the Business Continuity Plan and the Emergency Plan. The updated Business Continuity Plan and Emergency Plan were approved by the Committee in March 2021.

In early 2020 the Covid-19 pandemic emerged and has been managed throughout the year. Other events requiring stakeholder emergency planning included significant flood risk in January 2021. Business Continuity plans were put into place during November 2020 when we transferred to a new IT system as part of the one project (TOP).

#### **19. Conclusion**

- 19.1 As a result of its work during the year, the Audit & Risk Committee is not aware of any reason to believe that the Company does not have in place an overall system of internal control and risk management that are both adequate and effective. The Committee is also satisfied that internal and

external audit arrangements are working effectively and comply with the requisite standards.

19.2 Going forward, the Audit & Risk Committee shall continue to monitor management's progress in the following key areas:

- Timely implementation of actions agreed in response to audit recommendations.
- Procurement breaches and
- Identifying, documenting and responding to instances of fraud.

**20. Report Author, Position, Contact Details**

20.1 Trevor Mason  
Chair of the Audit & Risk Committee

**21. Background Papers**

21.1 There are no background papers.



## **St. Leger Homes of Doncaster**

### **Terms of Reference**

#### **Audit and Risk Committee**

##### **1. Constitution and Remit**

- 1.1 The Audit and Risk Committee is constituted as a Committee of the Board to support the Board in its responsibilities for issues of risk control and governance by reviewing the comprehensiveness of assurances in meeting Board needs.

##### **2. Authority**

- 2.1 The Committee is authorised by the Board to review or investigate any activity within its terms of reference.
- 2.2 The Committee is authorised by the Board to require such additional assurance reviews or remedial action as it deems appropriate.

##### **3. Membership**

- 3.1 The Committee will comprise of four members as follows:
- a. Two Independent Directors
  - b. One DC nominated Director
  - c. One Tenant Director.
- 3.2 The Chair of the Committee shall be appointed by the Board on the recommendation of the Board Chair.
- 3.3 Appointments to the Committee shall be for a period of one year and reviewed at the first Board meeting following the AGM.
- 3.4 The Lead Executive Director will be the Director of Corporate Services.
- 3.5 The Executive Support Officer will be the Secretary to the Committee.

**4. Quorum**

- 4.1 The Committee will be deemed to be quorate when three members are present, including one Independent Director.

**5. Meetings**

- 5.1 The Committee will meet at least three times per year.
- 5.2 Additional meetings may be called by the Board, or the Board Chair acting on behalf of the Board or by the Committee Chair.
- 5.3 Audit and Risk Committee meetings will normally be attended by the Director of Corporate Services and the Internal Audit Manager.
- 5.4 A representative of External Audit will attend two meetings per year.
- 5.5 The Committee may request other officers to attend meetings to assist with its discussions on any particular matter.
- 5.6 Board Members who are not members of the Committee shall have the right of attendance.
- 5.7 Meetings may be held by telephone or video conference if necessary.

**6. Agendas and Minutes**

- 6.1 Committee meeting agendas and reports will be sent to all members seven days before each meeting together with draft minutes of the previous meeting.

**7. Reporting**

- 7.1 The minutes from each meeting will be presented for information at the next Board meeting.
- 7.2 The Committee will provide the Board with an Annual Report, timed to support the AGM, summarising its conclusions from the work it has done during the year.

**8. Responsibilities**

- 8.1 The responsibilities of the Committee are cross referenced to the Decision Making Framework – Summary of Decision Making Delegations which is set out in the Scheme of Delegation.

Reference 6 – Annual Company accounts

- a. Ensure that financial stewardship is maintained at the highest level.
- b. Review the annual financial statements before submission to the Board.

Reference 7 – Audits & Audit Reports

- c. Ensure that management response to issues identified by any audit activity is adequate.
- d. Monitor and review progress against improvement plans emanating from Audit Inspections or Reviews.
- e. Through the annual external audit process alert the Board to any serious under performance or danger to financial security with proposals to rectify.
- f. Advise the Board on the appointment of internal and external auditors.
- g. Set the internal and external audit framework and monitor practice.
- h. Approve the Internal Audit Plan on an annual basis.

Reference 11 - Standing Orders and Financial Regulations

- i. Reviewing financial policies and recommending to Board.

Reference 14 - Probity – Code of Conduct

- j. Advise on anti-fraud policies, whistle-blowing processes and arrangements for special investigations.
- k. Review the gifts and hospitality register.

Reference 16 - Scheme of Delegation - Monitor use of delegated powers

- l. Advise on issues relating to the corporate governance requirements for the Company.

Reference 19 - Review policy changes

- m. Review policy changes.

Reference 30 - Risk (Strategic, Operational, Fraud) and Governance

- n. Review strategic and operational risk management.
- o. Review revisions of the Business Continuity plans.
- p. Review revisions of the Emergency Plan.
- q. Review of the Fraud Risk Register.

**9. Access**

- 9.1 Representatives of Internal and External Audit will have free and confidential access to the Chair of the Committee.
- 9.2 Committee members have free and confidential access to both internal and external audit.



# **ST LEGER HOMES OF DONCASTER LTD**

Company limited by guarantee registered in England  
Company Number 05564649

## **Board**

# **REPORT**

**Date** : 07 October 2021

**Item** : 10.2

**Subject** : Performance & Improvement  
Committee Annual Report

**Presented by** : Stuart Booth  
Chair of the Committee

**Prepared by** : Chris Margrave  
Director of Property Services

**Purpose** : To provide an annual overview of the  
activities undertaken by the Performance &  
Improvement Committee and give  
assurance to Board that the Committee has  
fulfilled its Terms of Reference.

### **Recommendation :**

That Board note the 2021 Performance & Improvement Committee Annual Report and that Performance & Improvement Committee have reviewed the Terms of Reference and agree that they have been fulfilled.

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: 10.2  
Date: 07 October 2021**

**1. Report Title**

1.1 Performance & Improvement Committee Annual Report

**2. Purpose**

2.1 To provide an annual overview of the activities undertaken by the Performance and Improvement Committee (P&I Committee) and give assurance to Board that the Committee has fulfilled its Terms of Reference, which are attached at Appendix A.

**3. Recommendation**

3.1 That Board note the 2021 Performance & Improvement Committee Annual Report and that Performance & Improvement Committee have reviewed the Terms of Reference and agree that they have been fulfilled.

**4. Introduction**

4.1 The Performance & Improvement Committee is accountable to the Board for the fulfilment of the responsibilities delegated to it as set out in the Committee's Terms of Reference. The Terms of Reference requires that Performance & Improvement Committee will provide the Board with an Annual Report summarising its conclusions from the work undertaken during the year. The current Terms of Reference are attached at Appendix A.

**5. Meetings and Attendance**

5.1 Since the Boards AGM in September 2020, the Committee has met on four occasions:

- 18 November 2020
- 24 February 2021
- 19 May 2021
- 1 September 2021

5.2 The Terms of Reference for the Performance & Improvement Committee states that the Committee will comprise of four members, as follows:

- Two Tenant Directors
- One Independent Director
- One DMBC nominated Director

5.3 The members of the Committee are/were as follows:

Jane Nightingale	Council Member (Chair for meeting held on 18 November 2020 following which stepped down)
Dave Wilkinson	Interim Chair for meeting held on 24 February 2021
Anthony French	Tenant Member
Sam Bartle	Tenant Member
Stuart Booth	Independent Member (appointed as Chair from 19 May 2021 meeting)
Phil Cole	Council Member (appointed from 1 September 2021 meeting)

5.4 Attendance at the meetings has been as follows:

	18 Nov 20	24 Feb 21	19 May 21	1 Sep 21
Jane Nightingale	✓	-	-	-
Dave Wilkinson	-	✓	-	-
Anthony French	✓	✓	-	-
Sam Bartle	✓	✓	✓	✓
Stuart Booth	✓	✓	✓	✓
Steve Lyons	-	-	✓	✓
Cllr Phil Cole	-	-	-	✓

5.5 An Executive Director has been present at each of the meetings, together with the Head of Estate Management, Head of Customer Services, East Area Housing Manager, Universal Credit Project Manager who have attended Committee meetings relevant to their specific area of work.

On the Occasions where Committee have received Tenant and Resident Involvement Panel (TRIP) review reports, members of TRIP have attended to present their reports and findings.

5.6 The Committee has been quorate on each of the 4 occasions it has met. The agenda and papers have all been circulated 7 days prior to the meeting and all minutes have been reported to the next Board meeting following the Committee.

**6. Work of the Committee**

6.1 During the year, the Committee carried out work in relation to the following areas:

- Tenancy Sustainability (including Universal Credit (UC))
- Customer Focus
- Anti-Social Behaviour
- Service Standards
- Quarterly Performance
- Review of Temporary Accommodation Plan
- Fire Management Policy and Fire Management Plan
- Tenant and Residents Panel – COVID 19 Report
- Tenant and Residents Panel – Estate Walks Report
- Compensation and Goodwill Policy

- 6.2 This report will highlight some of the issues covered by the Committee.
- 6.3 Of the 2 specific responsibilities delegated to the Committee detailed within the Terms of Reference, they have enacted both of these delegations as follows:-

Reference 3 - Annual Development Plan

Committee have received and reviewed the Company's performance information on a regular basis covering all key areas of service delivery and have scrutinised and monitored specific areas that require particular improvement.

Committee received regular updates in relation to complaints, compliments and service standards noting current performance but also made suggestions on where improvements are needed.

Committee work very closely with TRIP and received reports on areas that they have received, considering areas of change that improve performance in terms of delivery of service to our customers.

Reference 19 – Review significant policy changes

Committee have been asked to review, comment and approve policies throughout the year namely the Fire Management Policy & Fire Management Plan, Compensation and Goodwill Policy.

**7. Key Messages/Issues**

**7.1 Review of Temporary Accommodation Plan**

The Committee reviewed the Temporary Accommodation Plan at its meeting on 18 November 2020. Members noted that an Audit Report was presented to Audit & Risk Committee in November 2019, following which eight recommendations were made. From these recommendations only 1 was outstanding, ISS.2 - Bed and Breakfast Charge Monitoring due to the delay in implementing Capita OpenHousing which affected monitoring and management of charges.

Members discussed in detail the pressures of the Severe Weather Emergency Protocol (SWEP) in addition to the significant increase in the use of B&B Accommodation due to the Covid-19 Pandemic and governments 'Everyone In' guidance.

**7.2 Compensation and Goodwill Policy**

The Compensation and Goodwill Policy sets out the circumstances under which the organisation would consider compensating customers where the standards of service delivered have fallen below that which would normally be provided.

As part of the review of the Policy it was proposed that the payment of compensation be increased in line with awards proposed by the Local

Government Ombudsman and the Housing Ombudsman when dealing with proven maladministration. Members considered and approved the changes to Policy.

7.3 Tenant and Residents Panel (TRIP) – COVID 19 Report

It was noted that the Executive Management Team (EMT) welcomed the request of TRIP to undertake a review of SLHD response to the pandemic. Two members of TRIP attended the February 2021 P&I Committee to present their findings.

P&I members were pleased to note that when benchmarked against the responses by other Arm's Length Management Organisations (ALMOs) who responded to TRIP's questions, the SLHD response to the pandemic was in the top percentile. The main recommendation that would be implemented was that should future out of the ordinary events occur, SLHD would ensure they did not only focus on social media aspects of communication, but the basic letter/mail-shot/written word.

7.4 Tenant and Residents Panel (TRIP) – Estates Walks

The Committee received the TRIP review of Estates Walks at the same time in the February 2021 P&I Committee.

Members noted the recommendations and suggestions to change Estate Walks procedures, and that EMT had provided a detailed response to TRIP members to advise which recommendations had been accepted to progress and had explained why some recommendations could not be implemented.

7.5 Quarterly Performance

The Committee continues to receive detailed performance information at each meeting and raises any concerns about individual performance indicators.

7.6 This report has highlighted a few key items brought to the Committee this past year. The Committee has also reviewed income management recovery and anti-social behaviour.

**8. Financial Implications**

8.1 Not Applicable.

**9. Legal Implications**

9.1 Not Applicable.

**10. Value for Money**

10.1 Not Applicable.

**11. Consultation**

11.1 Not Applicable.

**12. IT Implications**

12.1 Not Applicable.

**13. Diversity**

13.1 Not Applicable.

**14. Communications**

14.1 Not Applicable

**15. Environmental Impact**

15.1 Not Applicable

**16. Social Impact**

16.1 Not Applicable

17. Report Author, Position, Contact Details

17.1 Chris Margrave  
Director of Property Services  
[Chris.margrave@stlegerhomes.co.uk](mailto:Chris.margrave@stlegerhomes.co.uk)  
01302 862709

18. Background Papers / Appendices

18.1 Appendix A – Committee Terms of Reference



## **St. Leger Homes of Doncaster**

### **Terms of Reference**

#### **Performance and Improvement Committee**

##### **1. Constitution and Remit**

- 1.1 The Performance and Improvement Committee is constituted as a Committee of the Board to oversee the quality assurance activities and processes so that the Company fulfils its commitment as a customer-focused organisation and to meet the Management Agreement.

##### **2. Authority**

- 2.1 The Committee is authorised by the Board to review or investigate any activity within its terms of reference and to seek the information it requires to inform its assessment on the quality of services being provided by the Company.

##### **3. Membership**

- 3.1 The Committee will comprise of four members as follows:
- a. Two Tenant Directors
  - b. One DC nominated Director
  - c. One Independent Director.
- 3.2 The Chair of the Committee shall be appointed by the Board on the recommendation of the Board Chair.
- 3.3 Appointments to the Committee shall be for a period of one year and reviewed at the first Board meeting following the AGM.
- 3.4 The Lead Executive Director will be the Director of Housing Services.
- 3.5 The Executive Support Officer will be the Secretary to the Committee.

##### **4. Quorum**

- 4.1 The Committee will be deemed to be quorate when three members are present, including one Tenant Director.

## **5. Meetings**

- 5.1 The Committee will meet at least four times per year at a frequency to be determined by the Committee and with the agreement of the Board.
- 5.2 Committee meetings will be supported by the Housing Services and Property Services Directorates; however, the Committee may request other officers to attend meetings to assist with its discussions on any particular matter.
- 5.3 Board Members who are not members of the Committee shall have the right of attendance.
- 5.4 Meetings may be held by telephone or video conference if necessary.

## **6. Agendas and Minutes**

- 6.1 Committee meeting agendas and reports will be sent to all members seven days before each meeting together with draft minutes of the previous meeting.

## **7. Reporting**

- 7.1 The minutes from each meeting will be presented for information at the next Board meeting.
- 7.2 The Committee will provide the Board with an Annual Report, timed to support the AGM, summarising its conclusions from the work it has done during the year.

## **8. Responsibilities**

- 8.1 The responsibilities of the Committee are cross referenced to the Decision Making Framework – Summary of Decision Making Delegations which is set out in the Scheme of Delegation.

### Reference 3 - Annual Development Plan

- a. Keep under review the Company's performance in all key areas of service delivery.
- b. Make recommendations on areas for improvement and monitor performance and service improvement.
- c. Ensure that customer feed-back including complaints and compliments are handled expeditiously and that they are taken into account to inform future service delivery.
- d. Monitor service delivery standards and ensure that findings are used to promote continuous service improvement.
- e. Draw to the Board's attention major service failures and agreed action plans.



- f. Oversee the conduct of regular customer surveys and draw the Board's attention to adverse trends.
- g. Receive reports from the Tenant Scrutiny Panel and agree and monitor action plans arising from those reports.
- h. Keep under review service quality assurance procedures and systems to ensure that that these reflect best practice.

Reference 19 – Review significant policy changes

- i. Oversee and make recommendations on service delivery policies.
- j. Review policy changes.

# **ST LEGER HOMES OF DONCASTER LTD**

Company limited by guarantee registered in England  
Company Number 05564649

## **Board**

# **REPORT**

- Date** : 07 October 2021
- Item** : 10.3
- Subject** : Employment and People Committee  
Annual Report
- Presented by** : Dave Wilkinson  
Chair of the Board
- Prepared by** : Dave Richmond  
Chief Executive
- Purpose** : To provide an annual overview of the activities undertaken by the Employment & People Committee and give assurance to Board that the Committee has fulfilled its Terms of Reference.

### **Recommendation:**

That Board note the 2021 Employment and People Committee Annual Report and that Employment and People Committee have reviewed the Terms of Reference and agree that they have been fulfilled.

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. 9.3  
Date: 7 October 2021**

**1. Purpose of the Report**

- 1.1 To provide an annual overview of the activities undertaken by the Employment and People Committee (E&P Committee) and give assurance to Board that the Committee has fulfilled its Terms of Reference, which are attached at Appendix A.

**2. Recommendation**

- 2.1 That Board note the 2021 Employment & People Committee Annual Report and that Employment and People Committee have reviewed the Terms of Reference and agree that they have been fulfilled.

**3. Introduction**

- 3.1 The E&P Committee is accountable to the Board for the fulfilment of the responsibilities delegated to it as set out in the Committee's Terms of Reference. The Terms of Reference requires that E&P Committee will provide the Board with an Annual Report summarising its conclusions from the work undertaken during the year. The current Terms of Reference are attached at Appendix A.

**4. Meetings and Attendance**

- 4.1 The E&P Committee met on four occasions since the Board AGM in October 2020. These meetings were held on:
- 19 November 2020
  - 10 February 2021
  - 4 May 2021
  - 14 September 2021
- 4.2 The Terms of Reference for the E&P Committee is enclosed as Appendix A for Members to review and ensure it is still relevant and that the Committee has fulfilled its duty.
- 4.3 The Terms of Reference state that the Committee will comprise of at least four members as follows:
- The Chair of the Board
  - The Chief Executive
  - A representative of the Audit and Risk Committee
  - A representative of the Performance and Improvement Committee
  - One DC nominated Director

4.4 The members of the Committee are as follows:

Dave Wilkinson	Board Chairman & Chair of Committee
Joe Blackham	Council Member
Jane Nightingale*	Council Member
Trevor Mason **	Independent Member
Susan Jones***	Independent Member
Anthony French***	Tenant Member

\*19 November 2020 meeting only

\*\* 19 November 2020 and 10 February 2021 meetings only

\*\*\* From 4<sup>th</sup> May 2021 onwards

4.5 Attendance at the meetings has been as follows:

	19 Nov 20	10 Feb 21	4 May 21	14 Sept 21
Dave	x	✓	✓	✓
Joe	✓	✓	✓	x
Jane	✓	n/a	n/a	n/a
Trevor	✓	✓	n/a	n/a
Susan	n/a	n/a	✓	✓
Anthony	n/a	n/a	✓	✓

4.6 The Chief Executive has been present at each of the meetings, together with the Head of Human Resources & Organisational Development. The Head of Asset Management was also present at the 4<sup>th</sup> May 2021 meeting.

## 5. Work of the Committee

5.1 During the year the Committee meeting has considered a range of reports:-

- Staff Conference Arrangements and Feedback
- Staff Survey
- Gender Pay Report
- Exit Payments Pensions Discretion
- Review of Performance Management Process (1:1 Personal Review Policy)
- Agile working proposals
- Health & Safety - ISO45001 – Joint Audit Outcomes
- Health and Safety Minutes
- Review of Terms of Reference
- Impact of Covid and our staff attendance, shielding and potentially productivity
- Committee Annual Report

5.2 The Committee was also involved in the recruitment of Director of Property Services in November 2020 and also Director of Housing and Customer Services in July 2021 by forming part of the final interview panel.

5.3 The Committee has been quorate on each of the 4 occasions it has met.

The agenda and papers have all been circulated 7 days prior to the meeting and all minutes have been reported to the next Board meeting following the Committee.

- 5.4 Of the 7 specific responsibilities delegated to the Committee detailed within the Terms of Reference, they have only enacted on 2 of these delegations. These are in relation to:-

Reference 19 – Approve Policy changes

Committee have received reports on Exit Payment Pensions Discretion and a Review of Performance Management Process (1:1 Personal Review Policy)

Reference 24 and 25 - Chief Exec recruitment and Directors recruitment

Committee was also involved in the recruitment of Director of Property Services and Director of Housing and Customer Services by forming part of both the final interview panels.

There was no requirement for Committee to make any further delegated decisions under the Decision Making Framework set out in the Terms of Reference.

## **6. Key Messages/Issues**

### **6.1 Staff Surveys and Staff Conference**

In late 2020 and through 2021, there have been a number of staff surveys conducted which enabled Executive Management Team to assess how the workforce was adapting and coping through the pandemic. E&P Committee received regular updates from these surveys, considering learning from the results and also agreeing any actions that were proposed as a result.

In May 2021 Executive Management Team delivered staff conference through Microsoft Teams for the second year. For 2021, there were 4 sessions held over 2 days. Employment and People Committee had the opportunity to attend one of the sessions, but also received feedback from these conference sessions.

- 6.2 Employment and People committee were also asked to consider how the organisation will adopt a more Agile Working approach as an outcome of the pandemic.
- 6.3 Employment and People Committee received updates and outcomes of the ISO45001 joint Health and Safety Audit. From June 2021, these updates will be provided to the newly formed Building Safety and Compliance Committee.
- 6.4 The Committee received the following annual updates
- Gender Pay Report at the meeting in February 2021.
  - Exit payments, pension discretion policy and ill health retirements at

the meeting in May 2021.

6.5 Policies

During the year, the Committee reviewed and approved the following policies:

- Review of Performance Management Process

6.6 Health and Safety Minutes

The Committee continues to review the minutes from the Joint Safety Committee meeting and has received the minutes from the following meetings:

- 20 November 2020
- 4 May 2021

From 4 June onwards, minutes from the Joint Safety Committee will be reported through the newly formed Building Safety and Compliance Committee.

**7. Impact on Key Strategic Objectives**

- 7.1 SLHD aims to be an employer of choice - actions in relation to, and impacting on, our employees are handled sensitively and appropriately. E&P Committee plays a key role in ensuring that this is the case.

**8. Financial Implications**

- 8.1 Not applicable.

**9. Legal Implications**

- 9.1 Not applicable.

**10. Value for Money**

- 10.1 Not applicable.

**11. Consultation**

- 11.1 Not applicable.

**12. IT Implications**

- 12.1 Not applicable.

**13. Diversity**

- 13.1 Not applicable.

**14. Communications**

14.1 Not applicable.

**15. Environmental Impact**

15.1 Not applicable.

**16. Social Impact**

16.1 Not applicable.

**17. Report Author, Position, Contact Details**

17.1 Dave Richmond  
Chief Executive  
01302 862700

**18. Background Papers/Appendices**

18.1 Appendix A – Committee Terms of reference



## **St. Leger Homes of Doncaster**

### **Terms of Reference**

#### **Employment and People Committee**

##### **1. Constitution and Remit**

- 1.1 The Employment and People Committee is constituted as a Committee of the Board to support the Board in its responsibilities for issues of overall grading structure and key terms and conditions of employment for staff within the overall budgetary allocation for Management and Staffing.

##### **2. Authority**

- 2.1 The Committee is authorised by the Board to review or investigate any activity within its terms of reference.
- 2.2 The Committee is authorised by the Board to require such additional assurance reviews or remedial action as it deems appropriate.

##### **3. Membership**

- 3.1 The Committee will comprise of at least four members as follows:
- a. The Chair of the Board
  - b. The Chief Executive
  - c. A representative of the Audit and Risk Committee
  - d. A representative of the Performance and Improvement Committee
  - e. One DC nominated Director
- 3.2 One of the representatives of the two committees shall also be a tenant
- 3.3 The Chair of the Board shall be the Chair of the Committee.
- 3.4 Appointments to the Committee shall be for a period of one year and shall be at the first Board Meeting following the AGM.



3.5 The Lead Executive Director will be the Chief Executive.

3.6 The PA to the Chief Executive will be the Secretary to the Committee.

#### **4. Quorum**

4.1 The Committee will be deemed to be quorate when three members are present.

#### **5. Meetings**

5.1 The Committee will meet on at least two occasions during a year with opportunities to meet informally with the Chief Executive when required.

5.2 The Committee may request other officers to attend meetings to assist with its discussions on any particular matter.

5.3 Board Members who are not members of the Committee shall have the right of attendance.

5.4 Meetings may be held by telephone or video conference if necessary.

#### **6. Agendas and Minutes**

6.1 Committee meeting agendas and reports will be sent to all members seven days before each meeting together with draft minutes of the previous meeting.

#### **7. Reporting**

7.1 The minutes from each meeting will be presented for information at the next Board meeting.

7.2 The Committee will provide the Board with an Annual Report, timed to support the AGM, summarising its conclusions from the work it has done during the year.

#### **8. Responsibilities**

8.1 The responsibilities of the Committee are cross referenced to the Decision Making Framework – Summary of Decision Making Delegations which is set out in the Scheme of Delegation.

##### Reference 8 - Pay and Grading Review

- a. Approve the overall grading structure and key terms and conditions of employment for staff within the overall budgetary allocation for Management and Staffing.
- b. Consider and determine the overall pay and grading review for the Company's staff.
- c. Consider any remuneration related issues as requested by the Chief Executive.

Reference 13 - Management Agreement

- d. Act as an arbiter in Disputes Resolution as outlined in Stage 2 of the Disputes Resolution procedure.

Reference 14 - Probity – Code of Conduct

- e. Support the Chair of the Board in addressing issues of conduct of Board Members.

Reference 19 - Approve policy changes

- f. Implement all staffing related policies and agree major policy changes.
- g. Determine remuneration policies for the company, including relocation packages.
- h. Receive reports of Pensions Discretion Policy decisions and Flexible Retirement requests and outcomes for staff, and have the decision making role in respect of requests from the Leadership Team.
- i. Note any pensions related decisions in accordance with approved policies.

Reference 23 - Significant restructures or changes to staff terms & conditions

- j. Consider any major staffing restructures.
- k. Note any leavers from the organisation who have left by redundancy or with a compromise agreement.

Reference 24 and 25 - Chief Exec recruitment and Directors recruitment

- l. Undertake the recruitment and selection of Executive Management Team Members, including the Chief Executive.

Reference 26 - Chief Exec and Executive Management Team (EMT) remuneration

- m. Consider pay of Chief Executive and Executive Management Team annually and make recommendations to the Board.

# **ST LEGER HOMES OF DONCASTER LTD**

Company limited by guarantee registered in England  
Company Number 05564649

## **BOARD REPORT**

**Date** : 07 October 2021

**Item** : 10.4

**Subject** : Building Safety and Compliance Committee  
Annual Report

**Presented by** : Dave Wilkinson  
Chair of the Board

**Prepared by** : Chris Margrave  
Director of Property Services

**Purpose** : To provide an annual overview of the  
activities undertaken by the Building Safety  
and Compliance Committee and give  
assurance to Board that the Committee has  
fulfilled its Terms of Reference.

### **Recommendation:**

That Board note the 2021 Building Safety and Compliance Committee Annual report and that Building Safety and Compliance Committee have reviewed the Terms of Reference and agree that they have been fulfilled.

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. 10.4  
Date: 07 October 2021**

## **1. Purpose of the Report**

- 1.1 To provide an annual overview of the activities undertaken by the Building Safety and Compliance Committee (BSC Committee) and give assurance to Board that the Committee has fulfilled its Terms of Reference, which are attached at Appendix A.

Committee are also asked to review the Terms of Reference to ensure it is still current and encompasses the remit of the Committee.

## **2. Recommendation**

- 2.1 That BSC Committee approve the Annual Report for submission to the Board on 7 October 2021.

That BSC Committee review the Terms of Reference to ensure it is still current and encompasses the remit of the Committee.

## **3. Introduction**

- 3.1 The BSC Committee is accountable to the Board for the fulfilment of the responsibilities delegated to it as set out in the Committee's Terms of Reference. The Terms of Reference requires that BSC Committee will provide the Board with an Annual Report summarising its conclusions from the work undertaken during the year. The current Terms of Reference are attached at Appendix A.

## **4. Meetings and Attendance**

- 4.1 The BSC Committee was formed in March 2021 and have met on two occasions since then. These meetings were held on:
- 18 June 2021
  - 21 September 2021
- 4.2 The Terms of Reference for the BSC Committee is enclosed as Appendix A for Members to review and ensure it is still relevant and that the Committee has fulfilled its duty.
- 4.3 The Terms of Reference for the BSC Committee states that the Committee will comprise of at least four members as follows:
- The Chair of the Board
  - A representative of the Audit and Risk Committee
  - A representative of the Performance and Improvement Committee

- One DC nominated Director

4.4 The members of the Committee are as follows:

Dave Wilkinson	Board Chairman & Chair of Committee
Councillor Phil Cole	Council Member
Trevor Mason	Independent Member
Steve Lyons	Tenant Member

4.5 Attendance at the meetings has been as follows:

	18 June 21	21 Sept 21
Dave	✓	✓
Phil	✗	✓
Trevor	✓	✓
Steve	✓	✗

4.6 The Director of Property Services has been present at both meetings, together with the Head of Service.

The Interim Head of Asset Management was present at the 18 June meeting and the newly appointed Head of Building Safety was present at the 21 September meeting.

4.7 In August 2021, the Committee appointed an Independent advisor who has specific knowledge of compliance and will be able to offer advice to the Committee as required. The Independent Advisor shall be in attendance at all future Committee Meetings.

## 5. Work of the Committee

5.1 During the year the Committee meeting has considered a range of reports:-

- Terms of Reference review
- Health, Safety and Compliance Report
- Health, Safety & Compliance Strategy
- Asbestos Management Policy and Plan
- C365 Compliance Management System update
- Health and Safety Minutes
- Demo of C365 Management System
- Legal Register update
- Health and Safety update
- Committee Annual report

5.2 The Committee has been quorate on the 2 occasions it has met since it was formed in March 2021. The agenda and papers have all been circulated 7 days prior to the meeting and all minutes have been reported to the next Board meeting following the Committee.

- 5.3 Of the 2 specific responsibilities delegated to the Committee detailed within the Terms of Reference, they have enacted both of these delegations as follows:-

Reference 19 - Approve policy changes

Committee considered the Asbestos Management Policy and Plan and the Health, Safety and Compliance Strategy prior to both documents going on to Board for formal approval.

8.2 Compliance Assurance

Alongside reviewing and commenting on the draft Health, Safety and Compliance Strategy the Committee receives regular performance updates in relation to all areas of compliance including detail of how we manage statutory and regulatory compliance of the 'Big 6' health and safety compliance elements.

Committee have also been regularly updated on the procurement of the C365 compliance management system currently underway and received a demo of the system at its September 2021 meeting.

**5. Key Messages/Issues**

5.1 Remit of the Committee

At the first meeting in June 2021, Members discussed the remit of the group with the Director of Property Services setting the scene and advising of the role of the Committee.

It was noted that the Committee has been formed for an initial 12 months, but this is likely to be extended.

- 5.2 Committee received regular overview reports on the current position relating to key areas of Building Safety and compliance.

Committee are also receiving regular updates including a demo of the new C365 Compliance Management System being implemented which will support proactive management of the Big 6 Building Safety compliance elements and the robust management of actions required.

5.3 Policies

During the year, the Committee reviewed and approved the following policies:

- Health and Safety Strategy for comment and consideration in advance of it progressing to Board for formal approval.
- Asbestos Policy and Asbestos Management Plan

5.4 Health and Safety Minutes

The Committee reviews the minutes from the Joint Safety Committee meeting and has received the minutes from the following meetings:

- 12 May 2021
- 18 August 2021

**6. Financial Implications**

6.1 Not applicable.

**7. Legal Implications**

7.1 Not applicable.

**8. Value for Money**

8.1 Not applicable.

**9. Consultation**

9.1 Not applicable.

**10. IT Implications**

10.1 Not applicable.

**11. Diversity**

11.1 Not applicable.

**12. Communications**

12.1 Not applicable.

**13. Environmental Impact**

13.1 Not applicable.

**14. Social Impact**

14.1 Not applicable.

**15. Report Author, Position, Contact Details**

15.1 Chris Margrave  
Director of Property Services  
01302 862709

**16. Background Papers/Appendices**

16.1 Appendix A – Committee Terms of reference



## **St. Leger Homes of Doncaster**

### **Terms of Reference**

#### **Building Safety and Compliance Committee**

##### **1. Constitution and Remit**

- 1.1 The Building Safety and Compliance Committee is constituted as a Committee of the Board to support the Board in its responsibilities for all issues relating to building safety and compliance with statutory regulations in relation to the six compliance areas of asbestos, fire, water, electricity, gas and lifts.

##### **2. Authority**

- 2.1 The Committee is authorised by the Board to review or investigate any activity within its terms of reference.
- 2.2 The Committee is authorised by the Board to require such additional assurance reviews or remedial action as it deems appropriate.

##### **3. Membership**

- 3.1 The Committee will comprise of four members as follows:
- a. The Chair of the Board
  - b. A representative of the Audit and Risk Committee
  - c. A representative of the Performance and Improvement Committee
  - d. One DC nominated Director
- 3.2 One of the representatives of the two committees shall also be a tenant
- 3.3 The Chair of the Board shall be the Chair of the Committee.
- 3.4 Appointments to the Committee shall be for a period of one year and shall be at the first Board Meeting following the AGM.



3.5 The Lead Executive Director will be the Director of Property Services.

3.6 The provision of an Independent advisor to the Committee with specific knowledge of compliance shall also be in attendance.

3.7 The PA to the Director of Property Services will be the Secretary to the Committee.

#### **4. Quorum**

4.1 The Committee will be deemed to be quorate when three members are present.

#### **5. Meetings**

5.1 The Committee will meet on at least four occasions during a year with opportunities to meet informally with the Director of Property Services or Chief Executive when required.

5.2 The Committee may request other officers to attend meetings to assist with its discussions on any particular matter.

5.3 Board Members who are not members of the Committee shall have the right of attendance.

5.4 Meetings may be held by telephone or video conference if necessary.

#### **6. Agendas and Minutes**

6.1 Committee meeting agendas and reports will be sent to all members seven days before each meeting together with draft minutes of the previous meeting.

#### **7. Reporting**

7.1 The minutes from each meeting will be presented for information at the next Board meeting.

7.2 The Committee will provide the Board with an Annual Report, timed to support the AGM, summarising its conclusions from the work it has done during the year.

#### **8. Responsibilities**

8.1 The responsibilities of the Committee are cross referenced to the Decision Making Framework – Summary of Decision Making Delegations which is set out in the Scheme of Delegation.

Reference 19 - Approve policy changes

- a. Implement all agreed building safety and compliance policies and recommend to The Board any major policy changes.
- b. Ensure all policies required for regulatory building safety purposes are developed and reviewed in a timely manner presented for the consideration of the Board.

## 8.2 Compliance Assurance

- a. Ensures external independent scrutiny and advice in respect of compliance issues is available to this Committee and The Board sufficient to enable the Committee to effectively analyse building safety performance. Request and consider reports on building safety and compliance sufficient to present to The Board an accurate appraisal in respect of the company's performance regarding statutory and regulatory standards.
- b. Reviews the Building Safety Case for all buildings which require a safety case prior to submission to the Council.

## Governance Summary Communications Template

<b>Report from:</b>	Performance and Improvement Committee	
<b>Date of meeting:</b>	1 September 2021	
<b>Report author:</b>	Stuart Booth	
<b>Summary of key items discussed at the meeting, (if possible, keep these to the top three):</b>	<b>Decisions made and actions agreed (if possible, keep these to the top three):</b>	
<u>1. Tenant and Residents Panel (TRIP) – Cleaning Standards Review</u> Members noted the key areas of focus of the review. The key recommendations were responded to by an EMT report.	Out of 16 recommendations TRIP made, 11 were agreed by Executive Management Team (EMT) to be implemented.	
<u>2. Tenant and Residents Panel – Scheduled and Responsive Repairs Review</u> Members noted the contents of the report which included comparative data from other organisations.	Performance and Improvement members requested that the results of the further in depth review be brought to either a Board Strategic Planning Day or a future Performance and Improvement Committee Meeting to discuss in detail.	
<u>3. Transactional Surveys</u> Members queried if the survey was independent and value for money. Members also asked if smaller paid focus groups could be more efficient than a broad transactional survey.	Members requested that engagement data, including costs, detailing how EMT focus limited resources on gaining feedback and engaging with more tenants.	
<b>Additional notes for communication to governance:</b>		
None.		

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

**1 September 2021**

**Present**

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

**In Attendance**

Jane Davies (JD) Interim Director of Housing and Customer Services, Chris Margrave, Director of Property Services, (CM), Jennie Daly (JDa), Interim Head of Housing Services, Jackie Linacre (JL), Head of Customer Services, Anne Tighe (minutes), Mark McEgan (MM), Observer

	<b>ACTION</b>
<b>1. Apologies and Quorum</b>	
1.1 No apologies received and the meeting noted as quorate.	
1.2 Introductions were made for the benefit of Mark McEgan to members.	
<b>2. Declarations of Interest by Committee Members</b>	
2.1 No declarations of interest were received.	
<b>3. Minutes of the meeting held on 19 May 2021 and matters arising</b>	
3.1 The minutes of the meeting held on 19 May 2021 were agreed as an accurate reflection of discussions held, with the following points arising:	
3.2 <b>Item 5.2 – Customer Focus Update</b> It was noted that the revised presentation later in the agenda contained the requested outcome of actions.	
3.3 <b>Item 6.3 – Service Standards</b> JL advised that the median response time was now included in reports.	
3.4 <b>Item 8.2 and 8.5 –Anti Social Behaviour Update</b> It was confirmed AR will be highlighting repeat perpetrators in further reports. AR would also break down statistics in areas in reports going forward.	
<b>4. TRIP* – Cleaning Standards Review</b>	
4.1 JDa attended to lead on this report as TRIP members were unable to attend.	

- 4.2 JDa presented the report and highlighted the issues raised by TRIP members, provided a detailed response around which recommendations EMT had agreed to implement, and the reasons why 5 recommendations would not be taken forward.
- 4.3 JD further advised that the new Head of Building Safety was now in post and the engagement strategy for each block would be picked up. Further explanation around the decision not to take forward the recommendation for all caretakers to be in static caretakers' team rather than a separate resource was provided.
- 4.4 CM referred to Personal Emergency Evacuation Plans (PEEPS) within the report and agreed that one of the first things that the new Head of Building Safety would be progressing would be a meeting with South Yorkshire to discuss PEEPS. In the event of a fire how useful would this be to emergency services and the tenants may not even be in the building.
- 4.5 SB queried if there were any budgetary or resource implications arising from implementing recommendations. JDa stated that she was not expecting any additional uplift.
- 4.6 Members asked if the information to be placed in high rise around contacting staff in SLHD could be multi-lingual and also to contain photographs of officers. JD confirmed any signs would be multi-lingual however the display of photographs was something that would have to be agreed by staff.

## **5. TRIP\* – Scheduled and Responsive Repairs Review**

- 5.1 CM led on this item and advised that although the report was helpful, a further in depth review was required and had already started. It was clear that customer wanted information not just around their appointment, but to be able to track operatives. The organisation could not consider this as the tracker was not used for anything like this at present, and Trade Union (TU) colleagues would have to be consulted and it was very likely they would not agree to such a proposal.
- 5.2 The main issues for EMT were that no access issues cost a lot of money so we needed to reduce levels to ensure workforce was more efficient. This would be reviewed alongside planned scheduled work.
- 5.3 SB queried why EMT were now doing a full in depth review, was this because EMT weren't happy with the TRIP report. CM reported that it was not because EMT were unhappy with the review, it was that the review was a starting point for a full review that was already planned.
- 5.4 Members asked if the results of the review would be brought to Board or Committee. CM advised that the review was embryonic

with the first meeting taking place last week. He had wanted an initial conversation with TU colleagues and get managers buy in to improve the service.

5.5 SL commented that he would not be interested in tracking operatives, however would appreciate receiving a text to say he was the next appointment.

5.6 Members were advised that the new Tenant Portal may offer an opportunity going forward for tenants making their own appointments and also change appointments and this should reduce no access issues.

5.7 Members requested to be informed of the review going forward either in a Board Strategic Planning Day or a future Performance and Information Meeting.

CM/AT

5.8 The Committee requested that their thanks for both reports be sent to TRIP members.

AT

## 6. Performance Information

6.1 JD provided the following update:

- Anti-Social Behaviour (ASB) – significant increase in volume however responding in and appropriate time and as best as we could
- No targets on homelessness – the backlog in workload was still of concern, however yesterday there were 134 presentations into service, not just homeless tonight but people asking for assistance
- B&B – this figure was down to 57 from 61 shown. Issues around International Hotel around short notice to remove residents had impacted on service however only a few had moved hotel as others had moved to temporary accommodation amongst other outcomes

6.2 PC queried if demand for accommodation from Afghan refugees had been confirmed. JD reported that the Council were looking to use PRS rather than local authority stock due to demand.

6.3 CM provided the following update:

- Gas Servicing – coming to end of programme with a percentage going through access procedure. The numbers have increased slightly however staff were confident target would be reached
- Voids – not necessarily going in the right direction, however some properties were more than challenging and staff were having to undertake environmental cleansing at significant cost. The Chief Executive was advising the Council of these issues during reporting cycle.

## **7. Customer Focus Update**

7.1 JL led on this item and advised there had been a significant increase in complaints and this linked into CM's reporting of tenants waiting longer for repairs. There had also been a significant increase in Councillor and MP enquiries and analysis was ongoing to try and understand why this was happening.

7.2 The presentation was given to members. SB referred to the recent EMT Key Messages that Board Members had expressed concern over the increase in complaints. The Board and not just Committee members were keen to understand the root causes. It was noted that CM had already advised on repairs issues, however the underlying questions was, was the increase impacted by Covid or linked into agile working.

7.3 Following a brief discussion it was agreed that CM and JD would discuss the issue with EMT and consider how this could be reported back to Board/Committee.

**CM/JD**

## **8. Service Standards Update**

8.1 JL presented the Service Standards Update and advised she was pleased to see we are starting to see improvements for calls answered and it was hoped this would continue. ASB was out of target for low and medium risk; time taken for medium cases was improving but availability of staff by leave and sickness was impacting on figures.

## **9. Quarterly Customer Involvement Monitoring**

9.1 JD led on this item and provided the following update:

- Customer Involvement Strategy will be presented to Board in October/November and was heavily tenant led
- Tpas accreditation process was ongoing
- Targeted consultation around reception points was taking place
- Asset Management Strategy and Environmental Strategy would be presented to Board following consultation
- The High Rise Forum was currently disappointing as only 2 tenants were involved however staff were working hard to engage other tenants going forward

## **10. Lettable Property Standards**

10.1 CM advised he was disappointed with the report, particularly as we haven't been able to reach the right demographic; the report was quite a narrow report and he would like to take this away and get a better understanding of issues therefore a broader survey would be carried out. JD agreed and reported EMT would prefer

a lived experience therefore she would prefer to withdraw the report.

10.2 Members asked if we did an interview with tenants when they take up a tenancy to ask if they had any problems and needed any repairs. If so, why wasn't the data on that feedback used to obviate the need for separate consultation. They also commented that standards were subjective to a person.

10.3 CM and JD agreed that standards were subjective to a person, and ideally each property would be decorated in neutral colours, however that would come with a significant cost and would significantly impact void targets and could potentially make a 20 day target unachievable.

10.4 Following a brief discussion it was agreed that the Lettable Standards Review would be withdrawn and scheduled for a future meeting.

**AT**

## **11. Transactional Surveys**

11.1 JL led on this item and advised it was pleasing to note our overall satisfaction was 87% which, when receiving increasing complaints, was good performance.

11.2 SM commented it felt like the organisation surveyed almost everything, asking lots of questions and trying to engage with lots of people. As members of P&I we get a lot of data however he didn't understand how it was consolidated; what was the picture it's telling us and sometimes he got lost in the details. what were the key outcomes from all engagement and what were EMT doing about it.

11.3 JL reported there was a lot of good work taking place in different pockets of the organisation, however acknowledged that it wasn't all being drawn together. For her it was the 'so what' are we doing with it and what difference does it make. She and JD have discussed pulling all the data together to see how it was going to inform decision making and how we go forward as an organisation.

11.4 PC queried if the telephone survey was done by an independent company and how much did it cost. JL explained that SLHD used Viewpoint as it was recognised that there was a need to keep the survey independent and it cost approximately £4k twice a year. The organisation did at one point use officers for the survey however it was not a cost effective way of doing it. In response to a further query JL advised that we call tenants fairly recently after any interaction/contact i.e. within a few days or a week, not historical interaction/contact.

11.5 PC stated when looking at views of quality of service, that actually getting quality of data could potentially mean getting, for example,



10 tenants together and paying them a nominal sum. This could be more efficient than a broad transactional survey.

11.6 JD reported that the organisation was also considering using Voicescape, currently used for arears, for surveys going forward. She confirmed that when officers arranged focus groups on larger pieces of work they do give incentives to people who will get involved in that way.

11.7 Following a brief discussion it was agreed that EMT needed to think about the future Board Planning, to help members understand the rich picture of SLHD. Board members receive performance data, however it would be useful to have engagement data, possibly having the costs included, that explained how EMT focus limited resources.

CM/JD

11.8 MM advised he was on a closed group looking at the new inspection regime. To sum up what everyone has said, we need to look at things in themes and become outcome based. It won't be along the last way of inspections, they will want to know what the organisations is learning from it, so we can prove tenants engagements in decision making. Taking a consultation point, they will be looking at Tpas with ownership. From what he's seen there's an immense amount of information, but we need to know key vitals. MM further advised that if there was anything that colleagues would like him to bring up in Regulator meetings, let him know before the end of October as that was the next scheduled meeting.

## **12. Consumer Standards Action Plan Update**

12.1 JD led on this item and highlighted that the Appendix of Action Plans were actions over and above standards; standards are all being met as per self assessment.

12.2 It was noted that standards will be changing, however EMT have discussed being inspection ready and agreed that it's acceptable for us surveying ourselves but need outside comment.

## **13. Committee Annual Report and Review of Terms of Reference**

13.1 The Committee received and approved the Annual Report with one typo correction.

## **14. Customer Access Strategy Action Plan**

14.1 JL led on this item and advised there would be some slippage this year, particularly with TOP implementation. Key actions that will make the most impact were due to be delivered following Phase 2 of TOP. Linked to that, there would be a complete review of the SLHD website that will move into 2022 and beyond; it was important to get that right and ensure a smooth channel shift.

14.2 SM commented that we tended to use the 'slip' expression for potential performance that is not as good as we would like it to be, we needed to ensure we're doing something about. Members would like that consistent message put across, that officers should always ensure we emphasise that we need to report an improvement going forward. He concluded by stating our regulator won't accept Covid as an excuse, we needed to re-establish ourselves and ensure slippage is mitigated as soon as possible.

**15. Any Other Business**

15.1 No other business was raised.

DRAFT

## Governance Summary Communications Template

<b>Report from:</b>	<i>Employment and People Committee</i>	
<b>Date of meeting:</b>	14 September 2021	
<b>Report author:</b>	<i>Dave Wilkinson</i>	
<b>Summary of key items discussed at the meeting, (if possible, keep these to the top three):</b>	<b>Decisions made and actions agreed (if possible, keep these to the top three):</b>	
<p>Coronavirus – Workforce Impact Committee received details of the impact of the Coronavirus pandemic amongst the workforce covering three specific areas of Sickness absence, Self Isolation and Wellbeing.</p> <p>Performance Management Update Committee received an update on progress on the delivery of a revised People Performance Management process being advised that over 67% of managers had been trained.</p> <p>Staff Conference feedback Members were presented with detail and learning from the staff conference held in June 2021.</p>	<p>Committee noted the current improving picture but asked that consideration is given to more communications to both staff and customers about the importance of being vaccinated in order that we can continue delivering services to our customers.</p> <p>Committee noted the update and good progress. They agreed that whilst recording of the conversations took place, the most important aspect was that conversations were being had.</p> <p>Committee noted the information provided and discussed options for a further Staff Conference in December with a celebratory theme and linking in with a 2<sup>nd</sup> year of Housing Hero Awards and a launch of a revised Corporate Plan.</p>	
<b>Additional notes for communication to governance:</b>		
<p>Members also considered the Committee forward plan and suggested a number of areas and initiatives that they would either like to take a lead on such as safeguarding responsibilities as a landlord. They also asked to consider organisational wide succession planning initiatives and lead on areas around organisational development and organisational culture.</p>		

**St. Leger Homes of Doncaster Limited  
EMPLOYMENT & PEOPLE COMMITTEE**

**Tuesday 14<sup>th</sup> September 2021 at 9.30am**

**Present**

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

**In Attendance**

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

**ACTION**

- |   |  |
|---|--|
| <b>1. Apologies and Quorum</b>  |  |
| 1.1 Apologies were received from Joe Blackham. The meeting was quorate.   |  |
| <b>2. Declarations of Interest by Board Members</b>   |  |
| 2.1 There were no declarations made.  |  |
| <b>3. Minutes of the previous meeting held on 4 May 2021 and matters arising</b>  |  |
| 3.1 The minutes of the previous meeting were agreed as a true record with no matters arising.   |  |
| <b>4. Coronavirus – Workforce Impact</b>  |  |
| 4.1 Committee received details of the impact of the Coronavirus pandemic amongst the workforce covering three specific areas of Sickness absence, Self Isolation and Wellbeing.   |  |
| 4.2 The Head of HR and OD provided more up to date figures advising that since the beginning of the pandemic we have had a total of 139 cases being reported with 2 people currently isolating and 3 front line colleagues currently not in work due to covid related sickness. Committee noted the significant drop in figures compared to the peak in July.<br><br>The Head of HR and OD advised Committee that going forward there is no business requirement to ask the workforce whether they are vaccinated but current sickness figures show a positive picture in terms of the level of the workforce potentially vaccinated. |  |
| 4.3 A Member asked if we are using our social media and communication methods to demonstrate the importance of vaccinations and if we can push this?<br><br>The Head of HR and OD advised that in terms of the workforce, we are actively communicating about both vaccinations and regular testing, and  |  |

that whilst it is not mandatory, it is recommended. She went onto advise that we are not collecting data on whether staff are vaccinated, however going forward if a colleague is advising that they have to self-isolate, we have a legitimate reason to ask for evidence of them being double vaccinated.

- 4.4 A Member asked if it would be reasonable for us as an employer to request proof of vaccinations since we are working with members of the public and going into their homes?

The Head of HR and OD advised that these types of conversations have been had at Doncaster wide meetings and since SLHD do not operate within the health care sector then potentially, there would be no legitimate reason to request evidence.

Based on this, The Head of HR and OD agreed to confirm the communications we are sending out to our customers. A member confirmed that information was available on both SLHD and Doncaster Council websites.

- 4.5 A Member asked if we are offering flu jabs to the workforce? The Head of HR and OD confirmed that we have requested to be involved in the Doncaster Council programme and that we have submitted numbers. She explained that we have experienced a really good uptake in the past, although there is a new process for this year which is being followed.

- 4.6 **Committee noted the impacts seen across the workforce, noted that the position is positive at present and thanked the Head of HR and OD for the update.**

## **5. Update on Performance Management Process**

- 5.1 The Head of HR and OD provided an update on progress on the delivery of a revised People Performance Management process.

She advised that training was well underway with 67% of the workforce having been trained with a number of training sessions still planned in. Feedback from the sessions that have taken place is that it's being well received and managers are finding it very helpful. She further advised that there has been some feedback on the form which is causing some anxiety for managers and there has already been conversations held about the potential for changing the form in the future which will include ensuring that it meets the needs of all roles within the business.

There was agreement from Committee that Managers and the workforce remember that this process is not about the form, but about having real and meaningful conversations.

The Head of HR and OD confirmed that there already is evidence that good conversations are being held in some teams and there is clear evidence that these conversations are being linked to performance.

The Head of HR and OD took the opportunity to advise Committee that there are future plans to consider using online/electronic forms to reduce work and paperwork, especially for those managers who manage bigger groups of staff.

- 5.2 A Member suggested that the current form looks quite complicated and any form whether hand written or online can detract from the quality of the conversation.

The Member asked that consideration is given to a really simple method of capturing the conversation that will ensure the quality of the conversation and performance management remains.

- 5.3 A Member asked about confidentiality of the paperwork if completed on paper? The Head of HR and OD advised that we are encouraging managers to complete forms on their computers where they can be saved securely, and something that will be included as part of future considerations of an online system.

- 5.4 The Chief Executive thanked members for their comments and suggestions, and explained that this is the first step in making make sure people are getting the opportunity to have these conversations with their managers and that one to ones are being held, before we develop further.

- 5.5 **Committee noted progress and thanked the Head of HR and OD for the update.**

## **6. Staff Survey and Conference feedback**

- 6.1 The Head of HR and OD presented detail of the staff conference and feedback from it, detailing what we have learned from the events this year and the options for any future sessions.

It was noted that the staff conference allowed opportunity for staff to complete the pulse survey at the end of the conference. The presentation showed that the response rate to the survey was 54% which is the highest response rate yet, but low since it was launched at the staff conference which 80% of the workforce are recorded to have attended.

Members considered the statistics from the survey.

- 6.2 A Member asked if there are plans for the next conference?

The Head of HR and OD advised there are tentative dates in the dairy for December, with Leadership discussions planned in over the next few weeks to consider whether December was too early and whether a spring conference will be more timely.

The Chief Executive commented that he is keen to undertake an event in December as he sees it's a natural time to hold such an event, perhaps with a celebratory theme. He suggested including a launch of the revised Corporate Plan as part of the event.

There was agreement that a Christmas Staff conference was very timely.

The Chief Executive took the opportunity to advise that following feedback from a series of consultation events the review of the corporate plan may involve a change to the mission statement to have a more people focused view. A Member advised that their organisation has recently done something similar and moved away from a 'mission statement' to a 'core purpose' which revolves around 'Hearts and Minds'.

- 6.3 A Members asked about whether 20% of the workforce being detailed as not attending were based in one particular area of the business?

The Head of HR and OD advised that those who did not attend were not from one specific area of the business, but spread across the organisation.

- 6.4 The Chair asked if there was an incentive or awards scheme available for the workforce? A Member expressed their views on similar award schemes they were involved in and aware of, and suggested that if they are run correctly and there is clarity for the reason for such a scheme, they can be successful.

The Chair suggested we link such a system into the staff conference.

The Head of HR and OD reminded Committee of the Housing Hero nominations that was run through December 2020 which was well received and advised this could be linked into a staff conference event very easily.

- 6.5 A Member asked if we have done anything to understand the reasons for 33 line managers not completing the survey?

The Head of HR and OD advised the survey is anonymous, and that the low response rates can be seen typically within property services. She advised that on review of the property services responses as a whole, it is clear that there are concerns being raised, including lack of opportunity to speak to managers which is the reason why there is some focused work taking place within that Directorate. The Head of HR and OD advised that there are other challenges that we need to overcome which is giving time and opportunity for trades staff to read emails through their handheld devices. She advised that other options and opportunities are being considered such as line managers emailing communications direct to their teams or discussing certain topics at team meetings.

A Member suggested looking at different ways to conduct the survey to ensure the response rate is representative across the whole business.

- 6.6 **Committee noted the information provided and the good progress made.**

- 6.7 The Chair asked what training we put in place, specifically for front facing staff where there is evidence of safeguarding issues that need to be reported.

The Head of HR and OD confirmed that all staff complete mandatory safeguarding training as they start with the business and also go through refresher training on a regular basis. She advised that a review of all mandatory training was underway which will include customer experience training, organisation wide.

Committee agreed that as an organisation and landlord entering 20k properties, there is a responsibility and opportunity to support our customers and ensure they are safe and well in their homes.

**As a result of this discussion, Committee ask for an opportunity to lead on initiatives in this area. The Head of HR and OD agreed to consider this.**

**SM**

**7. Committee Annual Report**

**7.1 Committee noted the Annual report and approved to progress to Board for information.**

**LGH**

**8. Any Other Business**

**8.1 Forward Plan**

Committee considered the forward plan and agreed a number of area that they would like to oversee.

The Head of HR and OD advised that the impact on staff of any potential accommodation changes and any proposed policy changes in-line with our new Agile Working approach which will be discussed at a future meeting. This was noted.

A Member asked if Committee should review succession planning and talent grids?

The Head of HR and OD advised it is not something that is currently being looked at, but something she envisions will be developed in the future. There was agreement that we need to ensure we continue to monitor succession planning and look to grow our own, especially in the current climate. Future considerations to be submitted to Committee for information.

It also agreed that Committee should be leading on the areas around Organisational Development and organisational Culture. They asked the Head of HR and OD to consider this and plan in conversations and reviews into the 2022 forward plan.

**SM**

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

**9.1 *Tuesday 3 November 2021, 9am***



## Governance Summary Communications Template

<b>Report from:</b>	Building Safety & Compliance Committee			
<b>Date of meeting:</b>	21 September 2021			
<b>Report author:</b>	Dave Wilkinson			
<b>Summary of key items discussed at the meeting, (if possible, keep these to the top three):</b>	<b>Decisions made and actions agreed (if possible, keep these to the top three):</b>			
<p><u>1. Demonstration of C365 Compliance Software</u></p> <p>Members received an overview of the cloud based management system designed to support organisations audit, manage and improve their level of statutory compliance.</p> <p>Members noted implementation of the system was in its infancy.</p> <p><u>2. Health, Safety &amp; Compliance update</u></p> <p>Members noted SLHD entered into a contractual issue with Fortems (contractor to carry out fire risk assessment (FRA) actions) who consequently stopped works. This had a detrimental effect on the number of outstanding actions, some of which were category 1 – where HSE requirements must be met. Members noted a solution was reached outside of the procurement framework for overdue actions only, with Fortems resuming works.</p> <p><u>3. BSC Committee Annual Report</u></p> <p>Members noted that Anthony Brown had been successfully recruited to the role of SID (specialist independent advisor) to Board &amp; BSC Committee.</p>			<p>Data validation across all disciplines continues before being transferred to C365 by staff, with the potential of it taking up to 3 years for all data to be populated to the new system.</p> <p>Members were pleased with the new system and progress made to date.</p> <p>Members anticipate a reduction in the level of outstanding FRAs across all levels in the next update report.</p> <p>Members noted that the Head of Building Safety is to carry out a review of all recommended actions to assess if they should have been actions in the first instance.</p> <p>The Head of Building Safety is also considering options of taking some of this work in-house.</p> <p>Members asked that an introductory meeting is arranged between Anthony Brown and Board. Additionally, pre-meetings are arranged prior to each BSC Committee meeting.</p>	
<b>Additional notes for communication to governance:</b>				
None.				

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

**Tuesday 21 September 2021 at 9am**

**Present**

Dave Wilkinson (Chair), Trevor Mason, Phil Cole.

**In Attendance**

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

**Also in Attendance**

Keiron Gavaghan – Director C365, Daniel Bateman – C365.

**ACTION**

- |   |           |
|---|-----------|
| <b>1. Apologies and Quorum</b>  |           |
| 1.1 Apologies were received from Steve Lyons.<br><br>The meeting was quorate.   |           |
| <b>2. Declarations of Interest by Board Members</b>   |           |
| 2.1 There were no declarations made.  |           |
| <b>3. Minutes of the meeting held on 18 June and matters arising</b>  |           |
| 3.1 <b>From agenda item 3.2 – Review of Terms of Reference and scene setting for Members</b> The Chair asked that the expert consultant is referenced within the TOR. Action complete.<br><br><b>From agenda item 3.4 – Board Member Membership</b> Forward planning for the BSC Committee and also Board Member membership to Committee's may require further consideration.<br><br>A member raised concern that Audit & Risk Committee membership was 'light on the ground', the Chair asked for this to be added to the next Board meeting for discussion. | <b>MJ</b> |
| 3.2 <b>From agenda item 5 – Health, Safety &amp; Compliance Strategy</b><br>Consider a revision to include: strengthening tenant voice, consideration of upskilling the workforce, detail the procurement of an expert consultant. Action complete.<br><br>The Chair also asked if Board of Directors and Leadership Team can be added into the values and commitment section. He also asked for the name of the Committee on page 8 to be corrected. Action complete.  |           |

- 3.3 **From agenda item 6 – Asbestos Management Policy and Plan**  
A Member asked if the acronyms can be set out which would be helpful for Board, and the spelling of principles/principals is corrected. The Member suggested that the Management Plan should be more action focussed rather than duplicating the detail within the policy. Action complete.
4. **Demo of C365**
- 4.1 Both Keiron Gavagan, Director and Daniel Bateman gave an overview of the cloud based management system designed to support organisations audit, manage and improve their level of statutory compliance.  
  
They explained their client base included registered social landlords, public sector, NHS Trusts. Of particular relevance to SLHD was The Riverside Group, Midland Heart and Anchor Trust.
- 4.2 It was noted the system was in its infancy in terms of implementation, with the demonstration giving members a sense of what the capability of the system is and what the organisation was trying to achieve.
- 4.3 **Q. Can the majority of data we hold be transferred?**  
  
A. DB - yes, we are working our way through each discipline and validating the data before transferring it across to C365. However, it will not be fully up and running on 1 November. It will take a period of time, potentially 3 years for all of the data to be populated with the final years electrical testing programme last on this list. We are currently transferring quick wins such as last years gas servicing programme (approximately 19,000 properties) and the data we hold for 27 lifts. Our current focus is to carry out an initial gap analysis on the key modules.  
  
The Director of Property Services highlighted the validation work around the original data set has given us a good foundation to work with.
- 4.4 **Q. As we build the information how does this link with building up works programmes?**  
  
A. CM - C365 is a compliance software that gives us information on the asset and not a strategic asset tool. Our focus is to collate the rich data initially and then in terms of building up works programmes we will then look towards achieving that in the future.
- 4.5 The Head of Building Safety advised high rise residential buildings has a focus and what the system will allow us to do is submit a Building Safety assurance/certificate by 2023 to the Building Safety Regulator. Additionally, we can give access permissions to South Yorkshire Fire & Rescue (SYFR) to view specific information contained within the system.
- 4.6 **Q. Have we had any conversations with SYFR?**

A. DB – I have met with Amy Jenkinson, Business Fire Safety Manager - SYFR and have an introductory meeting scheduled with her next week. She appears very interested in C365 and what information will be made available to the fire service.

4.7 **Q. How does C365 Interface with our existing systems?**

A. DB – it replaces all existing systems, in essence it will be ‘one version of the truth’. All data certification will sit here.

4.8 **Q. Who will the user group be?**

A. CM – frontline facing staff, where a trades operative goes to the property, they will be able to click on the address and it notifies them of an asbestos result for example. Some of the reports are currently 80 pages long but we are looking to streamline this by just providing the test data sheets.

4.9 **Q. How do we make sure the system isn't overloaded with too much data?**

A. DB – it will be the responsibility of each subject matter expert, they will be responsible for the quality of data and to also ensure that relevant staff have access to the data they need.

4.10 **Q. Does the system alert trades operatives to anti-social behaviour (ASB) markers?**

A. DB - OpenHousing where the jobs are logged with the Customer Access Team (CAT) is where ASB markers are recorded, so consideration needs to be given to both systems.

4.11 **Q. How much training is needed for users?**

A. DBateman – we have web based training sessions already set up, with a train the trainer methodology and super users. The system is intentionally simple to use with a ‘3 click rule’, permissions are given to administrators, editors and users – the majority of which will be users.

4.12 The Chair asked if a copy of the executive report could be shared with committee members, DBateman agreed to forward this onto DBoardman for circulation.

**DB**

4.13 The Director of Property Services advised we will be making changes to the Health, Safety & Compliance update report the committee receives. The dashboard information contained within the report will be generated from C365.

4.14 **The Committee were pleased to see the C365 demonstration and welcomed its implementation.**

**5. Health, Safety and Compliance Legal Register update**

5.1 The Head of Building Safety presented the report that provided committee with a list of legislation from a Health, Safety & Compliance point of view relevant to the functions of SLHD which it needed to comply with.

5.2 It was noted the register had been reviewed and updated following the enactment of the Fire Safety Bill and updated to reflect the Fire Safety Act 2021. It was noted the Building Safety Bill was still in draft stage with no immediate legislative changes on the horizon.

Committee members commented on the comprehensive report.

5.3 **BSC Committee noted the Health, Safety & Compliance Legal Register update.**

## 6. Health, Safety & Compliance update

6.1 The Director of Property Services presented the report that gave an overview of the current position relating to key areas of health & safety and compliance during July 2021.

### 6.2 Fire Risk Assessments (FRAs)

He drew members attention to 7.4 of the report and highlighted the increase in the number of overdue actions from the fire risk assessments (FRAs) – an increase in all level buildings with detail given at appendix 2.

He explained there was a contractual issue with Fortems who had been engaged to deliver FRA works, as a result Fortems had stopped works. However, following ongoing dialogue a way forward had been established, with agreement reached for Fortems to start work again. It was noted some of these outstanding actions were category 1, where HSE requirements must be met. Contractually a solution was reached outside of the procurement framework for overdue actions only.

He said in addition to this the Head of Building Safety is reviewing some of the recommended actions to assess if they should have been actions in the first instance. The Head of Building Safety was also reviewing in house alternative options.

6.3 It was anticipated the next report should show significant reductions in outstanding FRA actions.

The Chair fully supported the procurement decision taken as the risks in association with not completing these actions outweighed the implications posed by the contractual issue.

### 6.4 Periodic Testing

Referring to point 10.2 of the report the Director of Property Services

advised that the organisation was working through this years programme and tendering the lost year of the pandemic with 13 properties in the 'no access' procedure. He added there was a lot of work happening in the back ground to access all 13 properties.

#### 6.5 Asbestos Management Data

The Director of Property Services highlighted that he had given approval to not include a proportion of currently held asbestos data following a review that had identified some data is not valid and does not support the new surveying strategy in the recently approved Asbestos Management Policy and Plan.

6.6 The Chair asked when the new Building Safety structure would be fully recruited to? The Head of Building Safety advised interviews were well underway and he anticipated the team to be recruited to by October 2021.

#### 6.7 **The Committee noted the Health, Safety & Compliance updated.**

### 7. **Committee Annual Report**

7.1 The Chair presented the report that provides an annual overview of the activities undertaken by the Building Safety & Compliance Committee and gives assurance to Board that the Committee has fulfilled its Terms of Reference.

7.2 The Director of Property Services commented that the newly formed Committee had met on only two occasions since the report had been produced and already the work of the committee detailed at 5.1 of the report demonstrated how seriously it was taking its responsibilities in relation to health, safety & compliance activities.

7.3 It was noted that Anthony Brown has been successfully recruited to the SID (senior independent advisor) role to Board & BSC Committee.

The Chair asked that an introductory meeting with Board members and Anthony Brown be arranged in addition to a half hour pre-meet in advance of all BSC Committee meetings.

**MJ**

7.4 **The Committee approved the Annual Report for submission to the Board on 7 October 2021.**

### 8. **Joint Safety Committee minutes 18 August 2021**

8.1 The Director of Property Services advised that there was nothing specific he wish to raise from the meeting and commented an overview of the big 6 compliance areas had been given at the meeting. Additionally, we have been asking for staff to support us and increase the number of near misses being reported.

8.2 A member raised concern that he felt day to day operational issues

were being discussed rather than organisational strategic issues. The Director of Property Services advised he was intentionally shifting the focus of future agenda items so the meeting centred around more strategic issues.

8.3 **The Committee noted the Joint Safety Committee minutes.**

9. **AOB**

9.1 Future Agenda Items

Following discussions it was agreed to add the following items to the committee forward plan for the November 2021 meeting:

1. Future Vision – Building Safety & Compliance.
2. Grenfell Towers Inquiry Phase 1 recommendations

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

10.1 18 November 2021, 2pm