

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

**To be held at 2pm on Thursday 3 August 2023
Civic Office, Ground Floor – Room 007a/b or via MS Teams (Hybrid Meeting)**

AGENDA

12:30 – 13:00 - Pre-Board Training – Performance / KPI's / Benchmarking

13:00 – 13:45 – Lunch with potential tenant board member candidates

- | | | | |
|------------------------|--|-------------|-------------------------|
| 1 | Apologies and Quorum | | Verbal |
| 2 | Declarations of Interest by Board Members | | Verbal |
| 3a | Matters arising and action log from previous meetings | D Wilkinson | Enclosed |
| 3b | Ratification of minutes of meeting held on 1 June 2023 | D Wilkinson | Enclosed |
| 4 | Chair and Chief Executive's update | D Wilkinson | To be circulated |
| For Approval | | | |
| 5 | Financial Statements | J Crook | Enclosed |
| 6 | Revised Health and Safety Policy | C Margrave | Enclosed |
| 7 | Damp, Mould and Condensation (DMC) Policy | C Margrave | Enclosed |
| 8 | Lift Policy | C Margrave | Enclosed |
| 9 | Housing Management Policy | M McEgan | Enclosed |
| 10 | Review of Customer Charter and Service Standards | M McEgan | Enclosed |
| For Information | | | |
| 11 | Revenue Monitoring | J Crook | Enclosed |
| 12 | Capital Monitoring | J Crook | Enclosed |
| 13 | KPI Performance | J Crook | Enclosed |
| 14 | HDN Peer Review Outcomes – Make a note on Convene that the PDF is their report and we cannot amend although recommended that Americanisms are changed | J Crook | Enclosed |
| 15 | Committee Minutes <ul style="list-style-type: none">• Building Safety and Compliance Committee meeting minutes – 17 May 2023• Performance and Improvement Committee meeting minutes – 18th May 2023• Audit and Risk Committee meeting minutes – 26th June 2023 | D Richmond | Enclosed |
| 16 | Any Other Business | | |
| 17 | <i>Date of next meeting – 5 October 2023</i> | | |

Board Decision Summary

Meeting:	St Leger Homes Board
Date of meeting:	1 June 2023
Chair:	Dave Wilkinson
The Board approved:- Agenda Item 7 – Health and Safety Strategy. Agenda Item 16 – Modern Slavery Statement.	
The Board recommended:- Agenda Item 5 – Strategic Risk Register – That the current register is re-considered, and a revised version is submitted to the next meeting of the Board. Agenda Item 6 – Revised Health and Safety Policy – That more detailed information in relation to Board responsibilities is included within the policy and a revised version is submitted to the next meeting of the Board.	
The Board noted:- Agenda Item 8 – Health and Safety Performance Report. Agenda item 9 – Year end Capital and Revenue Monitoring. Agenda Item 10 – Year end KPI Performance. Agenda Item 11 – Repairs Excellence Evaluation (One Repairs Service). Agenda Item 12 – Year end review Annual Development Plan. Agenda Item 13 – People Strategy Update. Agenda Item 14 – Customer Voice Strategy. Agenda Item 15 – Safeguarding Children and Adults Annual Report for 2022-23. Agenda Item 17 – Board Expenses and Attendance Register. Agenda Item 18 – Board Forward Plan	

St Leger Homes of Doncaster Board - Action Log						
NO	Month	Ref	Action	Progress	Completed Y/N	Owner
68	Jun-23	18.1	BOARD FORWARD PLAN - A member asked for a presentation on our work in relation to introducing electrical fleet at a future board meeting. There was a suggestion that this presentation could include the wider city of Doncaster and how the Council is progressing with becoming carbon neutral. The Director of Property Services agreed to progress this.	Completed - pre-board session arranged in Oct	Y	CM
67	Jun-23	14.4	CUSTOMER VOICE STRATEGY UPDATE - The Chairman asked the Director of Housing & Customer Services to arrange a meeting between himself and the new Chair of the One Voice Forum.	Ongoing - meeting date being agreed	Y	MMc
66	Jun-23	12.2	ANNUAL DEVELOPMENT PLAN - YEAR END REVIEW - A Member highlighted a spelling mistake in the appendix at C1. The Director of Corporate Services agreed to correct this.	Completed	Y	JCr
65	Jun-23	7.1	REVISED HEALTH AND SAFETY STRATEGY - It was noted that the strategy includes a 2 year action plan which will be reported on within the consolidated action plan to Building Safety & Compliance Committee with an annual update to Board.	Completed - annual update noted on the forward plan	Y	LGH
64	Jun-23	6.7	REVISED HEALTH AND SAFETY POLICY - Board requested more detailed information in relation to Board responsibilities. Board to receive updated documents on 3rd August 2023 for approval.	Completed - Revised report due to Board in August	Y	CM
63	Jun-23	5.4	REVISED STRATEGIC RISK REGISTER Board received the current version agreeing to re-consider a revised version of the Strategic Risk Register at the next meeting.			JCr
62	Jun-23	3b.2	RATIFICATION OF MINUTES FROM MEETING HELD ON 6TH APRIL 23 - A correction was highlighted on the Board Decision Summary.	Completed	Y	LGH

Company Number 05564649
A Company Limited by Guarantee
Registered in England

St. Leger Homes of Doncaster Limited
BOARD MEETING
Hybrid meeting

1 June 2023

Present:

Dave Wilkinson (Chair), Trevor Mason, Cllr Richard Alan Jones, Steve Lyons, Milcah Walusimbi, Cllr Phil Cole (Part), Dave Richmond, Susan Jones, Stuart Booth, and Sam Bartle, Joe Blackham (Part)

Also In Attendance:

Mark McEgan (Director of Housing and Customer Services), Chris Margrave (Director of Property Services), Julie Crook (Director of Corporate Services), Leandra Graham-Hibling (minutes).

Members of the Public/Observers:

Karen Ratcliffe - Assistant Director Economy and Environment, Doncaster Council.

		Action
1	Apologies and Quorum	
1.1	There were no apologies received.	
2	Declarations of Interest by Board Members	
2.1	There were no declarations of interest.	
3a	Matters arising and action log from previous meetings	
3a.1	Board noted updates against outstanding actions.	
3b.	Ratification of minutes from the meeting held on 6 April 2023	
3b.1	The Board agreed the minutes from the meeting held on 6 April 2023 were an accurate reflection of discussions.	
3b.2	A correction was highlighted on the Board Decision Summary.	LGH
4	Chair and Chief Executive's Update	
4.1	The Chief Executive presented the report that included updates in the following areas: Housing Diversity Network Accreditation, Board Member Recruitment, a number of national updates including Right to Buy changes, DLUCH funded programme - Four Million Homes, Private Sector Rents along with more local issues including detail of	

2 Ombudsman cases, locality working and update on the One Voice Forum.

4.2 One Voice Forum

The Chief Executive took the opportunity to thank Steve Lyons, Tenant Board Member, for supporting the Once Voice Forum by Chairing the meetings during its inception and until a Chair for the Forum was formally recruited to.

4.3 Vacancies

The Chief Executive advised that whilst there are some areas that remain difficult to recruit to, the situation seems to be easing in some areas and on the whole this is a positive shift.

The Chairman asked for an update specifically in the recruitment of trades posts. The Director of Property Services advised that whilst recruiting to electrical vacancies remains an issue, there has been a positive change and we are being able to recruit more successfully in other areas of the service.

4.4 Digital Tenants Academy

The Chief Executive presented more detail about an initiative SLHD was involved in, supporting the national programme to promote tenant awareness and better understanding of Social Housing. He advised of the work being undertaken with other landlords within the Yorkshire area looking at producing a range of videos as a way to help and support tenants in their understanding of issues impacting on social housing, with options for tenants to becoming more involved.

A Member commented on the work we are leading on with regards to the Digital Tenants Academy asking if there would be opportunities for additional funding to expand this?

The Chief Executive advised that the work involves partnership working of 6/7 Landlords across South/West Yorkshire who are looking to produce some informative videos at nil cost and sharing responsibilities of the work required. He advised that consideration has been given to access funding previously, however on review the projects did not meet the required criteria.

4.5 Private Sector Rents (Local Housing Allowance)

The Chief Executive provided more explanation of the work he was involved in, trying to raise awareness of a national issue which is impacting in Doncaster. He advised that the Local Housing Allowance (LHA) rates are impacting on private renters who claim benefits where the benefit payment does not cover the rent set as the rents are generally above LHA. This means people are getting into arrears and then presenting as homeless if they are served an eviction order.

A Member asked about the legality of transferring other local authority funding in situations such as the example given. The Chief Executive confirmed that the grants provided by the Government are to be used in these types of situations.

A Member asked about whether there will be an increase in budget pressures in this area? The Chief Executive responded that the issue is a national benefits issue and we cannot foresee how much this will increase as we are unaware of the detail of specific cases, and in some cases we will have a duty of care based on a person's circumstances.

The Chief Executive explained that historically benefit rates have moved throughout the years, alongside a 20% increase in rents in the North, therefore leaving larger differences between rents and benefit rates. He advised Board that there is an expectation the gap will increase more and more.

It was noted that since it is not within our gift to change anything, we can only do what we can, by raising awareness and campaigning and lobbying Government to highlight the problem.

A Member asked whether there are timescales for any review of the situation, and if there were any impacts on our stock, availability and RTB?

The Chief Executive responded that the LHA is reviewed annually by the local valuation office who complete their estimate of rents by looking at paid rent rather than advertised rent. He advised that in terms of supply, additional capital monies are coming in from RTB, as well as addition funding for acquisitions, although in reality these will be in very small numbers in comparison to the rise in homeless presentations and RTB applications. He advised that due to a lack of stock, we are moving people back through pathways and back into the private rented sector as we can legally discharge to that sector, however we recognise it is becoming an increasing problem.

The Director of Corporate Services advised Board that we are looking at acquiring 230 properties over the next 5 years and of a decision made by Government to allow Local Authorities to keep 100% of RTB monies for the two years 22/23 and 23/24. However, there are a number of restrictions on the funding including the requirement for us to find 60% of the money to match fund these resources. The Director of Corporate Services advised that in total, the resources should be in the region of £13m over 2 years.

A Member raised a specific issue which may impact on an increase in homeless presentations in relation to Private Landlords not taking

care of properties they rent out, potentially making them unsafe to live in, and asked what SLHD can do to support this?

The Chief Executive responded that in terms of property standards within the private rented sector, they can be influenced by The Council's Environmental Health Team, who can work with Landlords to see if improvements can be made. He explained that if, after inspection, a Category 1 'threat to life and health' hazard or affordability was found to be an issue then the tenants would need to be moved.

A Member asked about funding, and whether finances would need to be re-distributed to support this specific area of the business and if this would affect services to tenants?

The Chief Executive responded that St Leger Homes' funding comes from tenants' rent, which is separate to funding for Homelessness due to individuals concerned not being tenants. He advised that funding for Homeless is received via Doncaster Council as well as Government grants of which we have received a lot of in recent years. He therefore concluded by advising that this will mean additional pressures on the Council, however this area is where we need to support the Council and prioritise those in real need.

FOR APPROVAL

5 Strategic Risk Register

- 5.1 The Director of Corporate Services presented Board with the updated Strategic Risk Register advising that no risks have been added or removed, however within risk 8, any specific mention to Covid has been replaced with a generic reference to a pandemic. It was noted that within the individual risk registers, any changes are highlighted for easy identification.

Board were reminded that the risk register always reflects a rolling 12 month period.

- 5.2 A Member asked for further explanation in relation to the forecast residual risk scorings for risks 3, 4 & 8, suggesting that we are being pessimistic on how we can manage these risks.

The Director of Corporate Services responded that where the residual risk is quite high, we have concluded that we have done everything we can and there is nothing else we can do to reduce the risk. She suggested that risk scoring has some subjectivity and the main concern would be that the main risks, mitigations and actions have all been identified.

Members agreed with the query raised suggesting if all mitigation for the 3 risks were in place then the risks should be highlighted as green and that we need to not be as pessimistic over some of the ratings.

The Director of Corporate Services responded to these concerns:-
Risk 4 – Scoring includes risks relating to use of Contractors as we have experienced issues recently with a particular contractor.

The Director of Corporate Services further expanded that recruiting to vacant Asset Management Team posts is a potential critical risk for us as we move into a new inspection regime. She advised that the key message from the Social Housing Regulator is about an organisation 'knowing their stock' and the risk is relevant to the work we need to undertake beforehand.

The Director of Corporate Services also clarified that Regulation and Inspection is captured in risk 7 and agreed to expand on the detail to make it clearer.

JCr

A Member commented that for those where residual risks are still scored high, we need to be prepared to evidence what we have changed to demonstrate we have done as much as we can.

5.3 The Chief Executive commented that it was reassuring to hear Board views on the ratings, and agreed to consider the comments raised and re-review the scores. He agreed, given the comments raised, to present a revised version of the strategic risk register at the next meeting on 3rd August 2023.

JCr

5.4 **Board received the current version agreeing to re-consider a revised version of the Strategic Risk Register at the next meeting.**

JCr/
LGH

6. Revised Health and Safety Policy

6.1 The Director of Property Services presented a revised Health and Safety Policy following a review that includes outcomes from the recent ISO 45001 and British Safety Council Audits. He advised that following the review, no major issues have been identified and therefore proposed changes are minimal.

6.2 The Chair asked about communication of the revised policy through the workforce, asking whether there are plans to ensure communication of this revised policy is disseminated?

The Director of Property Services advised of the communication framework already in place that will be utilised to communicate the amended policy including team meetings, 1:1s, Toolbox Talks, Property Services 6 monthly Away Days. He further advised that

H&S Advisors in post will also engage with the workforce on an individual basis.

The Chairman asked if there are options to develop IT packages for such awareness raising opportunities and as a way of ensuring these changes are recognised? The Director of Property Services advised this option is available, but only successful for a small part of the workforce and we need to consider downtime and how we can also deliver messages and communications as efficiently and effectively as possible.

- 6.3 A Member asked whether Health & Safety was included in individual performance discussions to make it systemic for individuals to live and breathe Health & Safety?

The Director of Property Services responded that St Leger Homes does have a good track record of Health and Safety, however there is still some work to do about occupational Health & Safety and educating the workforce. He gave an example in relation to near miss incidents, explaining that there is still a culture around lack of reporting of near misses which is being considered at present.

A Member asked if Mental Health & Safety can also be considered in this work.

CM

- 6.4 A Member asked if we can demonstrate we are putting the policy into practice and if an action plan was going to be developed as we move into a regulation and inspection regime, to ensure we can demonstrate that the policy is embedded?

The Director of Property Services explained that the action plan will be included as part of the strategy, that is also due to be approved by Board at this meeting, which explains how we will deliver Health & Safety through the organisation.

- 6.5 A Member asked if Board has final responsibility for H&S and if so, asked if this should be clearly highlighted within the Policy?

Board agreed that since Board have overall responsibility for Health and Safety, a legal summary of this responsibility should be considered and included in the policy. The Director of Property Services agreed to provide this, with a revised policy being submitted to the next meeting of Board on 3rd August 2023 for final approval.

**CM/
LGH**

- 6.6 The same Member asked about activities planned moving forward, stating the policy mostly focuses on the staff, and briefly mentions tenants. He asked if there should be some specific mention of tenant engagement?

The Director of Property Services responded that the policy is limited to trade workforce and staff working to the policy. He advised that the aim of the policy is to protect staff working under the policy, and does not cover members of the public unless working at height.

- 6.7 **Board requested more detailed information in relation to Board responsibilities. Board to receive updated documents on 3rd August 2023 for approval.**

CM /
LGH

7. Revised Health and Safety Strategy

- 7.1 The Director of Property Services presented the new Health & Safety Strategy 2023-2028, advising that the strategy sets out the overarching commitment, vision and direction for health and safety across St Leger Homes. It was noted that the strategy includes a 2 year action plan which will be reported on within the consolidated action plan to Building Safety & Compliance Committee with an annual update to Board.

LGH

- 7.2 **Board Approved the new Health and Safety Strategy and the proposed reporting process to Committee and Board.**

FOR INFORMATION

8. Health and Safety Performance Report

- 8.1 The Director of Property Services presented the performance report recently scrutinised through Building Safety & Compliance Committee. He detailed pertinent information:-

LGSR (Landlord Gas Safety Record) – A reconciliation of the 2022 programme has taken place to provide assurance that **all properties** which require a gas service has received one. It was noted that the number changes throughout the year as we experience access issues, and in these instances, cases are processed through the formal ‘no access procedure’.

Carbon Monoxide (CO₂) Alarms – Following new regulations that came into force in October 2022, St Leger Homes have made a decision to replace all CO₂ detectors, as records show they were last replaced in 2012/13 and have a 10 year battery life. The report sets out plans for a replacement programme as part of the Gas Servicing programme during 2023/24, with future years including the testing of the alarms.

Electrical Installation Condition Reports (EICR) Programme – The report details a programme to complete a significant number of EICRs this year. A number of Contractors have been procured to complete this work until September 2023, and from then onwards it is expected that the reports will be completed alongside the

programme to install consumer units by new contractors currently being procured.

8.2 A Member asked if the CO2 units could be refurbished? The Director of Property Services advised they potentially could be, however it is not cost effective to do so. He further advised that it is not good practice within the industry to refurbish them, and moving into future years, we need to consider how technology moves on and whether we can start installing multi-disciplinary sensors (including smoke, heat and CO2).

8.3 A Member asked for the Chairman's reassurance, as Chair of the Building Safety and Compliance Committee, that the report is scrutinised? The Chair confirmed it was scrutinised and minuted according.

8.4 **Board noted the detail within the report.**

9. Year-end Capital and Revenue Monitoring

9.1 The Director of Corporate Services presented the Capital Monitoring report advising Capital budgets were in an overspend position at year end, most of which is a result of work we were able to achieve in the last quarter of the year rather than the new financial year, which was due in part, to better weather than usual.

9.2 The Director of Corporate Services advised that overall, at year end the Company had a £61k surplus against a £50.20m budget.

This comprised of a deficit on Housing Revenue Account (HRA) due to the under budgeting of inflation. It was noted that at quarter 3, we requested an adjustment to the management fee which we received, however this wasn't sufficient and HRA funded services were still in a deficit at year end.

An additional adverse variance was in relation to district heating income. Charges were increased, in most cases either doubled or quadrupled, however the projections on usage were wrong as residents in the affected buildings turned their heating down or off. This meant a significant reduction in our income, although the actual cost of fuel was very close to that projected.

Board were advised that, in addition to the rise in fuel costs, we also saw an increase in prices for gas parts such as boilers and radiators, which we were not aware of until January 2023.

The surplus on General Fund (GF) activities related to better recovery rates of housing benefit, and a reduction in use of B&B accommodation.

- 9.3 Board were advised of the potential impacts moving into the new financial year, which included the pay offer being higher than budgeted. It was noted, that Executive Management Team have been made aware that the Unions have rejected the current pay offer and this is something that is being kept under regular review.
- 9.4 The Director of Corporate Services asked Members to note the current number of vacancies across the business and the positive trend. She advised of the 118 vacancies at Q1, equating to 98 without Home Options vacancies which had only just been approved at the time and that this figure has now reduced to 68. She explained that whilst the number is double what we have budgeted for, vacancies across the whole organisation are on a downward trend.
- 9.5 **Board received the reports for information and asked that thanks be forwarded to the Finance team for managing budgets so closely.**

10. Year-end KPI Performance

- 10.1 The Director of Corporate Services presented year end performance information advising Board that the outturn position was very similar to what we have been reporting through the year. She asked Board to note KPIs where there was some excellent direction of travel, although we still did not meet target in some areas.

It was noted that for the performance report in 2023/24 a small number of KPIs have been updated to reflect the new Tenant Satisfaction Measures (TSMs) and will be reported to the next Board meeting.

- 10.2 The Chief Executive advised the year-end report had recently been reviewed by The Council's Executive Board who acknowledged some of the targets were very challenging, and notwithstanding complaints performance that we need to address, were pleased with the direction of travel and noted we were making good progress in a number of areas. He ended by advising that Executive Board were very supportive and complimentary.
- 10.3 The Chair added that on attendance to the NFA Conference in April, feedback is that complaints have risen across the sector over the last 12 months.

The Chief Executive responded that this is certainly the case and on measuring satisfaction data received quarterly from Housemark, it shows a national issue, however there is still a need to address our own problem and do what we can to reduce the number of complaints we receive. He advised that predominately complaints are in relation to repair timescales. He explained that in relation to complaints handling which had also been a significant issue for us,

improvements had been seen and whilst in the latter part of 2022 we were dealing with 40% of complaints within timescales, we have improved and are back to dealing with 90% of complaints within timescales. Although this is a great improvement, there is still work to do.

- 10.4 A Member asked about the Net Promoter Score (NPS) measure and the proposal to stop reporting it?

The Director of Corporate Services responded by reminding Board of previous discussions and consultation at Board about this specific measure as it is not a recognised employee satisfaction measure. She further advised of our intention to report on employee satisfaction in a different way and explained that colleagues were considering the Investors in People (IiP) process which includes more meaningful measures to compare against.

A member supported the approach to move away from using the NPS measure.

- 10.5 **Board received the year end performance report for information.**

11. Repairs Excellence Evaluation (One Repairs Service)

- 11.1 The Director of Property Services presented interim performance information; February - April 2023 for Phase 2 activities within the Excellence programme for the One Repairs Service.

He reminded Board of the reasons for the introduction of a One Repairs Service which was to address 3 key priorities, including:-

- Allow the repairs service to focus on the highest priority repairs.
- Reduce jobs going to callout from the daytime
- Reduce number of rollover jobs

The Director of Property Services added there were further priorities where the new way of working was improving, including:-

- Helped easing of concerns within trade teams, specifically posing significant changes being delivered.
- Delivering what was agreed.
- Completing highest priority jobs first, therefore reducing complaints and increasing satisfaction.
- A sustained increase in number of repairs completed on weekly basis, and sustained decrease in roll over jobs moving into out of hours.

He advised that the new way of working is not yet reducing the number of emergencies, but it is dealing with them in the daytime rather than moving them into evening call out service. He advised

that whilst there are lots of positives, there is still lots more work to do.

- 11.2 A Member thanked and complemented the Property Services Director and whole team for development and implementation of the One Repairs Service. He asked about the volume of repairs increasing year on year, asking if the age of our stock is affecting the upward trajectory of repairs?

The Director of Property Services reminded Board that there was a surge in repair requests as we moved out of the pandemic, and time has moved considerably from the Decent Homes Programme, therefore components are starting to fail. Added to this, a failure of a specific repairs contract meant that a significant number of jobs were returned back to in-house teams which added to the increase in repairs we have seen. He advised Board that in the last financial year we performed 78k repairs compared to on average 70k in previous years.

It was noted that the Property Services Management Team are trying to project repairs numbers for this year and whether it will be similar to last year. He further advised that along with repairs, we have also completed approximately 2k surveys in relation to reports of damp, mould and condensation, and there is an expectation that as we move into Autumn again, we will start to see surveys increasing again and this will generate more repairs.

- 11.3 A Member asked if there was a suggestion that tenants are becoming more demanding or asking for repairs they would not have asked for before? The Director of Property Services advised that customers are not necessarily more demanding, but their expectations are becoming much higher and gave a number of examples of this, advising Board that they want to be able to report any repair and have it completed within a short timescale.

- 11.4 A Member asked if the Communications Team are engaged in terms of managing demand? The Director of Property Services commented that we utilise the tenants magazine, Houseproud to deliver these messages, and when calls are received into call centre then discussions take place with customers and expectations managed as much as possible.

- 11.5 **The Board received the interim report.**

12. Annual Development Plan – Year End Review

- 12.1 The Director of Corporate Services presented the end-of-year summary of the key activities relating to the strategic priorities within the 2022/23 Annual Development Plan (ADP) as at the end of March.

It was noted that the vast majority of actions have been completed, with 5 actions not completed and therefore slipped into the 23/24 plan.

- 12.2 A Member highlighted a spelling mistake in the appendix at C1. The Director of Corporate Services agreed to correct this. JCr

12.3 **Board received the year end report for information.**

13. People Strategy Update

- 13.1 The Director of Corporate Services presented the report providing a progress update after year 3 of the 4 year People Strategy (2020 – 24).

Board were reminded that we are making enquiries about Investors in People (IIP) which could help shape the next strategy after year 4. It was noted that Board will receive a briefing on IIP at the Board Strategic Planning Day in July.

It was noted that for measures where we are not on track, there are links to Key Performance Indicators and that in relation to Sickness, it is clear we are not meeting our target, however the Absence Management Policy has been reviewed and updated and the revised policy came into force from April 2023.

- 13.2 A Member asked about deterioration of performance in relation to Statutory and Mandatory training, asking if it was concerning Regulatory training of Mandatory training? They commented that the % seems low if it was relating to mandatory training.

The Director of Corporate Services responded that each job role has been reviewed and mandatory training has been identified. She further expanded that a review of attendance on all training courses is taking place to ensure where there is a requirement to attend mandatory training the post holder and line managers are clear of what is expected.

13.3 **Board received the update report for information.**

14. Customer Voice Strategy Update

- 14.1 The Director of Housing & Customer Services presented the annual update of the Tenant Voice Strategy which sets out our 5 key commitments. He advised that really good progress has been made so far across the plan and all actions are on track.

- 14.2 A Member asked about actions highlighted in blue that have not been stated and whether there are any concerns about whether there will

be any problems with them? The Director of Housing & Customer Services responded that he has no concerns over these actions.

14.3 A Member commented that the letter sent to all tenants about the One Voice Forum was very well crafted and well received.

14.4 The Chairman asked the Director of Housing & Customer Services to arrange a meeting between himself and the new Chair of the One Voice Forum.

MMc

14.5 **Board received the update report for information.**

15. **Safeguarding Children and Adults Annual Report for 2022-23**

15.1 The Director of Housing & Customer Services presented the annual report that shares the roles and responsibilities we have to Safeguarding as an organisation, along with the number of cases we are involved in, as well as details of the meetings and partnership work we are involved in.

15.2 **Board received the update report for information.**

16. **Modern Slavery Statement**

16.1 The Director of Corporate Services presented the annual report and Modern Slavery statement for 2022/23, as required by the 2015 Modern Slavery Act.

She advised that the report requires Board approval before it is published on our website.

It was noted that the six reporting areas currently in the guidance will become mandatory in legislation when the Bill is approved. These changes are detailed in paragraph 4.4. The Director of Corporate Services confirmed that St Leger Homes are already compliant in all areas.

16.2 **Board approved the Modern Slavery Statement for 2022/23 and noted that we are compliant in the six reporting areas currently in the guidance.**

17. **Board Expenses and Attendance Register**

17.1 The Director of Corporate Services presented the 6 monthly update on Board Member attendance and expenses.

17.2 **Board received the update report for information.**

18. **Board Forward Plan**

18.1 A member asked for a presentation on our work in relation to introducing electrical fleet at a future board meeting. There was a suggestion that this presentation could include the wider city of Doncaster and how the Council is progressing with becoming carbon neutral. The Director of Property Services agreed to progress this.

**CM/
LGH**

18.2 The Director of Corporate Services advised that the 1 item agenda Board meeting on 6th July will be cancelled as the Financial Statements will be submitted to the August meeting and re-aligned to the renewal of the Management Agreement.

Board were reminded that the Strategic Planning meeting on 6th July will still go ahead and will commence at 1pm with a light lunch served at 12.30pm.

18.3 Board noted the requests and the current version of the forward plan.

19. Any Other Business

19.1 There was no other business raised. The meeting ended at 3.35pm

20. Date of next meeting

Thursday 3 August 2023

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

Board Meeting

REPORT

Date : 3 August 2023

Item : 04

Subject : Chief Executive and Chair's Update Report

Presented by : Dave Richmond

Prepared by : Dave Richmond, Chief Executive

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

Recommendation:

That Board note the content of this report and indicate if further information is required.

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: 3 August 2023**

1. Report Title

1.1 Chief Executive and Chair's Update Report

2. Executive Summary

2.1 This report updates Board Members on the key issues that have arisen since the last Board meeting.

3. Purpose

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

4. Recommendations

4.1 That Board note the content of this report and indicate if further information is required.

6. Corporate and Governance issues

6.1 Management Agreement

The Council have completed their assessment of the way in which they wish to deliver housing services in the future. A report has been prepared and will be considered at Cabinet on the 16 August 2023. Updates will be sent to Board Members once the council decision is known.

6.2 Board Member Recruitment

This year we will need to recruit three Board Members. Both Steve Lyons and Sam Bartle have indicated their intention to leave the Board, whilst Trevor Mason is due to stand down but has indicated his willingness to put himself forward for a further term. Closing date for applications is 7 August 2023.

6.3 Gatenby Sanderson Insight Programme

As part of St Leger's commitment to equality and diversity we have agreed to join the Gatenby Sanderson Insight Programme. The Insight Programme has been developed to give prospective non-executive Directors from under-represented groups first-hand experience of how Boards in the public and not for profit sectors work. The programme is designed to offer practical help to participants when applying for non-executive positions.

The Insight Programme's key features include:

- Attachments to working Boards
- Pairing with a NED 'buddy'
- Joining board and sub-committee meetings
- Mentoring support throughout your attachment
- Access to each organisation's senior teams and governance structures
- References from chairs to support future applications.

SLHD will have the opportunity to play a role in the recruitment of candidates for the programme and we will be expected to provide mentoring appraisal and a final reference. There is no expectation that the mentoree will join the SLHD Board.

The Chair has agreed to act as a mentor. We need to agree who will act as a 'buddy'. The CEO is willing to undertake this activity unless anyone else would wish to be involved. We can discuss with the successful applicant which committee would be most suitable for them and us.

6.4 Changes to the Memorandum & Articles of Association (mem & arts)

It is proposed by the Shareholder that there will be a minor change to the mem & arts at the next Annual General Meeting (AGM), this change will enable any Local Authority Member (Councillor) who is or becomes a tenant of the Council's housing stock to be a Board Member. The current clause at 14(7);

'No Tenant, Occupant or Leaseholder shall be a Council Board Member'

does not currently allow this.

This is a Shareholder decision but it is good practice to consult with Board Members in advance of any changes.

7. **National issues**

- 7.1 The Regulator of Social Housing has published its consultation on the Consumer Standards with a deadline for responses of 17 October 2023.

<https://www.gov.uk/government/consultations/consultation-on-the-consumer-standards/consumer-standards-consultation-reshaping-consumer-regulation-accessible-version#the-proposed-code-of-practice>

The Regulator is seeking views on the 4 standards which will make up the new Consumer Standards:

The four standards are:

- The Safety and Quality Standard which "will require landlords to provide safe and good-quality homes for their tenants, along with good-quality landlord services".
- The Transparency, Influence and Accountability Standard which

“will require landlords to be open with tenants and treat them with fairness and respect so they can access services, raise concerns when necessary, influence decision making and hold their landlord to account”.

- The Neighbourhood and Community Standard which “will require landlords to engage with other relevant parties so that tenants can live in safe and well-maintained neighbourhoods and feel safe in their homes”.
- The Tenancy Standard which “sets requirements for the fair allocation and letting of homes, as well as requirements for how tenancies are managed by landlords”.

The RSH is proposing that once agreed they will produce a code of practice to facilitate compliance with the standards. Link below:

<https://www.gov.uk/government/consultations/consultation-on-the-consumer-standards/annex-2-proposed-consumer-standards-code-of-practice-accessible-version>

The standards are wide ranging and will present challenges to services delivered by both SLHD and City of Doncaster Council (CDC). It is likely that meeting the standards will require careful consideration of investment decisions. As we have discussed before, there will be clear expectations that the Council has assurance that the standards are being met. Whilst this responsibility cannot be delegated to SLHD, in practice much of the detailed work will need to be done by SLHD officers and Board with the council having clear lines of sight on policy, performance and outcomes.

Fiona MacGregor, Chief Executive of the Regulator of Social Housing, said: “We’re gearing up for the biggest change to social housing regulation for a decade. This will include our landlord inspections from next April, as well as stronger powers to make landlords put things right when they breach our standards.”

The Social Housing (Regulation) Act 2023, which will confer new powers on the RSH received royal assent on 20 July 2023.

SLHD will liaise with CDC to determine the most appropriate way to respond to the consultation.

It is expected that the final set of standards will apply from April 2024.

7.2 **Long Term Plan for Housing - RT Hon Michael Gove MP Secretary of State Speech (SOS) 24th July**

In the speech the SoS outlined 10 principles:

- The regeneration and renaissance of the hearts of 20 of our most important towns and cities.
- Supercharging Europe’s science capital.

- Building beautiful – and making architecture great again.
- Building great public services into the heart of every community.
- Communities taking back control of their future.
- Greener homes, greener landscapes and green belt protection.
- A new deal for tenants and landlords.
- Ensuring that every home is safe, decent and warm.
- Liberating leaseholders.
- Extending ownership to a new generation.

A number of the elements of the speech were of no surprise; safety and social housing regulation, plans on decency, private sector rent safeguards for example

Response to the speech has been mixed; whilst some welcome the focus on housebuilding within city centre brownfield sites, others warn that plans to turn offices into residential space are fraught with difficulty and the potential to create the slums of tomorrow. There is much scepticism that the government's claim to be on target to create 300,000 additional new homes a year are realistic. A further criticism levelled at the speech is that it lacked detail, not least concerning funding for the additional commitments that are being made.

On a more positive note, the reference to regeneration, something that has been missing for many years from government rhetoric has generally been well received, albeit again without any clear funding commitments.

CIH's chief executive Gavin Smart commented:

"We welcome some of the measures announced today and the recognition that long term problems need long term solutions, but we would have liked to see a greater focus on much needed social housing.

"Analysis shows we need 90,000 new homes for social rent each year for the next 15 years but we're a long way off delivering this. Without investment in social house building we'll continue to see housing waiting lists grow and will continue to spend huge amounts of money subsidising poor quality housing.

Michael Gove's speech can be read here:

<https://www.gov.uk/government/speeches/long-term-plan-for-housing-secretary-of-states-speech>

7.3 **The Social Housing (Regulation) Act.**

This long awaited Act passed into law on 20 July 2023 it follows on from the Social Housing White Paper the Charter for Social Housing Tenants. Throughout the Act there are references to Registered Providers (RPs) and this includes Local Authority (Council) landlords.

The main provisions of the Act include:

➤ The Regulator of Social Housing

The Act makes safety, energy efficiency and transparency explicit objectives for the Regulator. The objective of safety is added to the consumer matters for which the Regulator can set standards.

The Act gives the Regulator stronger powers to require information relating to RPs, including from third parties, in connection to its regulatory functions. It also enables the Regulator to charge fees to cover its functions, such as investigation and enforcement.

➤ The Regulator and the Housing Ombudsman

The Act provides powers for the Housing Ombudsman to set and monitor compliance with its Code of Practice. It can also issue guidance on good practice and require scheme members to review policies and procedures against this good practice guidance,

➤ Registered providers (RP) – duties

The Act requires RPs to designate a health and safety lead for the organisation and sets out what role this person should have in the Organisation. The lead is to monitor compliance with health and safety requirements, assess risks if the organisation fails to do so, and provide advice to the responsible body to address this.

➤ Consumer standards

With the removal of the serious detriment test, the Regulator has power to regulate consumer standards proactively, and a consultation on the new consumer standards has been launched (as above).

The Regulator has power to set a standard for information and transparency (clause 22), that may include information about accommodation, facilities, and services; tenants' rights in relation to these things and how to make complaints. It requires RPs to report failures against the standards, and to publish information relating to income, management costs, executive remuneration and other expenditure.

➤ Professionalism of housing staff

The Act introduces powers for the Regulator to set a competency and conduct standard for housing staff, with broad application relating to skills, competency and conduct.

This has been further strengthened by setting mandatory requirements for executive and senior staff to have qualifications at certain levels. This covers those directly employed and those delivering services through a management contract. Further consultation on the standard and the scope and application of the mandatory qualifications are to follow,

➤ Information

The Regulator can direct RPs to collect and publish information on their performance, including specifying what information is required; over what period it should be collected; how the information is collected, analysed, and published; what is to be published, how and in what form.

➤ Monitoring and performance

The Regulator can enter a property to conduct a survey of the condition where it suspects the RP is failing to maintain it.

Under the new proactive regulation of consumer standards, the Regulator is required to inspect RPs and section 29 sets out the requirements of the plan including:

- What organisations shall be inspected
- How regularly inspections will happen
- What circumstances might trigger an earlier inspection.

Following an inspection, the Regulator can require publication of either a full report or summary of findings. The Act sets out what action the Regulator can take when a RP is at risk of failing or has failed to meet a standard or comply with a directive, or where tenants' interests are at risk. It can issue a performance improvement plan notice, requiring the RP to develop and publish a performance improvement plan to be agreed with the Regulator. If the RP fails to comply or implement the plan, the Regulator can: give an enforcement notice; impose a penalty; award compensation; set out a management tender; appoint a manager or, in the case of a local housing authority provider, appoint advisors to the council.

It has power to take emergency remedial action, where a survey has been carried out and the Regulator is satisfied that the RP has failed to maintain the premises to standards required, and that failure causes imminent risk of serious harm to tenants' health and safety, and the RP has failed to comply with an enforcement notice to address the failure. It can reclaim relevant expenses incurred when making the arrangements and undertaking remedial action.

The Act removes the current limit of £5,000 on fines that the Regulator can impose.

➤ Addressing hazards in social rented homes

Section 42 introduces Awaab's Law. The clause on remedying hazards in dwellings let on relevant social housing leases will amend the Landlord and Tenant Act 1985, introducing it as an implied term in tenancies. It will provide legal grounds for tenants to challenge landlords if they fail to act to remedy the hazards within the timeframes set out.

S7.3 of this report is a synopsis of a CIH briefing. The full document is available on request.

8 Operational issues

8.1 Ombudsman Cases

In July 2023 we received 2 separate determination letters from the Ombudsman's Offices, 1 from the Housing Ombudsman and 1 from the Local Government and Social Care Ombudsman.

The determination from the Housing Ombudsman related to a complaint made in September 2022 and found maladministration and service failure in how we dealt with a customer's requests for service from our housing management team. The HO will publish the decision in 3 months.

The letter from the Local Government and Social Care Ombudsman, received in August 2022, related to services provided by our Access to Homes Team. The LGO upheld the complaint. Their final decision, dated 7th July 2023, will be published 6 weeks from the decision date.

We cannot discuss this complaint in public or comment on the contents in publicly available papers before the publication date.

With both complaints we have taken actions to remedy the injustice and to help prevent a repeat of the failures. Further information will be provided at a future Board meeting on both cases including the actions we have taken to address specific issues highlighted in the two cases and also how we intend to improve our complaints handling process to ensure increased organisational oversight of the conduct and outcomes of complaints. This may well have implications for the current stage 2 complaints process which currently includes a tenants' review panel.

8.2 Safeguarding

We have referred 80 safeguarding referrals in Q1 of 2023-24, which is an increase of 42% from the number of referrals which were received in 2022-23. 10% of the current referrals for Q1 relate to neglect, including incidents involving children/young people. This could be attributed to the review of Safeguarding Adults and Children's ELearning on FLO, and the roll out of Domestic Abuse awareness training to all St Leger Homes staff, which is ongoing.

8.3 Open Housing going live in Home Options and Home Choice – successes and issues

As part of the plan to switch to Capita Open Housing for the main housing management database, it was intended as far as possible to migrate activity to this system and make maximum use of its functionality. One element of this was the switch from Abitras to Open Housing for Home

Choice activity.

Abitras is a well respected proprietary system, however it was believed that Open Housing would be able to adequately meet our requirements. The move to the new system went live on the 3rd July.

We have experienced a number of challenges with this shift, including:

- Go Live put back twice due to the system build being incomplete.
- Post Go Live issues, mainly due to the 'Live' environment not mirroring the 'Test' environment.
- The issues meant that the bidding cycle had to be delayed by a week, resulting in a negative impact upon staff resource, performance, customers, complaints, social media activity and KPIs.
- Automated Shortlisting rules to prioritise the highest placed applicated have not worked in live for the first 2 weeks and were replaced with manual processes.

Progress includes:

The following % of applicants in each category are now registered to bid which is significant progress

- 76% Platinum
 - 63% Gold
 - 55% Silver
 - 40% Bronze
- Two email reminders have been sent to applicants that links to the website FAQ page and a helpful video on how to register
 - The 2nd bidding cycle opened and successfully closed as normal
 - New applications being made online continue to be business as usual and very active with no issues to report
 - Communications and FAQs are reviewed daily and activity at the customer contact centre returned to Business-as-Usual levels at the end of last week regarding HomeChoice enquiries.

A daily meeting takes within St Leger Homes who work with CAPITA to ensure the system is fully functional and meeting all SLHD requirements. There has been significant progress against these actions.

8.4 Ongoing digital communication improvements

The review of the Intranet and Internet is an action in the Annual Delivery Plan. Both projects are due for completion in October 2023 and are progressing well, with implementation groups involving all areas of the business supporting with the changes.

The intranet will be delivered internally using SharePoint. This is part of

the Office 365 family and will enable integration with back-office solutions. The new product will support agile working, increase workflow capabilities using forms and improve collaborative working and internal communication. Training has taken place so that on-going support is available across the business to keep the product 'live' after the product is launched.

We are working in partnership with Prodo who have a wealth of experience of working with other housing providers to review the internet/website. Feedback from customer surveys, discovery sessions and journey mapping will help to shape what the internet will look and feel like for our customers, with a focus on providing opportunities to improve digital access and channel shift. A tenant representative sits on the Internet Implementation group to ensure we focus on the customer perspective and other tenants will be involved in testing, before go live. As with intranet, training will be provided across the business to ensure the site is kept up to date.

8.5 City of Doncaster Council Tenancy Agreement Review

The tenancy agreement is a legal contract between CDC and the tenant. It was last reviewed in 2016. Since that time there has been legislative changes such as Domestic Abuse Act and other legislative changes such as those relating to building safety. A scoping exercise has been carried out and determined a review of the document would be beneficial in order to tighten up some legal definitions. A consultation exercise will take place with tenants and partners with the aim to have the new tenancy agreement operational by April 2024.

8.6 Housing Management Team Re-alignment

The Housing Management realignment went live on 31st July 2023. The key changes are moving Income Management from Area teams to the Tenancy Sustainability Team to provide improved financial support to tenants during the cost of living crisis and the economic climate and creating an Anti-Social Behaviour Team to deal with all serious incidents including a dedicated service manager to raise our standards and performance in this area and deliver on the requirements of the Social Housing (Regulation) Act.

We are also merging the roles of Housing Assistant and Housing Officer to reduce patch sizes, create greater accountability, reduce duplication, improve engagement and relationships with tenants and communities. As part of this we will implement 'Keeping in Touch' engagement visits to all tenants on a 3-year rolling programme.

8.7 Home Options – staff changes

Last year CDC provided SLD with transitional funds to enable the recruitment of temporary staff to help us address increased demand post

covid regarding homelessness services. It was anticipated that this demand would steadily reduce as the pandemic eased. SLHD is now seeking to reduce the staffing numbers to the previously agreed levels, some staff left early to secure permanent employment elsewhere.

The surge in staffing allowed us to successfully deal with backlogs and get on top of all work processes. However, the demand on services continues to be high, as do the placements into emergency accommodation. Hotel occupancy averaged 36 rooms per night in Q1, against a target of 30.

Conversations are starting with the council to discuss long term staffing numbers to adequately deal with what appears to be persistent high demand for services. At the peak there were 61 FTE posts in this service, but this has now dropped back to 52. To adequately address demand, it may be that we will require a small number of additional posts.

Home Options Officers continue to do tremendous work to decant Afghan families placed in hotel accommodation by the Home Office, whose placements come to an end on the 15 August 2023. As of the third week in July there were 10 families remaining in hotels, 5 of which had offers of accommodation.

9. Procurement

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

10. VFM Considerations

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

11. Financial Implications

- 11.1 Any financial implications will be addressed as issues progress.

12. Legal Implications

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

13. Risks

- 13.1 Any risks arising from issues in this report will be considered as part of normal governance processes. Risks relating to ombudsman decisions will be addressed in the forthcoming report.

14. Health, Safety & Compliance Implication

- 14.1 NA

15. IT Implications

15.1 As discussed in body of report.

16. Consultation

16.1 Any consultation requirements will be undertaken as projects progress.

17. Diversity

17.1 There were diversity issues raised as part of the Ombudsman's complaint determination, these have been recognised and are to be addressed.

18. Communication Requirements

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

19. Equality Analysis

19.1 See diversity section.

20. Environmental Impact

20.1 NA

21. Report Author, Position, Contact Details

21.1 Dave Richmond, Chief Executive
dave.richmond@stlegerhomes.co.uk
01302 862700

David Wilkinson, Chairman

22. Background Papers

22.1 Appendix A - Procurement Report

<u>Procurement Exercise</u>	<u>Estimated Contract Value Based on a 4 year Term (exc VAT)</u>	<u>Framework or Tender</u>	<u>Service Area</u>	<u>Work, Supply or Service</u>
<u>Primarily capital expenditure, so Contracting Authority to be Doncaster Council</u>				
Modular Buildings	£4,500,000.00	Framework	Asset Management	Supplies
Town Centre Flats Fire Safety Works	TBC	Framework	Asset Management	Works
<u>Primarily revenue expenditure, so Contracting Authority to be St. Leger Homes of Doncaster</u>				
Plumbing and Heating	£10,000,000.00	Direct Award	Asset Management	Supplies
Electrical Materials	£5,700,000.00	Framework	Asset Management	Supplies
Emergency Accommodation	£2,500,000.00	Framework	Access to Homes	Service
General Building and Repair Work	£1,999,999.00	Tender	Asset Management	Service
Asbestos Surveying Services	£1,500,000.00	Tender	Asset Management	Service
Gas Spares	£1,000,000.00	Direct Award	Asset Management	Supplies
Kitchens	£1,000,000.00	Framework	Asset Management	Supplies
Provision of Fuel Card Services	£967,000.00	Tender	Finance	Service
Electrical Services	£800,000.00	Tender	Repairs & Planned Maintenance	Works
Agency and Recruitment Services	£800,000.00	Framework	HR & OD	Service
Kitchens - Legacy	£702,000.00	Direct Award	Asset Management	Supplies
Ready Mix Concrete	£600,000.00	Tender	Repairs & Planned Maintenance	Supplies
Building Materials	£600,000.00	Framework	Asset Management	Supplies
Provision of Heat Meter Solutions	£528,900.00	Tender	Repairs & Planned Maintenance	Service
Tools, Equipment & Plant	£500,000.00	Tender	Repairs & Planned Maintenance	Supplies
Fire Risk Assessment	£500,000.00	Framework	Building Safety	Service
Windows & Doors	£300,000.00	Tender	Asset Management	Supplies
PPE and Clothing	£300,000.00	Framework	Asset Management	Supplies
Supply of Woodchip Fuel	£250,000.00	Framework	Repairs & Planned Maintenance	Supplies
Passenger Lift Maintenance	£250,000.00	Framework	Repairs & Planned Maintenance	Service
Non-Mains Sewage Waste and Drainage Services	£250,000.00	Tender	Repairs & Planned Maintenance	Service
Print Management Services Tenants Newsletter Magazine	£250,000.00	Tender	Customer Services	Service
Security Services	£200,000.00	Tender	Access to Homes	Service
Project Design & Consultancy Services	£200,000.00	Tender	Asset Management	Service
Heating Pump Supplies	£170,000.00	Quotation	Repairs & Planned Maintenance	Supplies
Taxi Services	£160,000.00	Quotation	Access to Homes	Service
Workforce Management & Resource Scheduling Solution	£160,000.00	Framework	ICT & Transformation	Service
Electrical Testing	£160,000.00	Quotation	Repairs & Planned Maintenance	Service
Lift Consultancy Services	£160,000.00	Quotation	Repairs & Planned Maintenance	Service
E-Learning System	£150,000.00	Quotation	HR & OD	Service
Repairs, Maintenance & Installation of Door Entry/Access Systems	£150,000.00	Quotation	Repairs & Planned Maintenance	Service
Business Intelligence	£150,000.00	Framework	ICT & Transformation	Service
Digital/TV & Aerial Maintenance	£120,000.00	Quotation	Repairs & Planned Maintenance	Service
Asbestos Services - Analytical	£100,000.00	Tender	Asset Management	Service
Site Compound Security	£82,000.00	Tender	Repairs & Planned Maintenance	Service
Critical Friend Contract	£80,000.00	Tender	ICT & Transformation	Service
Chartered Surveyors - Right to Buy Valuations	£75,000.00	Quotation	Asset Management	Service
External Audit Services	£70,000.00	Framework	Finance & Business Assurance	Service
Decoration Grant Scheme	£67,500.00	Framework	Repairs & Planned Maintenance	Service
Service & Maintenance of Fire Alarms & Emergency Lighting	£60,000.00	Quotation	Repairs & Planned Maintenance	Service

Customer Excellence Training	£60,000.00	Quotation	HR & OD	Service
Sprinkler System Maintenance	£50,000.00	Quotation	Building Safety	Service
Japanese Knotweed Management Services	£50,000.00	Quotation	Housing Management	Service
Adapted Bathroom Equipment	£44,000.00	Quotation	Asset Management	Supply
Critical Works to Bio Mass Boiler	£41,950.00	Quotation	Repairs & Planned Maintenance	Service
Azeus Convene Subscription	£40,000.00	Framework	Finance & Business Assurance	Service
Merchant Card Plumbing & Heating	£40,000.00	Direct Award	Asset Management	Supplies
Merchant Cards Building Supplies	£40,000.00	Direct Award	Asset Management	Supplies
Merchant Cards Tool & Plant Hire	£40,000.00	Direct Award	Asset Management	Supplies
Bi-Annual Inspection & Maintenance of Dry Risers	£30,000.00	Quotation	Repairs & Planned Maintenance	Service
Ecology Services	£23,000.00	Quotation	Asset Management	Service
Safety Access Platforms & Ladders	£16,102.00	Quotation	Housing Management	Service
Apprenticeships Customer Services Practitioner	£15,000.00	Direct Award	HR & OD	Service
Calibration and Repair of Test Equipment	£13,500.00	Direct Award	Repairs & Planned Maintenance	Service
Asbestos Management Services	TBC	Tender	Asset Management	Service
Ironmongery	TBC	Tender	Asset Management	Supplies
Sublet Scheme	TBC	Quotation	Housing Management	Service

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

BOARD

REPORT

- Date** : 3 August 2023
- Item** : 05
- Subject** : Annual Financial Statements
- Presented by** : Julie Crook
Director of Corporate Services
- Prepared by** : Nigel Feirn
Head of Finance and Business
Assurance
- Purpose** : The purpose of this report is present the Financial Statements of the Company and Letter of Representation for the year ended 31 March 2023 for approval and Auditors' Management Letter for noting by the Board.

Recommendation :

That Board approve the Financial Statements and Letter of Representation and note the contents of the Auditors' Management Letter for the year ended 31 March 2023.

Company Number 05564649
A Company Limited by Guarantee
Registered in England

To Board

Agenda Item 05
Date: 8 August 2023

1. Report Title

1.1. Annual Financial Statements.

2. Purpose

2.1. The purpose of this report is to present the Financial Statements of the Company and Letter of Representation for the year ended 31 March 2023 for approval by the Board and Auditors' Management Letter for noting by the Board. The Financial Statements underwent extensive review by Audit and Risk Committee on 26 June 2023 and were recommended to Board for approval.

3. Recommendation

3.1. That the Board approve the financial statements (**Appendix A**) and Letter of Representation (**Appendix C**) and note the contents of the Auditors' Management Letter (**Appendix B**) for the year ended 31 March 2023.

4. Executive Summary

4.1. It is a requirement of the Companies Act 2006 to produce annual audited financial statements.

4.2. The draft financial statements have been prepared by St Leger Homes of Doncaster Limited (St Leger Homes) and audited by Beever and Struthers.

4.3. Within their Letter of Engagement, Beever and Struthers stated the following with regards to the responsibility of Directors:

“As Directors of the above company, you are responsible for maintaining adequate accounting records and preparing financial statements which give a true and fair view and comply with the Companies Act 2006. As Directors you must not approve the financial statements unless you are satisfied that they give a true and fair view of the assets, liabilities, financial position and surplus or deficit of the Company.”

4.4. The management accounts for the financial year 2022/23 presented to the Board in June 2023, reported that St Leger Homes made a surplus outturn of £0.061million against a £zero, balanced budget where original budgeted income and expenditure each totalled £50.2m, as summarised below:

Year ended 31 March 2023	Surplus	Budgeted	
	£million	Income	%
		£million	
HRA activities – Deficit	0.286	47.017	0.6
General Fund : Housing Options – (Surplus)	(0.347)	3.192	(10.9)

Overall (Surplus)	(0.061)	50.209	(0.1)

- 4.5. The surplus will be repaid to the GF and the deficit will be funded by the HRA.
- 4.6. The accounts have been produced under Financial Reporting Standard (FRS) 102. Beever and Struthers must also give an opinion on the Strategic Report within the Financial Statements (the narrative report in the front section). The report must therefore be correct and consistent with the financial statements and all other management information audited.
- 4.7. There were no major new reporting requirements for 2022/23 and the Strategic Report again includes a s172(1) statement which describes how the Directors have had regard to the matters set out in section 172(1) (a) to (f), which are the:
- a) likely consequences of any decision in the long term;
 - b) interests of the company's employees;
 - c) need to foster the company's business relationships with suppliers, customers and others;
 - d) impact of the company's operations on the community and the environment;
 - e) desirability of the company maintaining a reputation for high standards of business conduct; and
 - f) need to act fairly as between members of the company.

5. Audit opinion

- 5.1. There are four items of audit work outstanding for which we have been able to submit information for three of these, and we are awaiting confirmation from the auditors that it is satisfactory. The fourth relates to the new management agreement with Doncaster Council. Details appear at 5.3 below. Subject to this confirmation, Beever and Struthers have not identified any adjustments which are necessary to the financial statements. In their audit report they are presenting **a clean audit report and that the accounts show a true and fair view of the financial position for the year.**
- 5.2. Auditing Standards (ISA 260) require auditors to report to management on the findings of an audit and the Beever and Struthers' Management Letter is attached at **Appendix B.**
- 5.3. The four audit items outstanding are :
- 5.3.1. Satisfactory audit bank letter : This has finally been received from Lloyds and is being reviewed by the auditors;
 - 5.3.2. Journals testing : Sample testing information has been submitted by the accounts team and is being reviewed by the auditors;
 - 5.3.3. ICT questionnaire : This is a new audit requirement for this year where details of our ICT systems are required to enable a review of ICT security and controls. As we use Council ICT systems, the Council are currently providing this information for review by the auditors;
 - 5.3.4. Going concern: The fourth audit item relates to 'going concern'. The financial statements have again been prepared on a going concern basis and this is

on the assumption that a new five year Management Agreement will be agreed by Doncaster Council (CDC) in August 2023.

6. Pension fund valuation

- 6.1. St Leger Homes is a member of the South Yorkshire Pension Fund (SYPF).
- 6.2. The pension fund undergoes a full actuarial valuation every three years ('triennial valuation') and the contributions by Employers are adjusted, if necessary, in order to get the fund into a fully funded position at some point in the future.
- 6.3. The last full triennial valuation report was at 31 March 2022 and results became available in late 2022/23. This shows the **whole fund is now in surplus** for the first time in many years, and the SLHD element of the fund is again in surplus, as summarised below.

	Whole fund			SLHD element		
	2016 £m	2019 £m	2022 £m	2016 £m	2019 £m	2022 £m
Assets	6,268	8,440	10,674	93.2	131.3	171.5
Liabilities	(7,293)	(8,503)	(8,988)	(93.8)	(120.0)	(134.7)
Surplus / (Deficit)	(1,025)	(63)	1,686	(0.6)	11.3	36.8
Funding level	86%	99%	119%	99%	109%	127%

- 6.4. The results of the triennial valuation determine the contribution rates for future years to ensure the fund is in surplus.
- 6.5. During 2022/23, St Leger Homes paid a contribution rate of 16.0% of the salary for each employee in the scheme, we also received a lump sum rebate of £772k making the net overall contribution rate 12.6%. For 2023/24, contribution rates reduce to 10.2%.
- 6.6. 2022/23 was the second year for Hymans Robertson as actuary, having previously been with Mercers for a number of years.
- 6.7. In addition to the triennial work, the actuary reviews the pension fund assets, liabilities and assumptions on an annual basis and provide an update report to enable any changes to be reflected the financial statements (please see section 7 – FRS 17 below).
- 6.8. The results from the triennial and annual reports have had a major impact on pension accounting disclosures for 2022/23, as explained below.

7. Accounting summary / FRS17 adjustments

- 7.1. Each year, the management accounts require adjustments of an accounting standard nature under Financial Reporting Standard (FRS)17 (accounting for pension schemes).
- 7.2. The objective of FRS17 is to show the financial position of the company if all St Leger Homes' pension commitments - for all existing pensioners and current employees - were to become payable at the year-end date. Although the likelihood of this actually materialising is extremely remote, the financial statements would show the most prudent, 'worst case scenario' position.
- 7.3. FRS17 adjustments reflect actuarial movements in the assets and liabilities of the company pension scheme in the year, as detailed on pages 31 to 34 of the financial statements. The accounting entries for FRS17 are treated as either Administrative Expenses or Finance Costs in the Statement of Comprehensive Income (Profit and Loss Account).
- 7.4. FRS17 adjustments will therefore ensure that:
- financial statements reflect at fair value the assets and liabilities arising from St Leger Homes' retirement benefit obligations;
 - the operating and finance costs of providing retirement benefits to employees and any other changes in value of the assets and liabilities are recognised in the accounting period;
 - the financial statements contain adequate disclosure of the cost of providing retirement benefits and the related gains, losses, assets and liabilities
- 7.5. There has been a number of changes to the assumptions used by Hymans Robertson in their annual report. These changes mean the St Leger Homes FRS17 pension deficit has fluctuated significantly into a surplus for the first time. The table below shows the assets, liabilities and surplus/(deficit) as calculated by the actuary. Further details appear in the financial statements.

Year ended 31st March	Pension Assets £million	Pension Liabilities £million	Pension Surplus/ (Deficit) £million
2023	167.4	(143.5)	23.9
2022	170.5	(213.4)	(42.9)
2021	154.4	(213.3)	(58.9)
2020	128.7	(171.3)	(42.6)
2019	131.3	(173.8)	(42.5)
2018	122.8	(154.4)	(31.6)
2017	115.5	(157.2)	(41.7)
2016	92.8	(111.9)	(19.1)
2015	90.2	(112.6)	(22.4)
2014	77.6	(85.2)	(7.6)
2013	69.9	(86.8)	(16.9)
2012	60.0	(71.1)	(11.1)
2011	57.2	(66.4)	(9.2)

2010	48.8	(67.1)	(18.3)
2009	34.4	(40.8)	(6.4)
2008	39.2	(48.7)	(9.5)
2007	33.4	(41.9)	(8.5)
2006	29.1	(39.6)	(10.5)

- 7.6. **The 2021/22 Deficit of £42.9million has changed by £66.8million and into a £23.9m Surplus position for this year end.** The change is significant and reflects the changes in the national and global economies and related assumptions, returns on investments, etc.
- 7.7. In terms of reporting this, the accounting disclosures in the Financial Statements are dictated by Accounting Standards, which consider the following:
- 7.7.1. At 31 March 2022 the annual report showed a deficit of £42.9m;
 - 7.7.2. At 31 March 2022 the triennial valuation showed a surplus of £36.8m;
 - 7.7.3. At 31 March 2023 the annual report showed a surplus of £23.9m;
 - 7.7.4. Contribution rates for 2023/24 are reduced from 16.0% to 10.2%; and
 - 7.7.5. An 'Asset Ceiling' valuation of **£21.6m** based on a revised actuarial discount rate assumption.
- 7.8. The result of all the above is that St Leger is not permitted to report the full Surplus of £23.9m but can report either a :
- 7.8.1. Pension Asset of £21.6m based on the Asset Ceiling; or
 - 7.8.2. 'Zero' position (no surplus or deficit)
- 7.9. Following consultation with Beever and Struthers, CDC (who are in a similar position) and their auditors, and a number of local authorities in the region, the Asset Ceiling valuation option is considered the most appropriate and has been adopted and the required disclosures explaining this appear in the notes within the in the financial statements.
- 7.10. In previous years where there was a deficit position, an agreement exists between St Leger Homes and DMBC whereby DMBC provide a pension related guarantee to cover all related pension costs, and additional commentary was required in the notes to the accounts. This was to highlight the negative position and that the accounting treatment did not impact on the day to day operations of St Leger.
- 7.11. Under FRS17, the accounting entries to reflect the pension changes must be transacted through the Statement of Comprehensive Income (SOI) and Statement of Financial Position (SOFI), namely:
- Current service costs - the increase in the present value of the scheme liabilities expected to arise from employee service in the current and prior periods;
 - Net return on assets (interest cost) – the expected increase during the period in the present value of the scheme liabilities because the benefits are one period closer to settlement; and
 - The movement in pension surplus/deficit.
- 7.12. The table below summarises the pension accounting postings required under FRS17 and how these reconcile between the breakeven position as per the Company's outturn and financial statements for the past five years :

Year ended 31 March	2023 £million	2022 £million	2021 £million	2020 £million	2019 £ million
<u>FRS17 Pension adjustments</u>					
Outturn position included in management accounts (after repayments to DMBC)	0	0	0	0	0
<u>Statement of Comprehensive Income (SOCl)</u>					
Increase in Admin costs – current Service Costs	(5.598)	(5.554)	(3.868)	(3.869)	(6.085)
Net return on assets – Interest Costs	(1.229)	(1.292)	(0.993)	(1.103)	(0.818)
(Loss)/Profit reported in the financial statements	(6.827)	(6.846)	(4.861)	(4.972)	(6.903)
<u>Statement of Financial Position (SOFP)</u>					
Opening pension deficit	(42.922)	(58.793)	(42.645)	(45.511)	(31.573)
Movement in pension deficit	73.606	15.871	(16.148)	2.866	(13.938)
Closing Pension surplus/(deficit)	30.684	(42.922)	(58.793)	(42.645)	(45.511)

7.13. The information in the accounts on pages 31 to 34 is provided to St Leger Homes by Hymans Robertson and is in the format required under accounting standards.

8. Consultation

8.1. No specific implications arise from this report.

9. Legal Implications

9.1. It is a requirement of the Companies Act 2006 to produce annual audited financial statements.

9.2. Beever and Struthers are paid a fee of £19k for the completion of an audit of the financial statements; a budget for this fee is included within the overall St Leger Homes budget.

9.3. Following the tendering exercise in 2019, the contract for our external auditor service was awarded to Beever and Struthers for the period October 2019 to September 2021 with the annual option to extend for a further year for two years. Both were extended and the contract expires in September 2023. A tendering exercise has commenced to procure audit services from 1 October 2023.

9.4. The full financial statements will be published on the St Leger Homes website and available to residents upon request.

10. Risk

10.1. A clean audit report and financial statements showing a true and fair view of the financial position for the year is a fundamental element of the governance framework, with a direct impact on the financial, operational and reputational risk of the company.

Report Author

Nigel Feirn
Head of Finance and Business Assurance
01302 737485

Appendix A – Draft Financial Statements
Appendix B – Auditors' Management Letter
Appendix C – Letter of Representation

Annual Report

31 March 2023

St Leger Homes of Doncaster Ltd

Company Registration Number: 05564649

St Leger Homes of Doncaster Ltd

Contents

Company Information	1
Strategic Report and Section 172(1) Statement.....	3
Directors' Report.....	16
Statement of Internal Control	17
Statement of Directors' Responsibilities	18
Independent Auditors' Report	19
Statement of Comprehensive Income.....	22
Statement of Financial Position	24
Statement of Cash Flows	25
Notes to the Accounts	26

St Leger Homes of Doncaster Limited

Company Information

Company registration number: 05564649

Registered office:

Civic Office
Waterdale
Doncaster
DN1 3BU

Bankers:

Lloyds Bank Plc
14 Church Street
Sheffield
S1 1HP

Solicitors:

Anthony Collins Solicitors
134 Edmund Street
Birmingham
B3 2ES

Auditors:

Beever and Struthers
1 George Leigh Street
St Ancoats
Manchester
M4 5DL

Internal Auditors:

City of Doncaster Council Internal Audit
Civic Office
Waterdale
Doncaster
DN1 3BU

Board of Directors

Mr A Richmond

Appointed: 01.10.20

Independent Chair

Mr D Wilkinson

Appointed: 11.11.19

Tenant Board Members

Mr A French

Appointed: 26.09.18

Resigned 01.10.22

Mr S Lyons

Appointed: 26.09.18

Mr S Bartle

Appointed: 07.10.20

Ms M Walusimbi

Appointed: 01.10.22

Council Board Members

Cllr J Blackham

Appointed: 10.07.14

Cllr R A Jones

Appointed: 10.07.14

Cllr P Cole

Appointed: 25.05.21

Independent Board Members

Mr T Mason

Appointed: 29.11.17

Mr S Booth

Appointed: 01.01.20

Mrs S Jones

Appointed: 13.01.20

St Leger Homes of Doncaster Limited

Executive Management Team

Mr A Richmond

Ms J Crook

Mr M McEgan

Mr C Margrave

Chief Executive Officer

Director of Corporate Services

Director of Housing and Customer Services

Director of Property Services

St Leger Homes of Doncaster Limited

Strategic Report

The Directors present their strategic report for the year ended 31 March 2023.

Statement by the Directors in performance of their statutory duties in accordance with s172(1) of the Companies Act 2006

The Directors consider that they have acted in good faith, to promote the success of the organisation for the benefit of its stakeholders and matters set out in s172(1)(a-f) of the Act.

St Leger Homes has a wide ranging, large number of stakeholders and partner organisations, with strategic, operational and governance arrangements in place to ensure we optimise engagement and foster strong relationships with them, and how they are considered in our decision making. These include City of Doncaster Council (CDC), employees, tenants, Department of Work & Pensions (DWP), Team Doncaster, Doncaster Chamber of Commerce, Doncaster College, health services, emergency services, procurement consortia, Citizens Advice Bureau (CAB), Community First Credit Union, suppliers, and trade unions, among many others. We are members of or lead on many strategic boards as well as many community agencies and groups, involvement in these groups is fundamental in St Leger Homes understanding the challenges facing the borough and also developing our own services.

The following paragraphs summarise how the Directors have fulfilled their duties in this regard, and in doing so have regarded (amongst other matters):

The likely consequences of any decision in the long term

St Leger Homes operates a comprehensive and effective business planning framework, where the consequences of decisions over the short, medium and long term are considered. A five year Corporate Plan sets out strategic objectives which in turn sets out our service delivery plans and related measures. At the start of each year, and based on the Corporate Plan objectives, an Annual Development Plan (ADP) is approved by Board and sets out key corporate objectives, alongside an Annual Operating Budget.

Progress against the Corporate, Annual Development and all other plans is reviewed regularly with Board meetings six times per year, and quarterly meetings with a number of strategic and management committees within CDC (see pages 6 to 15).

The interests of the organisation's employees

Employees of St Leger Homes have always been recognised as the company's most important asset, and we have a dedicated Human Resource and Organisational Development (HR&OD) team to support the recruitment, development and retention of our workforce. Corporately, the People Strategy has an action plan aligned with our strategic objectives and Corporate Plan (see pages 6 to 15).

The need to foster the organisation's business relationships with suppliers, customers and others

St Leger Homes places Customers' interests at the heart of everything we do and Customers are involved and relationships developed at every level, including representation on the Board, extensive consultation in the five year Corporate plan and Customer strategies, a One Voice Forum, a Tenants and Residents Improvement Panel (TRIP) and working closely with a number of Tenants and Residents Associations (TARAs). To maximise these relationships, we also have effective partnerships with numerous partnering organisations, such as the DWP, Community First Credit Union, and a number of local food banks, among others (see pages 6 to 15).

For suppliers, St Leger Homes has robust Financial Regulations, Contract Standing Orders and a Procurement Strategy, and these documents ensure we operate in a legal, ethical and inclusive manner whilst achieving best value for money. Procurement arrangements utilise compliant frameworks operated by procurement consortia.

The impact of the organisation's operations on the community and environment

It is our mission to provide homes in neighbourhoods that people are proud to live in, and each of our four strategic objectives has plans and measures that have a positive impact on the community and environment.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

Statement by the Directors in performance of their statutory duties in accordance with s172(1) of the Companies Act 2006 (continued)

Alongside these, St Leger Homes has a range of strategies to support our tenants, residents and communities, in particular the Customer Voice, Housing Management, Asset Management, Customer Access, Homelessness and Building Safety & Compliance strategies.

Progress against all plans is monitored regularly by Board and CDC and this includes a suite of Key Performance Indicators (KPIs). Many of the KPIs have a positive impact on the community and environment as they target the energy efficiency of properties, maintaining Decent Homes standard, anti-social behaviour, homelessness, empty properties, local expenditure, and training and employment, among others.

St Leger Homes has an Environmental Strategy and the main objectives of the strategy are to reduce fuel poverty, our carbon footprint and our waste. We undertake enhanced stock condition surveys and utilise strategic asset management software.

For a number of years we have managed investments in a range of environmental improvements and we continue to install efficient heating systems as part of our ongoing improvement programmes, we replace our vehicle fleet with more fuel efficient vehicles and we use repair scheduling software to optimise travel.

We continually review our business premises and have reduced the number in use and energy usage, and we source materials and services locally wherever possible.

The desirability of the organisation maintaining a reputation for high standards of business conduct

A fundamental aim for St Leger Homes is to maintain the highest standards of conduct, operating a robust governance framework, and one of the four strategic objectives in the five year Corporate Plan is to be a nationally recognised housing services provider. We have a comprehensive range of strategies, policies and procedures designed to ensure compliance with legislation, regulations and best practice, including a range of fraud related policies for staff, and a suite of appropriate Key Performance Indicators (KPIs) (see pages 6 to 15).

St Leger Homes is committed to preventing modern slavery and human trafficking and all other potential violation of human rights in all of its business activities. It has no place in St Leger Homes' business or supply chains and we take a zero tolerance approach to it. Our annual modern slavery statement, relating to the 2022/23 financial year, sets out our activities and can be found on our website at www.stlegerhomes.co.uk

The need to act fairly as between members of the organisation

St Leger operates a robust approach to governance, with frameworks in place for the management of Strategic and Operational Risk, financial control, operating performance and procurement. These frameworks sit under an extensive, overarching Management Agreement with CDC with clear lines of delegated authority and periodic monitoring and reporting (see pages 6 to 15).

Principal decisions

The Code and Regulations do not define 'principal' or 'key' decisions, but following the approval of the five year Corporate Plan in March 2019, the Directors feel that were a number of principal decisions in 2022/23 relating to company operations and key stakeholder groups. These include :

- Appointment of new Board Members;
- Development of ICT systems;
- Responding to and implementing changing Building Safer Futures legislation;
- Development and approval of three year budgets and the Annual Development Plan (ADP); and
- Responding to the requirements of the Social Housing Regulation Bill, including creation of a dedicated damp mould and condensation team and implemented Tenant Satisfaction Measures.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

Business model and review of the financial year

St Leger Homes of Doncaster Ltd (St Leger Homes) was created and is wholly owned by City of Doncaster Council (CDC) as an Arm's Length Management Organisation (ALMO). St Leger Homes was incorporated on 15 September 2005 and commenced trading on 1 October 2005 to manage, maintain, and improve CDC's housing and related stock. On 3 July 2018, CDC approved the renewal of the management agreement for the period 1 April 2019 to 31 March 2024, which was signed at the Board meeting on 27 March 2019.

During the financial year just ended, work commenced on renewing the Management Agreement and on 16 August 2023, CDC approved the renewal for the period 1 April 2024 to 31 March 2029.

Under the management agreement with CDC, St Leger Homes receives a fee from CDC's Housing Revenue Account (HRA) to manage and maintain the HRA stock on their behalf.

Other income is also received in the form of management fees to deliver the housing options service and the capital investment programme in CDC's housing stock, plus income from delivering property improvement services.

The fees are based on the actual cost of service within agreed budget targets. A number of services are procured from CDC and these are each subject to Service Level Agreements (SLAs) which set out agreed service standards and costs for the service.

Vision, values and objectives

St Leger Homes has a five year corporate plan underpinned by a mission, values and strategic objectives.

It is our mission to provide homes in neighbourhoods that people are proud to live in.

Our values :

- **Fairness** ensure equality and diversity is integral to all we do;
- **Excellence** provide efficient, excellent services to all our customers;
- **Empowerment** empower and involve staff and tenants through meaningful consultation; and
- **Local** work in partnership with other local organisations.

Our strategic objectives are to :

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

A balanced scorecard of priorities and targets has been developed for each objective and these are reviewed, updated and agreed annually with CDC to reflect current plans and risks.

An Annual Development Plan (ADP) is approved by the Board at the start of each financial year. The ADP is based on our strategic objectives and priorities, and also Mayoral priorities. Key themes for 2022/23 were:

- Ensuring the allocations policy reflects the changing needs of tenants and residents;
- Reduce and prevent homelessness;
- Helping tenants to sustain their tenancies;
- Continuously improve our business processes;
- Improving communication with tenants and residents;
- Digital transformation to modernise and transform the business and service delivery;
- Developing the workforce;
- Delivering the Asset Management and Environmental strategies;
- Delivering an efficient and effective repairs and maintenance service; and
- Investing in homes and neighbourhoods and making best use of CDC's assets.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

Vision, values and objectives (continued)

At every Board meeting, Members and Directors review progress against strategic priorities via timely and accurate reports, including Key Performance Indicators (KPIs), financial and operational reports, ADP progress reports, strategy updates and numerous other control documents.

Results and performance

These financial statements are for the 2022/23 financial year which ended on 31 March 2023. The Company's accounting reference date aligns with the CDC financial year.

Operations

The Company's principal activity during the year was the management and maintenance of the housing stock of CDC, which numbered 20,185, of which 19,894 were tenanted dwellings and 291 leasehold dwellings as at 31 March 2023. In addition, the company is responsible for the management of CDC's statutory duty to respond to homelessness within the borough and also management of the investment programme for the improvement of the housing stock.

Core services were unchanged and delivered fully during the year. The main projects in the year were the ongoing work in relation to the requirements of Building Safer Futures and the social housing White Paper, commencement of a number of 'Journeys to Excellence' projects around repairs, homelessness and customer access, and addressing the cost of living challenges that emerged during the year.

Services were delivered within budgets overall and the majority of key performance targets were met or exceeded.

Financial

HRA management fee income for 2022/23 was £35.64m (2021/22 : £33.16m) and other income was £18.57m (2021/22 : £15.29m) giving a total of £54.21m (2021/22 : £48.45m). This income is shown in the Company's Statement of Comprehensive Income under the heading "Turnover". This excludes the capital programme investment in CDC's housing stock, which is managed by St Leger Homes and is accounted for within CDC's financial statements.

Homes

Managing the CDC capital programme ensured continued investment in the housing stock. The property improvements programme totalled £23m and included external improvement schemes, environmental works, heating conversions and upgrades, estate works and structural repairs.

Building safety compliance investment was delivered in properties under our management, and we also continued the External Wall Insulation (EWI) programme and secured external funding towards this.

We continue to carry out responsive and scheduled repair work and cyclical testing and servicing of heating and electrics to ensure the continued maintenance of our housing stock. We operate a 24/7 contact service. A Repairs Excellence project continued in the year and is reviewing all areas of the repairs service to improve performance and reduce costs.

The stock condition surveying programme that commenced in 2021/22 continued in the year and results are being used in the long term investment planning.

People (Employees)

St Leger Homes has a dedicated HR and OD team, supporting high levels of business change, which has been considerable in recent years with realignments, restructures, demand on services and ways of working. Agile working is now fully embedded following the reopening of offices in 2021/22.

The programme of staff surveys that started in 2020/21 continued with three more in the year. These were again aimed at the continued assessment of employees' wellbeing, any issues with the new agile working arrangements and capturing thoughts and ideas for future working arrangements.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

People (Employees) - continued

Results are analysed and used to inform St Leger Homes' agile working approach and lead the implementation of policy change and associated guidance and learning, and ways of working. The surveys have consistently seen high (and above target) levels of employee satisfaction, exceeding 80%.

Key employee related points to note for the year are summarised below.

Engagement:

- we held our annual staff conference in person again after holding them virtually in recent years, and included an Awards section recognising the St Leger 'Stars in our organisation';
- a number of virtual Q&A sessions with the Executive Management Team (EMT) were held enabling all employees to engage directly; and
- we delivered a number of further, remote Q&A sessions with EMT throughout the year, enabling employees to receive up to date information first hand and to ask EMT any questions.

Wellbeing:

- For the twelfth year running, we achieved the maximum five star rating in the British Safety Council's Occupational Health and Safety Audit scheme;
- retained accreditation to the international ISO45001 health and safety standard during 2022/23;
- continued our Public Health Bewell@Work activities throughout 2022/23, which includes plans working to achieve Gold (which was received in May 2023);
- the number of RIDDOR reportable injuries reduced in the year. A full evaluation of health and safety performance is provided to Board on a regular basis;
- we continued to invest in our staff and delivered a comprehensive learning and development programme for all staff during 2022/23. The programme offered numerous training courses and learning events, either on site or virtually; and
- embedding Personal Development Plans (PDPs) - comprehensive training plans and learning needs analysis within our learning management system for all roles to manage mandatory training completion.

Equality, Diversity and Inclusion:

- we have asked our staff for their views on how we approach Equality, Diversity and Inclusion,
- feedback informed our Equality, Diversity and Inclusion Strategy 2022-2026;
- we have a balanced scorecard approach to monitor how representative our organisation is of the community that we serve, on the number of diverse employees that we employ and the number of diverse applicants applying for roles at St Leger;
- decreased our gender pay gap over five years, achieving a 50/50 male to female SMT ratio; and
- increased the number of women in our trade based roles.

Apprenticeships:

- we continue to invest heavily in apprenticeships as part of succession planning and since 2005, St Leger Homes have trained over 125 trades apprentices;
- Increased the number of apprentices recruitment within the organisation taking in the region of 12 per year;
- won large employer of the year at the SY Apprenticeship awards 2022; and
- consistently met the national apprenticeship target for new recruits and supported high levels of WOW placements through our career start activity.

People (Tenants)

St Leger Homes maintained our commitment to providing suitable homes, maintaining independence, tackling social and financial exclusion and empowering people to have a better quality of life.

We received external recognition with a number of people related awards during the year, most notably reaccreditation for the Government Standard for Customer Service Excellence (CSE) for the thirteenth year running. The standard is awarded to public service organisations which meet strict criteria demonstrating that they focus on the needs and preferences of their customers, and all elements are considered either 'Compliant' or 'Compliance Plus'.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

People (Tenants) (continued)

The Access to Homes Service had another exceptionally busy year. Since the introduction of the Homelessness Reduction Act 2017 and demands of Covid19 requirements, this service area has experienced very high demand in general approaches for access to the housing register, housing advice and homeless applications, statutory rehousing and use of homeless temporary accommodation.

Addressing homelessness is one of the key priorities of Doncaster Growing Together, and therefore within our Corporate Plan, ADP and SDPs. We work very closely with the Complex Lives (CL) Alliance, including CDC, NHS and Children's Services, to support vulnerable Doncaster residents.

We again secured Government funding which provided much needed resources and capacity to the service in their work towards addressing homelessness.

The severe weather emergency protocol (SWEP) was activated on several occasions in the year. SWEP ensures normal operational service is maintained and increased measures to prevent rough sleeping and keeping people safe during these periods. Working with our partners, we were able to ensure a bed was available for every rough sleeper who wanted one during the severe weather.

Effective partnership working is essential in delivering the required services to residents of the borough, and our work with the DWP, CAB, Doncaster Financial Inclusion Group (FIG), Doncaster Renewal Group and Community First Credit Union, among others, plays a key role in delivering solutions to our tenants.

Tenant involvement is also very important in monitoring and improving services. The Customer Voice Strategy was approved in March 2022 and quarterly Customer Voice meetings were held in the year, and a One Voice Forum introduced to ensure that St Leger Homes is kept informed of the changing views, needs, desires and aspirations of the Doncaster community. We have a Tenants and Residents Improvement Panel (TRIP) who undertake a number of tasks and reviews each year. TRIP play a key role in our work on consultation, customer engagement, mystery shopping and reality checking. We work closely with 24 Tenants and Residents Associations (TARAs).

We are particularly proud of our work over the past few years in helping our tenants with sustaining their tenancies, the impact of benefit reform and more recently the cost of living crisis.

Our dedicated Tenancy Sustainability Team has received nearly 5,000 service referrals, verified nearly 30,000 individual UC claims and achieved £4m of financial gains for tenants since its creation in 2018. Performance is best reflected in the current arrears KPI which ended the year at 2.74%, better than target.

We have a strong safeguarding culture and are a member of both the Adult & Children Safeguarding Boards and play an important role with strategic partners across Doncaster. In addition, we have links with or are members of other partnership panels and boards, including the Health and Wellbeing Board, the Doncaster Integrated Care Partnership Board, Multi-Agency Risk Management Arrangements Conference (MARAC) and Domestic Abuse Housing Alliance (DAHA).

We carried out an increasing number of surveys with our tenants in 2022/23, including the annual STAR survey. (see 'Customer satisfaction' below). These surveys are a vital source of information in developing our services.

Feedback from our tenants on a survey on Equality, Diversity and Inclusion (EDI) informed our renewed Equality, Diversity and Inclusion Strategy 2022-2026. The EDI balanced scorecard includes information about the diversity of our customer base. This is reported quarterly and is used to inform future action planning.

Our Communication Strategy 2022-2026 sets out our plans to build a strong company reputation and to ensure all our stakeholders are engaged, involved and informed about what we do and how we do it and that there are clear two way lines of communication to influence the services we deliver and how we deliver them.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

Neighbourhoods

Our Customer Voice strategy strengthens our outcome focussed customer involvement structure. Our neighbourhoods work continued extensively in the year, including estate caretaker work, positive activity expenditure, estate walks and new fencing.

St Leger Homes has a proactive approach to anti-social behaviour and we continued to work effectively with our partners via the Doncaster Safer Partnership. We aim to ensure properties are empty for as short a period as possible as this has a positive impact on neighbourhoods, reducing anti-social behaviour (ASB) and crime, as well as having a positive impact on income to the HRA.

In high level ASB hot spot areas, multi-agency task force working is effective in combating crime and ASB and supporting victims. Wider investment on estates, to help enhance and improve neighbourhoods also continued, with fencing and parking schemes delivered and improvements to garage sites as part of our environmental programme.

We attended regular Neighbourhood Action Groups and Case Identification Meetings across the borough in all of our four geographical areas. As well as low level enforcement and support and involvement in local solutions groups, we successfully carried out enforcement sanctions on Notice of Seeking Possessions (Secure Tenancies), Notice of Possession Proceedings (Introductory Tenancies), Injunctions, Demoted Tenancy Orders, Evictions and Closure Orders.

St Leger is also part of an 'Environmental Pride' programme, designed to support communities to take action to improve their neighbourhoods.

Modern slavery

Modern slavery is a potential risk to our tenants, employees, residents of the borough, our suppliers and therefore to St Leger Homes.

It has no place in St Leger Homes' business or supply chains and we take a zero tolerance approach to it. Our commitment to all aspects of equality and diversity is inherent in our mission, vision, values and strategic objectives.

We are committed to acting ethically and with integrity in all our business dealings and relationships and to implementing and enforcing effective systems and controls to ensure modern slavery is not taking place anywhere within our operations.

We are also committed to ensuring there is transparency in St Leger Homes and in our approach to tackling modern slavery throughout our supply chains, and we demand the same high standards from all of our contractors, suppliers and business partners.

We publish our annual modern slavery statements, which set out St Leger Homes' activities to ensure there is no slavery or human trafficking in our operations. The latest statement can be found on our website at www.stlegerhomes.co.uk and it is also registered on the government website www.gov.uk.

Employment Policy

In 2022/23, the Company employed on average 816 staff / 739 whole time equivalents (2020/21 : 813 staff / 737 whole time equivalents).

We continued our commitment to developing our staff through the delivery of our People Strategy whose action plan is reviewed by the Board annually, and EMT every six months.

A number of employee policies and related documents were considered by EMT and Board in the year, including but not limited to sickness, competitive pay, training, equality and diversity and behaviours. A substantial amount of work, including employee consultation, was undertaken in developing a new behaviours framework, and updated Employee Behaviours were launched in December 2022.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

Employment Policy (continued)

We again met the commitments of the Disability Confident Scheme accredited by the Department for Work and Pensions. Achieving this accreditation means we can demonstrate that we make the most of the talents disabled people can bring to our workplace, enabling us to successfully recruit and retain disabled people and those with health conditions.

As part of our ongoing commitment to addressing any inequality issues in any form, we aim to ensure men and women are paid equally for doing equal work by determining their pay through an equality proofed job evaluation scheme. We published our Gender Pay Gap Report for 2022 in April 2023. This is available on our web-site.

Performance

St Leger Homes has dedicated Business Transformation (BTT) and Performance Teams (PT).

The focus of both teams in 2022/23 was to continue to develop and embed the integrated housing management solution and performance reporting framework, so that every area of the business can utilise an efficient ICT system and access timely and accurate information to ensure they deliver their services effectively.

At the start of each financial year, a suite of Key Performance Indicators (KPIs) is approved by Board and CDC. The suite is developed from strategic objectives, risks and Mayoral priorities, and is reported monthly at appropriate levels within St Leger and CDC. St Leger Homes validates these KPIs with a number of employee and customer surveys and benchmarking.

Key Performance Indicators 2022/23:

The table below summarises KPI performance against targets and comparatives where possible.

Indicator Description	22/23 Outturn	22/23 Target	21/22 Outturn	20/21 Outturn	19/20 Outturn	18/19 Outturn
% of current rent arrears against annual debit	2.74%	2.75%	2.55%	2.75%	2.79%	2.61%
Void rent loss % through vacant dwellings	0.67%	0.50%	0.79%	1.00%	0.59%	0.49%
Number of tenancies sustained post support	96.8%	97.3%	98.3%	97.3%	93.8%	n/a
Number of homeless preventions	850	n/a	566	604	965	n/a
Number of repairs first visit complete	94.8%	92.0%	90.2%	90.9%	90.2%	n/a
Gas servicing - % of properties with a valid landlord certificate	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Number of complaints upheld as a % of all interactions	0.09%	0.07%	0.13%	0.07%	0.06%	0.07%
<i>Complaints upheld</i>	323		403	233	240	250
<i>Complaints not upheld</i>	874		661	570	581	638
<i>Total complaints</i>	1,197		1,064	803	821	888
Days lost through sickness per FTE	11.7	7.9	11.9	6.6	8.2	8.9
ASB % of cases resolved	97.0%	95.6%	97.6%	95.2%	95.56%	93.0%
Percentage of local expenditure	67%	70%	73%	69%	63%	71%
Percentage of homes maintaining decent standard	99.69%	100.00%	99.99%	99.99%	100.00%	n/a

It is again particularly pleasing to report that current rent arrears performance out-turned at 2.74% against the year-end target of 2.75%. The past few years have been particularly challenging with Universal Credit rolled out fully across the borough, Brexit, the Covid19 pandemic and related restrictions, and in 2022/23 an emerging cost of living crisis where tenants experienced high inflation and very large increases in utility and fuel costs.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

Performance (continued)

Void performance was worse than target throughout the year for both void rent loss and re-let times, but has been improving slowly over the past two years, and is in the top or upper quartiles when benchmarked with our peers and also all providers nationally.

Customer Satisfaction 2022/23

We again carried out an annual Survey of Tenants and Residents (STAR), as well as a programme of responsive, bespoke transactional customer surveys throughout the year. These are used to inform our service delivery methods and respond effectively to emerging needs.

The table below summarises satisfaction levels for the core questions for the 2022/23 STAR survey, with comparatives for previous surveys. There was no survey in 2020/21.

Core satisfaction survey question	2022/23	2021/22	2019/20	2017/18	2016/17	2015/16	2014/15
Overall satisfaction	81.3%	84.8%	87.0%	88.8%	91.0%	91.8%	90.9%
Quality of your home	75.7%	86.5%	89.4%	89.2%	92.7%	93.2%	92.1%
Neighbourhood as a place to live	72.8%	79.9%	81.2%	81.3%	89.9%	90.8%	91.4%
Rent provides value for money	82.9%	n/a	94.2%	92.8%	93.6%	93.4%	92.2%
Repairs and maintenance	80.3%	86.3%	90.1%	85.9%	89.4%	89.5%	88.8%
Listens to views and acts on them	73.2%	74.9%	83.1%	83.5%	85.8%	86.8%	85.9%

Results were generally lower than in 2021/22 and 2019/20, and housing providers across the country have also experienced similar falls in their satisfaction levels. Although our tenant satisfaction levels are lower, we remain in the upper quartiles when benchmarked nationally and with our peers.

Customer Service Standards

In addition to the KPIs, St Leger Homes reports on seven Customer Service Standards. These are set in consultation with our customers, taking into account our Corporate Plan 2019-2024, KPIs and the Regulatory Consumer Standards, to ensure our customers are clear about the levels of service they can expect from us and we are clear about what we need to deliver.

The standards are reviewed periodically and approved by EMT and Board, and performance is monitored on a quarterly basis.

For 2022/23, there were 13 measures across seven standards, covering the following areas:

- Helpful, friendly and polite staff and contractors;
- Being treated with respect and decency;
- Feeling safe in their home;
- Knowledgeable staff dealing with enquiries efficiently and effectively;
- Easy to contact us by their preferred method;
- Convenient appointments; and
- Getting the service right.

The table below summarises our performance for the past five years :

Service standards	22/23	21/22	20/21	19/20	18/19	17/18
Compliant	7	6	7	8	8	9
Within target tolerance	2	3	1	3	2	4
Not compliant	4	6	3	2	3	0
Total	13	15	11	13	13	13

Our Service Standards were reviewed again in 2022/23 in light of the introduction of new Tenant Satisfaction Measures (TSM) under the Social Housing Regulation Bill and will form part of the wider KPI and TSM reporting in 2023/24.

St Leger Homes of Doncaster Limited

Strategic Report (continued)

Value For Money (VFM)

VFM is embedded in our mission, values and strategic objectives and our Annual Development Plan (ADP) and Directorate Service Delivery Plans (SDP) are developed around these objectives and priorities. St Leger Homes has a good track record on VFM.

We recognise the Regulator of Social Housing's Regulatory Standards as good practice and during the year, published our annual VFM self-assessment (based on the 2021/22 financial year) to capture all VFM achievements and work into one summary document.

The self-assessment again shows that St Leger is, in general, a low cost, mid to high performing organisation when benchmarked with our peers (around 25 organisations) and also all housing providers nationally (around 100 organisations). Benchmarking shows there are areas of good performance and also areas for improvement, with actions developed to improve these.

The VFM strategy was updated in 2022/23 and will ensure continued focus on optimising costs and performance.

Principal Risks and Uncertainties

Effective risk management has always been an integral part of our business planning process. We have recognised that identifying and managing the risks we face is a critical element in achieving our wider vision.

All strategic risks are considered by their potential impact on the delivery of the company's aims, objectives and the provision of services together with the predicted likelihood of the actual event or occurrence and the score registered on a risk matrix. A member of the Leadership Team is assigned as being the risk owner and assumes the responsibility of ensuring effective mitigation actions are in place. As in previous years, quarterly reviews and updates of the risk register took place during the year and this will continue in 2023/24.

Review of the Risk Register

Strategic risks have been identified with varying degrees of probability and impact on the organisation. These are monitored on a regular basis by the Board, Audit and Risk Committee, EMT and Leadership. A full review of the risk format, content and methodology was undertaken in the year to ensure all risks were adequately recorded and the processes were still fit for purpose.

The key strategic risks in the register at year end and going forward are 'The failure to:

- manage Homelessness issues within the borough
- deliver the Digital transformation programme and optimise use of ICT
- manage political and local expectations of St Leger and deliver on performance and value for money as measured by DMBC
- recruit, develop and retain a skilled, efficient and effective workforce
- manage all issues surrounding property compliance risks, including high risk residential accommodation and any emerging requirements
- manage corporate health, safety and compliance risks
- effectively govern and manage in an increasingly regulated climate
- maintain core service delivery and business continuity in an unstable world (eg. illness, cost of living, fuel and material shortages, adverse weather, high inflation).

St Leger Homes of Doncaster Limited

Strategic Report (continued)

Future Developments

Our Annual Development Plan for 2023/24 was approved by the Board in April 2023 and is available on our website, along with our five year Corporate Plan, at www.stlegerhomes.co.uk . These documents set out our future plans and targets in the short and medium term. These are cross-referenced to the Doncaster's Growing Together (DGT) corporate strategy confirming St Leger's commitment to working in partnership with CDC and key partners.

The current five year Corporate Plan runs to March 2024 and work commenced in 2022/23 on its review and working with CDC to develop a new plan. A new five year plan will be approved before the next financial year by Board and CDC, along with a new five year Management Agreement by September 2023, enabling St Leger Homes to undertake longer term planning.

The main focus areas continue to be around governance and the requirements of the Social Housing Regulation Bill, new Tenant Satisfaction Measures, evidencing our compliance with the Regulator of Social Housing (RSH) standards, preparing for regulatory inspection, building safety and excellent customer service.

We will continue to work with our Tenants to assist them with the challenges that have emerged in recent years following the Covid19 pandemic and cost of living crisis, which come after a long period of minimising the impact of Welfare Reform.

The challenging economic and political climates mean we must continue to be an organisation which delivers efficiencies and value for money services. The investment in the past two years in the new Integrated Housing Management Solution is transforming the way the company operates and deliver further efficiencies, and this will be developed further. We will continue to invest in our employees, the most recent being commencement of working towards Investors In People accreditation which commenced in May 2023.

We continually monitor our portfolio of commercial and community support services for impact and growth potential, respond to housing needs in the forward plan for capital projects and seek to further improve energy efficiency in our homes and our environmental footprint.

By order of the Board and signed on its behalf

St Leger Homes of Doncaster Limited
St Leger Court
White Rose Way
Doncaster DN1 3BU

Dave Wilkinson
Chair

St Leger Homes of Doncaster Limited

Directors' Report

Legal status of Company

The Company is limited by guarantee and does not have any Share Capital.

Status of Company and composition of the Board

CDC, the sole member of the Company, undertakes, in the event of the Company being wound up, to contribute such amount as may be required for the payment of the debts and liabilities of the Company. After the satisfaction of all the debts and liabilities the remaining assets will be transferred to the CDC Housing Revenue Account (as defined in the Local Government & Housing Act 1989).

A Board of non-executive Directors run the Company and is made up of representatives of the company, local community and independent members:

- One Independent Chair
- Three Council tenants
- Three Council nominees
- Three Independent members
- Chief Executive of St Leger Homes of Doncaster Limited

The composition of the Board reflects the range and mix of skills and experience required for the effective management of the Company. An Executive Management Team supports the Board; the Executive Management Team is responsible for the day-to-day running of the Company.

Proposed dividend

The Company has been set up as a non-profit making organisation, no dividends are paid. The Directors therefore do not recommend the payment of a dividend, or distribution of any surplus.

Directors and Directors' interests

The Directors who held office during the year are detailed on page 2.

Post Balance Sheet Events

There were no post balance sheet events to report.

Disclosure of information to auditors

The Directors who held office at the date of approval of this Directors' report confirm that, so far as they are each aware, there is no relevant audit information of which the Company's Directors are individually unaware; and each Director has taken all the steps that they ought to have taken as a Director to make themselves aware of any relevant audit information and to establish that the Company's auditors are aware of that information.

Auditors

In accordance with section 385 of the Companies Act 2006 a tendering exercise will be carried out following the expiry of the existing External Auditors contract on the 30 September 2023.

By order of the Board and signed on its behalf

St Leger Homes of Doncaster Limited
Civic Office
Waterdale
Doncaster DN1 3BU

Dave Wilkinson
Chair

St Leger Homes of Doncaster Limited

Statement of Internal Control

The Board of Directors acknowledges its ultimate responsibility for ensuring that the Company has in place a system of controls that is appropriate to the various business environments in which it operates. These controls are designed to give reasonable assurance with respect to:

- The reliability of financial information used within the Company or for publication;
- The maintenance of proper accounting records; and
- The safeguarding of assets against unauthorised use or disposal.

It is the Board of Directors' responsibility to establish and maintain systems of internal financial control. Such systems can only provide reasonable and not absolute assurance against material financial misstatement or loss. The system of internal control includes the following key elements:

- Formal policies and procedures are in place, including the documentation of key systems and rules relating to the delegation of authorities, which allow the monitoring of controls and restrict the unauthorised use of the Company's assets;
- Experienced and suitably qualified staff to take responsibility for important business functions. Annual employee development review procedures have been established to maintain standards of performance;
- The establishment of written policies and procedures and a scheme of delegated authority designed to ensure that proper accounting records are maintained;
- A risk management framework in which priority risks are reviewed by the Board, Audit and Risk Committee, Executive Management Team and senior managers;
- Forecasts and budgets are prepared which allow the Board of Directors and management to monitor the key business risks and financial objectives and progress towards financial plans set for the year and the medium term. Regular management accounts are prepared promptly, providing relevant, reliable and up-to-date financial and other information and significant variances from budgets are investigated as appropriate;
- All significant new initiatives, major commitments and investment projects are subject to formal authorisation procedures, through the Board of Directors and officers of the Company;
- The internal audit programme is in place to review, appraise and report upon the adequacy of internal controls. Any actions necessary to correct any weaknesses identified by internal or external audit are incorporated within the action plan that is agreed and monitored by the Audit Committee. The annual report of the Internal Auditors for 2022/23 was received by Audit and Risk Committee in June 2023 and gave a positive opinion that the systems of internal control examined were generally sound with only a few exceptions.
- A full range of insurance including Fidelity Guarantee has been put in place to safeguard assets.

On behalf of the Board, management has reviewed the effectiveness of systems of internal control in existence for the year ended 31 March 2023. No weaknesses were found in the internal controls, which resulted in material losses, contingencies or uncertainties, which require disclosure in the financial statements or in the auditor's report on the financial statements. The Board of Directors is satisfied that this remains the case up to the signing of these documents.

The Board of Directors is also of the opinion that the Company has suitable internal controls for maintaining adequate accounting records, safeguarding the assets of the Company and for taking reasonable steps to prevent and detect fraud and other irregularities. These financial statements have been prepared on the basis that the Company is a going concern.

St Leger Homes of Doncaster Limited

Statement of Directors' Responsibilities

The Directors are responsible for preparing the Directors' Report and the financial statements in accordance with applicable law and regulations.

Company law requires the Directors to prepare financial statements for each financial year. Under that law they have elected to prepare the financial statements in accordance with UK Accounting Standards and applicable law (UK Generally Accepted Accounting Practice).

The financial statements are required by law to give a true and fair view of the state of affairs of the company and of the profit or loss of the company for that period.

In preparing these financial statements, the Directors are required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on a going concern basis unless it is inappropriate to presume that the company will continue in business.

The Directors are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the company and enable them to ensure that its financial statements comply with the Companies Act 2006. They have general responsibility for taking such steps as are reasonably open to them to safeguard the assets of the company and to prevent and detect fraud and other irregularities.

The Directors are responsible for the maintenance and integrity of the corporate and financial information included on the company's website. Legislation in the UK governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

St Leger Homes of Doncaster Limited

Independent Auditor's Report to the Members of St Leger Homes of Doncaster

Opinion

We have audited the financial statements of St Leger Homes of Doncaster (the 'Company') for the year ended 31 March 2023 which comprise the Statement of Comprehensive Income, the Statement of Financial Position, the Statement of Changes in Reserves, the Statement of Cash Flows and the notes to the financial statements, including a summary of significant accounting policies in note 1. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the Company's affairs as at 31 March 2023 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We are independent of the Company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Board's use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Board with respect to going concern are described in the relevant sections of this report.

Other information

The other information comprises the information included in the annual report, other than the financial statements and our auditor's report thereon. The Board is responsible for the other information contained within the annual report. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the course of the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

St Leger Homes of Doncaster Limited

Independent Auditor's Report to the Members of St Leger Homes of Doncaster (continued)

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the strategic report and the directors' report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the directors' report have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the Company and its environment obtained in the course of the audit, we have not identified material misstatements in the strategic report or the directors' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of directors

As explained more fully in the Statement of Directors' Responsibilities set out on page 18, the Board is responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Board determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Board is responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Board either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's web-site at www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

St Leger Homes of Doncaster Limited

Independent Auditor's Report to the Members of St Leger Homes of Doncaster (continued)

Extent to which the audit was considered capable of detecting irregularities, including fraud

We identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and then design and perform audit procedures responsive to those risks, including obtaining audit evidence that is sufficient and appropriate to provide a basis for our opinion.

In identifying and addressing risks of material misstatement in respect of irregularities, including fraud and non-compliance with laws and regulations, our procedures included the following:

- We obtained an understanding of laws, regulations and guidance that affect the Company, focusing on those that had a direct effect on the financial statements or that had a fundamental effect on its operations. Key laws, regulations and guidance that we identified included the Companies Act 2006, tax legislation, health and safety legislation, and employment legislation.
- We enquired of the Board and reviewed correspondence and Board meeting minutes for evidence of non-compliance with relevant laws and regulations. We also reviewed controls the Board have in place, where necessary, to ensure compliance.
- We gained an understanding of the controls that the Board have in place to prevent and detect fraud. We enquired of the Board about any incidences of fraud that had taken place during the accounting period.
- The risk of fraud and non-compliance with laws and regulations was discussed within the audit team and tests were planned and performed to address these risks.
- We reviewed financial statements disclosures and supporting documentation to assess compliance with relevant laws and regulations discussed above.
- We enquired of the Board about actual and potential litigation and claims.
- We performed analytical procedures to identify any unusual or unexpected relationships that might indicate risks of material misstatement due to fraud.
- In addressing the risk of fraud due to management override of internal controls we tested the appropriateness of journal entries and assessed whether the judgements made in making accounting estimates were indicative of a potential bias.

Due to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing fraud or non-compliance with laws and regulations and cannot be expected to detect all fraud and non-compliance with laws and regulations.

Use of our report

This report is made solely to the Company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the Company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Company and the Company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Richard Graham ACA (Senior Statutory Auditor)

For and on behalf of
Beever and Struthers
Statutory Auditor
1 George Leigh House
St Ancoats
Manchester
M4 5DL

Date: 3 August 2023

St Leger Homes of Doncaster Limited

Income Statement

For the year ended 31 March 2023

		Year Ended 31 March 2023	Year Ended 31 March 2022
	Note	£000	£000
Turnover	2	54,209	48,452
Cost of Sales		(53,137)	(47,429)
Gross Profit		<u>1,072</u>	<u>1,023</u>
Administrative Expenses		(6,662)	(6,577)
(Loss)		<u>(5,590)</u>	<u>(5,554)</u>
Interest payable	13	(1,229)	(1,292)
(Loss) on Ordinary Activities before Taxation		<u>(6,819)</u>	<u>(6,846)</u>
Tax on (Loss) on Ordinary Activities	6	0	0
(Loss) on Ordinary Activities after Taxation		<u><u>(6,819)</u></u>	<u><u>(6,846)</u></u>

All of the activities of the company are classed as continuing.

The accounts are prepared on a historical cost basis.

Statement of Comprehensive Income

For the year ended 31 March 2023

		Year Ended 31 March 2023	Year Ended 31 March 2022
	Note	£000	£000
(Loss) attributable to the members of the Company		(6,819)	(6,846)
Actuarial gain/(loss) recognised in the pension scheme for the financial year	13	73,703	22,717
Pension surplus not recognised	13	(2,378)	-
Total comprehensive income for the financial year		<u><u>64,506</u></u>	<u><u>15,871</u></u>

The notes on pages 26 to 37 form part of these financial statements.

St Leger Homes of Doncaster Limited

Statement of changes in Revenue Reserve

As at 31 March 2023

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Balance as at 1 April	(42,922)	(58,793)
Profit from Statement of Comprehensive Income for the year ended 31 March	64,506	15,871
Balance at 31 March	21,584	(42,922)

St Leger Homes of Doncaster Limited

Statement of Financial Position

As at 31 March 2023

		As at 31 March 2023		As at 31 March 2022	
	Note	£000	£000	£000	£000
Current Assets					
Inventories	7		2,385		2,085
Debtors	8 & 18		3,931		3,927
Cash and cash equivalents			78		2,527
			<u>6,394</u>		<u>8,539</u>
Creditors: amounts falling due within one year					
Bank Overdraft	9 & 18		(6,324)		(8,469)
			<u>0</u>		<u>0</u>
Net Current Assets			70		70
Provisions for liabilities and charges	10		(70)		(70)
			<u>0</u>		<u>0</u>
Net assets excluding pension assets/(liabilities)			0		0
Pension assets/(liabilities)					
Pension asset/(liability)	13	<u>21,584</u>	21,584	<u>(42,922)</u>	(42,922)
Net assets/(liabilities) including pension assets/(liabilities)			<u>21,584</u>		<u>(42,922)</u>
Capital and reserves					
Profit and loss account			<u>21,584</u>		<u>(42,922)</u>

These financial statements were approved by the Board of Directors on 3 August 2023 and were signed on its behalf by:

Dave Wilkinson
Chair

Company registration number 05564649

The notes on pages 26 to 37 form part of these financial statements

St Leger Homes of Doncaster Limited

Statement of Cash Flows

For the year ended 31 March 2023

		Year Ended 31 March 2023	Year Ended 31 March 2022
	Note	£000	£000
Cash flow from operating activities		(2,449)	1,267
Profit for the financial year		0	0
Adjustments for :			
Depreciation of property plant, & equipment		0	28
(Increase) in debtors	8 & 18	(4)	(234)
(Increase) in work in progress and stock	7	(300)	(309)
(Decrease) / increase in creditors	9 & 18	(2,145)	1,782
Net cash outflow from operating activities		(2,449)	1,267
Cash flow from investing activities			
Purchase of property plant, & equipment		0	0
Net decrease in cash and cash equivalents		(2,449)	1,267
Cash and cash equivalents at the beginning of the year		2,527	1,260
Cash and cash equivalents at the end of the year		78	2,527

The notes on pages 26 to 37 form part of these financial statements

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements)

1. Accounting Policies

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the Company's financial statements. The prior year results are for the year ended 31 March 2022. St Leger Homes was incorporated in the United Kingdom and its registered office is St Leger Court, White Rose Way, Doncaster, DN4 5ND.

Basis of Accounting

The financial statements have been prepared in accordance with applicable accounting standards and under historical cost accounting rules. The financial statements are presented in £ sterling and rounded to the nearest thousand pounds.

These financial statements are for the year ended 31 March 2023 and comply with FRS102.

St Leger Homes undertakes the management and maintenance of the housing stock of Doncaster Council (CDC) and the management of the investment programme for the modernisation of the housing stock.

The Management Agreement is in place whereby CDC will take back the assets and liabilities of St Leger Homes at the end of its life or if the operations move elsewhere.

It has been declared by HMRC that ALMOs have been adjudged to be "non-trading" with regards to the business that is conducted between the ALMO and its parent council and thus ALMOs are exempt from corporation tax on any surpluses generated through this relationship.

Turnover

Turnover represents the amounts derived from the provision of goods and services in the normal course of business, net of trade discounts, VAT and other sales related taxes.

Post-retirement Benefits

The Company participates in the Local Government Pension Scheme (LGPS). The scheme is a defined benefit pension scheme. The assets of the scheme are held separately from those of the Company in an independently administered fund. Pension scheme assets are measured at fair value and pension scheme liabilities are measured on the actuarial basis using the projected unit method and discounted at a rate equivalent to the current rate of return on a high quality corporate bond of equivalent term and currency to the scheme liabilities.

When a pension scheme is in deficit, the requirement of Section 28 of Financial Reporting Standard (FRS) 102 is to show the pension scheme as a liability on the balance sheet. When a pension scheme is in surplus, the level of surplus disclosed is based on a number of underlying assumptions and conditions.

The last full triennial valuation was carried out as at 31 March 2022 and the pension scheme is now in surplus.

As a result of the agreements that exist between St Leger Homes and CDC, a pension related guarantee from CDC to cover all related pension costs exists.

For defined benefit schemes the amounts charged to the profit are the current service costs and gains and losses on settlements and curtailments. They are included as part of staff costs. Past service costs are recognised immediately in the profit and loss account if the benefits have vested. If the benefits have not vested immediately, the costs are recognised over the period until vesting occurs.

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

Post-retirement Benefits (continued)

The interest cost and expected return on investments are shown as a net amount of other finance costs or credits adjacent to interest. Actuarial gains and losses are recognised immediately in the statement of total recognised gains and losses.

Judgements in applying accounting policies and key sources of estimation uncertainty.

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported for assets and liabilities as at the balance sheet date and the amounts reported for revenues and expenses during the year. However, the nature of estimation means that actual outcomes could differ from those estimates. The following judgements (apart from those involving estimates) have had the most significant effect on amounts recognised in the financial statements.

Going Concern

The accounts have been prepared on a going concern basis.

The pension scheme in the Statement of Financial Position for St Leger shows an overall surplus, comprising a pension asset and positive revenue reserves at 31 March 2023. The position at 31 March 2022 was an overall negative position with a pension liability and negative revenue reserves. The accounting treatment does not impact on the day to day operations of St Leger Homes and the accounts have been prepared on a going concern basis since the Directors believe the company will continue to operate for the foreseeable future.

Provisions for bad debts

Provision is made against debts to the extent that they are considered potentially irrecoverable. Debtor balances are reviewed individually for recoverability.

Provisions for liabilities

FRS 102 requires that a liability is recognised to the extent of any unused holiday pay entitlement which has accrued at the balance sheet date and carried forward to future periods and that this is measured at the undiscounted salary cost of the future holiday entitlement so accrued at the balance sheet date. No accrual has been made for holiday pay on the grounds of materiality. This area is reviewed on an annual basis.

Pension liability

The critical underlying assumptions in relation to the estimate of the pension defined benefit scheme obligation such as standard rates of inflation, property valuations, mortality, discount rate and anticipated future salary increases. Variations in these assumptions have the ability to significantly influence the value of the asset or liability recorded and annual defined benefit expense.

There is evidence from the external management expert that part of the pension asset at March 2023 is recoverable, and this has been recognised in the Statement of Financial Position.

Operating Leases

Operating lease rentals are charged to the profit and loss account on a straight line basis over the period of the lease.

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

Taxation

The charge for taxation is based on the result for the year and takes into account taxation deferred because of timing differences between the treatment of certain items for taxation and accounting purposes. Except where otherwise required, full provision is made, without discounting, for all timing differences which have arisen but not reversed at the balance sheet date except as required by FRS 102 Section 29.

Cash

Cash, for the purpose of the statement of cash flows, comprises cash in hand and deposits repayable within three months, less overdrafts payable on demand.

Inventories

Stock is stated at the estimated selling price less cost to sell. WIP is attributable to finished goods that include labour, materials and direct/indirect overheads.

2. Analysis of turnover

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
By Activity		
Housing and support services	22,567	21,589
Repairs and technical services	31,642	26,863
	<hr/> 54,209	<hr/> 48,452

3. Profit/Loss on ordinary activities before taxation

Turnover and profit/loss on ordinary activities all arose in the United Kingdom and are attributable to the principal activity of the business.

Profit/loss and profit/loss on activities before taxation is stated after charging:

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Auditors' Remuneration	22	19
Internal Audit	30	28
Staff Costs (see note 4)	28,579	25,951
Operating lease rentals		
- Buildings (see note 13)	133	67
	<hr/> 133	<hr/> 67

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

4. Staff numbers and costs

The average monthly number of whole time equivalent (WTE) employees was:

	Year Ended 31 March 2023	Year Ended 31 March 2022
	No. of employees	No. of employees
Housing and support services	318	313
Repair and technical services	430	422
Directors	4	4
	752	739

Their aggregate remuneration comprised:

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Wages and salaries	23,356	21,472
Social Security costs	2,298	1,976
Pension Contributions	2,925	2,503
	28,579	25,951

Aggregate number of full time equivalent staff whose remuneration (including compensation for loss of office) exceeded £50,000 in the period:

	Year Ended 31 March 2023	Year Ended 31 March 2022
	No. of employees	No. of employees
£50,001 to £60,000	11.0	8.0
£60,001 to £70,000	11.0	8.0
£70,001 to £80,000	1.0	0.0
£90,001 to £100,000	3.0	2.0
£130,001 to £140,000	1.0	1.0

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

5. Remuneration of Directors

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Members of the Board of Directors		
Directors' emoluments	25	24
None of the Directors are members of the defined benefit pension scheme	0	0
Members of the Executive Management Team		
The Executive Management Team, including the Chief Executive Officer, received emoluments as follows:		
Aggregate emoluments (wages and salary) payable to the Executive Management Team. (Including pension contributions. No benefits in kind were received.)	490	477
	<hr/>	<hr/>
	No. of Board Members	No. of Board Members
£1,001 to £2,000	2	-
£2,001 to £3,000	4	5
£3,001 to £4,000	1	1
£9,001 to £10,000	1	1

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

6. Taxation

Analysis of charge in period

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
UK Corporation Tax	0	0

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
(Loss) on ordinary activities before tax	(6,827)	(6,846)
Specific activities within the scope of corporation tax	572	444
Total current tax charge	0	0

The tax liability for 2022/23 is £Nil (2021/22 £Nil). St Leger Homes provides a number of services that fall within the scope of corporation tax, but the cost of providing these specific activities exceeds the income generated.

7. Inventories

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Work in Progress	1,345	1,216
Stock	1,040	869
	2,385	2,085

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

8. Debtors

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Amounts owed by group undertakings	2,410	2,507
Trade Debtors	67	48
Other tax and social security	982	1,098
Prepayments and accrued income	472	274
	<u>3,931</u>	<u>3,927</u>

9. Creditors: amounts falling due within one year

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Amounts owed to group undertakings	3,516	5,269
Trade creditors	320	0
Accruals and deferred income	2,488	3,200
	<u>6,324</u>	<u>8,469</u>

10. Provisions for liabilities and charges

	Year ended 31 March 2023	Year ended 31 March 2022
	£000	£000
On-going cases	<u>(70)</u>	<u>(70)</u>
	<u>(70)</u>	<u>(70)</u>

11. Called up share capital

The Company is limited by guarantee and does not have any called-up share capital.

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

12. Financial Commitments

The payments which the company is committed to make in the next year and beyond under operating leases are as follows:

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Land and Building leases expiring:		
In one year	133	67
In 2 to 5 years	133	0
In more than 5 years	0	0
	<hr/>	<hr/>
	266	67
	<hr/>	<hr/>

13. Pension scheme

The Company participates in the South Yorkshire Pension Authority (Local Government) Pension Fund. The pension contributions payable by the Company to the scheme amounted to £3.6m.

There were no outstanding or prepaid contributions at either the beginning or end of the financial year.

The pension scheme provides benefits based on pay, contributions being charged to the profit and loss account so as to spread the cost of pensions over employees' working lives in the Company. The contributions are determined by a qualified actuary.

The pension fund and actuaries will keep the level of employers' contributions under review to allow the fund to balance in the medium term. It has been agreed that an employer rate of 10.2% of pensionable pay will apply in the 2023/24 financial year.

The most recent published valuation was at 31 March 2022. This valuation was for the entire South Yorkshire Pension Authority (Local Government) pension fund. The applicable financial assumptions underlying the 31 March 2022 valuation were:

	Year Ended 31 March 2023	Year Ended 31 March 2022
Current rate of employers' contributions	16.0%	16.0%

The current mortality assumptions include sufficient allowance for future improvements in mortality rates. The assumed life expectations on retirement age 65 are:

Demographic assumptions – life expectancy	Year Ended 31 March 2023	Year Ended 31 March 2022
Current Pensioners - Male	20.5 years	22.6 years
Current Pensioners – Female	23.7 years	25.4 years
Future Pensioners - Male	21.5 years	24.1 years
Future Pensioners – Female	25.2 years	27.3 years

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

Actuarial Assumptions

	31 March 2023		31 March 2022	
Rate of increase in salaries	3.55%		4.20%	
Rate of increase of pensions in payment	2.95%		3.20%	
Discount rate	4.75%		2.70%	
Rate of inflation	3.00%		3.20%	
Value of assets	£000	%	£000	%
Equities	75.63	45.2	79,430	46.6
Bonds	27.98	16.7	30,620	18.0
Property	14.18	8.5	14,600	8.6
Cash	1.60	1.0	1,900	1.1
Other	48.04	28.7	43,920	25.8
Total market value of assets	<u>167,433</u>		<u>170,470</u>	
Actuarial value of liability	<u>(143,471)</u>		<u>(213,392)</u>	
Net pension Asset/(Liability)	<u>23,962</u>		<u>(42,922)</u>	

Defined Benefit Obligation

	Year ended 31 March 2023	Year ended 31 March 2022
	£000	£000
Opening Benefit Obligation	213,392	213,213
Current service cost	8,514	8,061
Interest Cost	5,852	4,546
Contributions by Members	1,538	1,337
Actuarial (Gain) on Liabilities	(82,788)	(11,187)
Impact of Losses settlements and curtailments	0	0
Unfunded benefits paid	(4)	0
Benefits/transfers Paid	<u>(3,033)</u>	<u>(2,578)</u>
Closing Benefit Obligation	<u>143,471</u>	<u>213,392</u>

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

Fair value of employer assets

	Year ended 31 March 2023	Year ended 31 March 2022
	£000	£000
Opening Fair Value of Employer Assets	170,470	154,420
Expected Return on Assets	4,623	3,254
Contributions by Members	1,538	1,337
Contributions by Employer	2,920	2,503
Contribution to unfunded benefits paid	0	4
Administration expenses	0	0
Actuarial Gain on Assets	(9,085)	11,530
Benefits/transfers Paid	(3,033)	(2,578)
Closing Fair Value of Employer Assets	<u>167,433</u>	<u>170,470</u>

Movements in surplus/(deficit) during the year

	Year ended 31 March 2023	Year ended 31 March 2022
	£000	£000
Opening Deficit in the Scheme	(42,922)	(58,793)
Movement in year:		
Current service cost	(8,514)	(8,061)
Employer Contributions	2,920	2,503
Contribution to unfunded benefits paid	4	4
Impact of settlements and curtailments	0	0
Net returns on (interest cost)	(1,229)	(1,292)
Actuarial gain	73,703	22,717
Surplus/(Deficit) in scheme at end of year	<u>23,962</u>	<u>(42,922)</u>
Pension surplus not recognised	(2,378)	0
Recognised Surplus/(Deficit) in scheme at end of year	<u>21,584</u>	<u>(42,922)</u>

The plan has a gross surplus at the reporting date of £23.962m. St. Leger Homes has recognised an asset to the Statement of Financial Position to the extent that it is able to recover the surplus either through reduced contributions in the future or through refunds from the plan. The plan surplus (asset ceiling) has been calculated by the scheme actuary to be £21.584m and a surplus of £2.378m has not been recognised in the balance sheet as a result.

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

Amounts charged to profit/(loss)	Year ended 31 March 2023	Year ended 31 March 2022
	£000	£000
Current service cost	8,514	8,061
Impact of settlement and curtailments	0	0
Total charge	8,514	8,061

14. Analysis of net funds

Cash at bank and in hand	Year ended 31 March 2023	Year ended 31 March 2022
	£000	£000
At the beginning of the year	2,527	1,260
Cash flow	(2,449)	1,267
At end of the year	78	2,527

15. Related Party Transactions

Details as to the status of the Company and composition of the Board of Directors is given in the Directors' Report. The ultimate controlling party is CDC.

Total Company turnover in 2022/23 was £54.2m including £35.6m from CDC in management fees and £10.4m relating to capital works. Service level agreements amounted to £5.7m.

	Year Ended 31 March 2023	Year Ended 31 March 2022
	£000	£000
Debtors (monies owed by CDC)	3,747	3,723
Creditors (monies owed to CDC)	3,516	5,269

St Leger Homes of Doncaster Limited

Notes (forming part of the financial statements-continued)

16. Contingent Liabilities

The Company had no contingent liabilities at 31 March 2023 (2022: £Nil).

17. Ultimate controlling body

The Company is a subsidiary undertaking of City of Doncaster Council, a local government organisation.



AUDIT MANAGEMENT LETTER

Year ending 31 March 2023

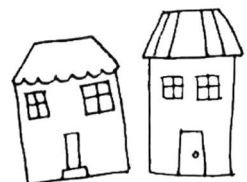
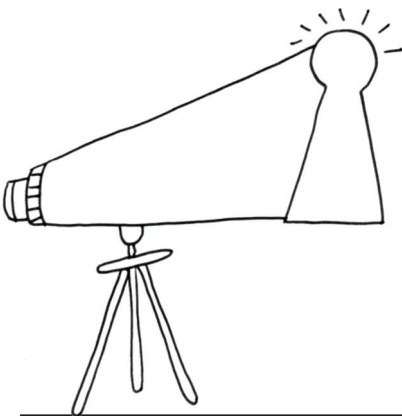


CHARTERED ACCOUNTANTS
AND BUSINESS ADVISORS



CONTENTS

Introduction.....	1
Key Audit Areas.....	2 - 5
Overview of Financial Statements.....	6 - 7
Independence.....	8
Qualitative Aspects of Accounting Practices and Financial Reporting.....	9 - 10
Management Representation Letters and Audit Opinion	11
Materiality and audit findings.....	12 - 13
Accounting and Internal Control Systems	14



INTRODUCTION

Our audit of the financial statements of St Leger Homes of Doncaster is substantially complete. The purpose of this letter is to bring to your attention the findings from our audit.

In order to comply with the provisions of the International Standard on Auditing (ISA) 260 – ‘Communication with those Charged with Governance’ we report to management on the findings of our audit, with particular reference to:

- views about the qualitative aspects of the Company’s accounting practices and financial reporting;
- adjusted and unadjusted misstatements, apart from those which fall below the threshold for reporting to the Audit and Risk Committee ((the ‘Committee’) as they are clearly trivial;
- matters specifically required by other Auditing Standards to be communicated to those charged with governance (such as fraud and error);
- expected modifications to the auditor’s report;
- the letters of representation;
- significant deficiencies in the accounting and internal control systems; and
- any other relevant and material matters relating to the audit.

We also take this opportunity to comment on the Company’s performance for the year and to confirm our professional integrity, objectivity and independence.

We see effective communication with the the Committee as being a key part of our audit, and it is important that there is effective two way communication. We welcome any feedback or questions regarding the conduct of the audit process.

This report is not intended to cover every matter which came to our attention during the audit. We do not accept any responsibility for any reliance placed on it by third parties. Our procedures are designed to support our audit opinion and cannot be relied upon to identify any weakness in systems or controls which may exist.

We would like to take this opportunity to formally record our appreciation for the assistance and co-operation provided to us by the Finance Team which assisted us during the course of our audit.

Beever and Struthers

Date:

KEY AUDIT AREAS

The following table summarises the key audit issues we identified as requiring specific consideration and the audit procedures we undertook in relation to them.

Audit Issue per Audit Plan Overview (presented in March 2023)	Audit Procedures and Results
<p>Assessment of Fraud Risk</p> <p>ISA 240 “The Auditor’s responsibility to consider fraud” requires us to consider the risk of fraud and the impact that this has on our audit approach. In addition, ISA 700 “Forming an Opinion and Reporting on Financial Statements”, means auditors are required to explain in the auditor’s report to what extent the audit was considered capable of detecting irregularities, including fraud. There is a presumed significant risk of fraud in two areas:</p> <p>Revenue Recognition <i>(Management Fee – Other audit risk)</i> <i>(Other income – significant risk)</i></p> <p>Material misstatements due to fraudulent reporting often result from an overstatement of revenues, for example through premature revenue recognition or recording fictitious revenues. The auditor therefore presumes that there are risks of fraud in revenue recognition and considers which types of revenue may give rise to fraud risks.</p> <p>For the Company the main income stream is a management fee from the Council. We therefore have initially assessed the risk of fraud in the recognition of management as low and expect to rebut the assumption that this area is a significant risk.</p> <p>Management Override (Significant Risk)</p> <p>Under ISA 240 there is a presumed risk of management override of the system of internal controls.</p> <p>Material misstatements can arise from management overriding the controls which are in place or by manipulating the results to achieve targets and the expectations of the stakeholders.</p>	<p>Revenue Recognition</p> <p>Our audit is designed to provide reasonable assurance that the accounts are free from material misstatement whether caused by fraud or error. In particular we reviewed revenue recognition and management control override.</p> <p>As part of the audit planning:</p> <ul style="list-style-type: none">• We met management to discuss fraud related risks and the risk of material misstatement in the financial statements; and• We reviewed the fraud register. <p>During the audit fieldwork, we assessed and tested the management fee from the Council and other material sources of income. We also performed analytical review on the material income streams and tested the cut-off on the other income.</p> <p>We are awaiting some evidence to complete our testing but at the time of reporting the audit work has not highlighted any errors in relation to revenue recognition.</p> <p>Management Override</p> <p>As part of our year-end audit work we used data analytics in our review of manual journals posted in the year and reviewed material year end journals.</p> <p>Our review of key estimates and judgements in the financial statements indicated that they had been made on a reasonable basis and showed no evidence of management bias.</p> <p>The journals testing is currently ongoing.</p>

KEY AUDIT AREAS

Audit Issue per Audit Plan Overview (presented in March 2023)	Audit Procedures and Results
<p>Key judgements and Estimates (Other audit risk)</p> <p>The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the going-concern disclosure and amounts reported for assets and liabilities at the year-end and the amounts reported for revenues and expenses during the year. Given its nature, this area is a key audit focus.</p> <p>ISA 540 “Auditing Accounting Estimates and Related Disclosures” also places additional emphasis on scepticism in the audit process, with its importance increasing when accounting estimates are subject to a greater degree of estimation uncertainty or are affected to a greater degree by complexity, subjectivity, or other inherent risk factors.</p>	<p>Our work has been designed to assess whether the key judgements and estimates were made appropriately in line with our knowledge of the Company and the industry, and were disclosed satisfactorily in the Financial Statements.</p> <p>This area of work includes testing across a number of the key audit and our work to date has not identified evidence of management bias.</p> <p>The main material estimate which is included in management’s critical judgements relates to the valuation of the scheme assets in the South Yorkshire Pension Fund. Our working is ongoing and further details are provided on the following page.</p>

KEY AUDIT AREAS

Audit Issue per Audit Plan Overview (presented in March 2023)	Audit Procedures and Results
<p>Valuation of the Defined Benefit pension liability (Significant risk)</p> <p>The Company participates in the South Yorkshire defined benefit Local Government Pension scheme (LGPS). As at 31 March 2022 the LGPS defined benefit pension liability was £49,922K (2021: £58,793K).</p> <p>Accounting for defined benefit pension schemes involves significant estimation and judgements. Management engages actuaries to undertake calculations on their behalf. The actuaries of the schemes will value the pension liabilities for Section 28 of FRS 102 purposes, and these will be included in the financial statements at 31 March 2023.</p> <p>ISAs 500 and 540 require us to undertake procedures on the use of management experts and the assumptions underlying the fair value estimates</p>	<p>In our previous updated we confirmed that have completed some procedures which included reviewing the disclosures included within the financial statements were appropriate and in line with the actuarial report, which reported that scheme position has improved from a liability of £42,922K in 21/22 to an asset position of £30,684K in 22/23. However, this area of work was not finalised as additional work was still required to consider the accounting treatment for the pension asset.</p> <p>Management have now received a further report from the actuary which now reports the asset at £23,962K, which fully reflects the position for the whole of 2022/23.</p> <p>The reasons for the increase are due to a fall in the liabilities of £69,921K due to gains in the actuarial financial assumptions and an increase in the value of scheme assets of £3,037K. The basis of the improvement from a liability in the prior year to an asset this year is primarily due to high UK corporate bond yields result in high accounting discount rates which place a significantly lower value on the pension obligations compared to 2021/22.</p> <p>The accounting treatment of the pension asset is set out in Financial Reporting Standard (FRS) 102 (para 28.22) which permits an 'entity shall recognise a plan surplus as a defined benefit plan asset only to the extent that it is able to recover the surplus either through reduced contributions in the future or through refunds from the plan'. Management has assessed the recoverability of the asset through obtaining further information from the Management Expert and concluded that £2,378K is not recoverable and the asset to be disclosed on the Statement of Financial Position as £21,584K.</p> <p>During the audit we have completed the following work:</p> <ul style="list-style-type: none"> discussed the process and arrangements for obtaining the Section 28 of FRS 102 valuations from the schemes' actuaries, including the instructions given to the actuaries; agreed the LGPS adjustments to the financial statements; reviewed the LGPS information provided by the actuaries to the Group and considered the disclosure implications; reviewed the LGPS actuarial valuations and the assumptions made by the actuaries to ensure

KEY AUDIT AREAS

Audit Issue per Audit Plan Overview (presented in March 2023)	Audit Procedures and Results
	<p>the assumptions are consistent with those used in 2021/22, or that any changes are understood and are reasonable;</p> <ul style="list-style-type: none">• reviewed the accuracy of the LGPS journal processed at the year-end;• reviewed the disclosures and the notes to the accounts at the final audit visit to ensure they comply with Section 28 of FRS 102;• testing on the split of assets between the Group and the other employers in the multi-employer schemes. <p>Our work in this area is not finalised as further work to assess the adequacy of the information in the management expert's asset ceiling report needs to be completed.</p> <p>We do not anticipate this will create any issues with your deadlines.</p>

KEY AUDIT AREAS

Audit Issue per Audit Plan Overview (presented in March 2023)	Audit Procedures and Results
<p>Going-concern (Other Audit risk)</p> <p>Under the going concern assumption, a Company is viewed as continuing in business for the foreseeable future. Accounting requirements indicate that any material uncertainties about the appropriateness of the going concern assumption are disclosed adequately in the financial statements.</p> <p>The current economic and political climate continues to be challenging. Our assessment of the Company as going concern needs to take into account the position for the 12 month period from the date the Auditor Report is issued.</p> <p>At the Planning meeting on 6 February 2023, the Director of Corporate Resources and Head of Finance and Business Assurance confirmed that it is unlikely that a signed management fee agreement with Doncaster Council will be in place covering 2024/25 would be in place at the time the Board signed the accounts in July 2023.</p>	<p>We have reviewed the directors' assessment of the going concern assumption and are content that this is an appropriate basis on which to prepare the financial statements.</p> <p>Management have advised that there is a management agreement up to 31 March 2024 but not covering the following financial year. The proposal at this stage is agree a new 5 year extension. Which will be ratified by Doncaster Council's Cabinet on 16 August 2023.</p> <p>Therefore, our work on the going-concern of the Company cannot be finalised until the Cabinet decision is in the public domain.</p>

OVERVIEW OF FINANCIAL STATEMENTS

STATEMENT OF COMPREHENSIVE INCOME

	2023 £'000	2022 £'000		
Turnover	54,209	48,452	➤➤	Turnover has increased by £5.7M on 21/22. The initial HRA/GF management fund was £36.29M which was an increase of £2.1M on the prior year. During the year the company has received additional support of £2.5M from the Council. For the HRA, £1.15M was received to support manage inflationary pressures on general inflationary pressures and also the pay award which was 7% compared to the budget of 2%. A further £1.35M was received for capital income for a 15% increase in for schedule of rates. Other income has increased £1.3M which includes £294K for the Rough Sleeper initiative.
Cost of Sales	(53,137)	(47,429)	➤➤	Cost of sales has increased by £5.7M on the prior year. The main increases relate to inflationary pressures in key areas of the business which include staff costs through the pay award and new posts, together with price increases in utility charges and supplies and services.
Administrative expenses	(6,662)	(6,577)	➤➤	Only a £85K increase on the prior year.
Interest payable	(1,229)	(1,292)	➤➤	Only a £63K reduction which relates to the Pension interest as confirmed in the Local Government Scheme Actuarial Report.
(Loss)/Profit on Ordinary activities	(6,819)	(6,846)		
Pension Actuarial gain/(loss)	71,325	22,717	➤➤	In 21/22 the liability position on the pension had reduced to £15,871K due to actuarial gains. However, further actuarial gains in 22/23 has now moved the pension in to an asset position. This consistent with the Local Government Scheme Actuarial Report. See pages 4 and 5 for further details.
Total comprehensive Income	64,506	15,871		

OVERVIEW OF FINANCIAL STATEMENTS

STATEMENT OF FINANCIAL POSITION

	2023 £'000	2022 £'000		
Fixed assets	0	0	➤➤	The company have made no additions in fixed assets which is in line with expectations.
Current assets	6,394	8,539	➤➤	Current assets comprise debtors, stock, and cash. Overall levels of current assets have decreased by £2.1M compared to the prior year. The main change is a reduction in cash and cash equivalents of £2.4M. This is off-set with an increase of £300K in inventory.
Creditors: amounts falling due within one year	(6,324)	(8,469)	➤➤	Creditors less than one year have decreased by £2.1M. Several categories have reduced on 2021 but the two main changes are a reductions in accruals and deferred income of £712K and amounts owed to the Council of £1.8M. Trade creditors have increased by £320K.
Provisions	(70)	(70)	➤➤	The provision relates to potential costs to rectify dilapidations in relation to St Leger Court and St Leger House. The position remains unchanged as the Council have not finalised whether the company are liable for any works.
Pension	21,584	(42,922)	➤➤	The scheme position has improved from a liability of £42.92M in 21/22 to an asset position of £30.68M in 22/23. Whilst this is in line with the LGPS Actuarial Report our work is ongoing as this will only be recognised if there is evidence to support its recoverability.
Capital and reserves	21,584	42,922	➤➤	

INDEPENDENCE

Ethics and Independence

In the UK and Ireland, auditors are subject to the ethical requirements of the Financial Reporting Council's 2019 Revised Ethical Standard for Auditors.

International Standard on Auditing (ISA) 260 – Communication with those Charged with Governance and good practice require us to confirm the following to those charged with governance:

- Details of all relationships between the auditor and the client.
- Total fees charged for the provision of other services.
- Related safeguards in place to eliminate identified threats to independence.
- Confirmation that the auditor complies with Ethical Standards.

The Audit and Risk Committee should take an active role in considering whether the external auditor's independence might be impaired by the provision of non-audit services.

Non-Audit Services

We have not provided any non-audit services in either the previous financial year or current financial year.

Independence Declaration

We confirm that:

- We are not aware of any personal or professional relationships between Beever and Struthers and the Company.
- We have not undertaken any non-audit services for the Company in the year.
- We therefore conclude that we comply with Ethical Standards and in our opinion the firm is independent within the meaning of regulatory and professional requirements and the objectivity of the engagement partner and the audit staff is not impaired.

We have reviewed our independence and confirm that, in our professional judgement, this firm is independent within the meaning of regulatory and professional requirements and the objectivity of the audit engagement Director, Richard Graham, and the audit staff is not impaired.

QUALITATIVE ASPECTS OF ACCOUNTING PRACTICES AND FINANCIAL REPORTING

Accounting Policies

FRS 102 requires that entities should review their accounting policies regularly to ensure that they are appropriate to its particular circumstances for the purposes of giving a true and fair view. The Company's Audit Committee plays a key role in this process.

We have reviewed the Company's accounting policies and key judgement areas as stated in the financial statements in detail and confirm that we judge them to be appropriate to provide relevant, reliable, comparable and understandable information.

Accounting Estimates

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the amounts reported for assets and liabilities at the year-end and the amounts reported for revenues and expenses during the year.

ISA 540 "Auditing Accounting Estimates and Related Disclosures" also places additional emphasis on scepticism in the audit process, with its importance increasing when accounting estimates are subject to a greater degree of estimation uncertainty or are affected to a greater degree by complexity, subjectivity, or other inherent risk factors.

Key accounting estimates and judgements in the financial statements include:

- valuation of the pension fund scheme assets;
- Accruals
- Provisions for liabilities
- Provision for doubtful debts

We confirm that these estimates have been made appropriately in line with our knowledge of the Company and the industry and are disclosed satisfactorily in the financial statements.

Financial Statement Disclosures

We confirm that we judge the disclosures throughout the financial statements to be neutral, consistent and provide sufficient clarity to the user.

QUALITATIVE ASPECTS OF ACCOUNTING PRACTICES AND FINANCIAL REPORTING

Significant Matters Arising from the Audit

There were no significant matters arising from the audit that were discussed, or subject to correspondence with management.

Significant Difficulties Encountered During the Audit

There were no significant difficulties encountered during the audit.

Timing of Transactions

Our audit work confirmed that material transactions were recorded in the correct accounting periods.

Going Concern

This work has yet to be finalised but we acknowledge that the financial statements have been prepared on a going concern basis.

Strategic Report and Report of the Directors

We have yet to review the Strategic Report and Report of the Board of the Directors as the draft accounts presented for audit did not contain the update for 2022/23. We will review this disclosure when we receive the updated financial statements.

MANAGEMENT REPRESENTATION LETTERS AND AUDIT OPINION

Management Representation Letter

In accordance with ISA 580, we obtain written representation from management that they acknowledge their responsibility for preparing the accounts and have made all information available to us.

We will present our management representation letter for signing at the same time as the financial statements.

There are no specific matters on which we have requested Board representation to support the conclusions and evidence provided for our audit opinion..

Audit Opinion

We expect to provide an unqualified audit opinion on the financial statements for the Company for the year ended 31 March 2023.

We require the following to complete our work;

1. Finalisation of the Journals sample
2. the going-concern assessment including review of business plans and cash flow forecasts
3. Pensions – assess the additional work of the management expert
4. Cash and bank – awaiting confirmation letter from the bank
5. Review the completed IT General controls questionnaire *
6. Finalisation procedures including the subsequent events, review of the strategic report, and final checks to the statements for approval.

* delays due to management awaiting responses from Doncaster Council

MATERIALITY AND AUDIT FINDINGS

Materiality

Our audit work is based upon an assessment of materiality to ensure there is no material misstatement contained in the financial statements. In assessing materiality we take into account both the materiality of the class to which the balance belongs and the overall impact of the balance on the income and expenditure account and balance sheet.

ISA 260 requires us to report to management on all uncorrected misstatements identified during the audit, and to include in this report how we have calculated materiality, and any misstatements identified during the audit which have been corrected.

Materiality may be revised throughout the course of the audit, where we become aware of information during the audit that would have resulted in a different determination of materiality at the outset. There were no adjustments identified during the audit which impacted our initial assessment.

We are not required to report on corrected or uncorrected misstatements we believe are clearly trivial. Triviality is the value above which we report errors to you. A summary of the final assessment of materiality is as follows:

Entity	Method of calculation	Materiality £000	Triviality £000
St Leger Homes	3% of turnover	1,626	81

MATERIALITY AND AUDIT FINDINGS

Corrected Misstatements

The financial statements presented for audit were of high quality compliant with FRS 102, SORP 2018 and the Accounting Direction 2022 (where applicable).

Audit adjustments

At the time of writing we have no identified any audit adjustments for the financial statements.

Uncorrected Misstatements

We have not identified any uncorrected misstatements.

ACCOUNTING AND INTERNAL CONTROL SYSTEMS

ISA 265 requires that we report to those charged with governance any significant deficiencies in internal control that we identify in the course of our audit work. Significant deficiencies are those deficiencies that we have identified during the audit and concluded are of sufficient importance to merit being communicated to those charged with governance.

The audit considered internal controls relevant to the preparation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of internal control.

We are pleased to report that overall we found that the Company's systems and internal financial controls were operating effectively. There were no significant deficiencies identified as a result of our work.

However, we wish to your attention to a minor finding which has arisen from our work on payroll. The payroll is provided by Doncaster Council and our review of the processes and key controls in the processing of the payroll identified that there was no audit trail to confirm who at St Leger Homes had;

1. approved the monthly payroll processed by the Council; and
2. reviewed the monthly payroll exception report

Management has advised that there are rigorous checks for the processing of payroll and we recommend that there is documented evidence that the checks have been undertaken in the form of signature of the persons completing the checks and the date it was done.

IT general control environment

One of the International Standards on Auditing, ISA 315 Identifying and Assessing the Risks of Material Misstatement has been updated and applies to the Company for the first time this year. The standard has significantly enhanced auditors' approach to understanding entities, their environment and risk assessment activities to promote a more consistent and robust risk assessment process. Although auditors were previously required to consider IT controls, the revised ISA includes further considerations in relation to understanding the IT environment and IT general controls.

In conjunction with management we have undertaken a review of the IT arrangements for the Company. This work is not complete as we are yet to receive the completed IT General Controls questionnaire.



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HLB WE ARE AN INDEPENDENT MEMBER OF
THE GLOBAL ADVISORY
AND ACCOUNTING NETWORK

Pareto
ALL MATTERS FINANCIAL

Beever and Struthers
Chartered Accountants
One Express
1 George Leigh Street
Manchester
M4 5DL

Date:

Dear Sirs

This representation letter is provided in connection with your audit of the financial statements of St Leger Homes of Doncaster Limited ("the Company") for the year ended 31 March 2023 for the purpose of expressing an opinion as to whether the financial statements give a true and fair view of the results and financial position of the Company in accordance with The Companies Act 2006 and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

We confirm, to the best of our knowledge and belief the following representations:

1. We are responsible for the preparation of financial statements in accordance with The Companies Act 2006 and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice), which give a true and fair view of the financial position of the company as of 31 March 2023 and of the results of its operations and its cash flows for the year then ended and for making accurate representations to you.
2. Significant assumptions used by us in making accounting estimates, including those measured at fair value, are reasonable.
3. We have no plans or intentions that may materially alter the carrying value and where relevant the fair value measurements or classification of assets and liabilities reflected in the financial statements.
4. We have disclosed all known actual or possible litigation and claims whose effects should be considered when preparing the financial statements and these have been disclosed in accordance with the requirements of accounting standards.
5. Related party relationships and transactions have been appropriately accounted for and disclosed in accordance with the requirements of accounting standards.
6. All events since the balance sheet date which require disclosure or which would materially affect the amounts in the financial statements have been adjusted or disclosed in the financial statements.
7. We confirm that the financial statements are free of material misstatements, including omissions. We believe that any uncorrected misstatements identified during the audit are immaterial both individually and in aggregate to the financial statements as a whole.
8. We confirm that, having considered our expectations and intentions for the next twelve months, and the availability of working capital, the company is a going concern. We confirm that the disclosures in the accounting policies are an accurate reflection of the reasons for our consideration that the financial statements should be drawn up on a going concern basis.

9. All accounting records and relevant information have been made available to you for the purpose of your audit. We have provided to you all other information requested and given unrestricted access to persons within the entity from whom you have deemed it necessary to obtain audit evidence / request information. All other records and related information including minutes of all management and shareholders' meetings have been made available to you.
10. All transactions undertaken by the company have been properly reflected in the accounting records and are reflected in the financial statements.
11. We acknowledge our responsibility for the design, implementation and maintenance of controls to prevent and detect fraud. We have disclosed to you the results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud.
12. We have disclosed to you all information in relation to fraud or suspected fraud that we are aware of and that affects the entity and involves management or employees who have significant roles in internal control, or others, where fraud could have a material effect on the financial statements.
13. We have disclosed to you all information in relation to allegations of fraud, or suspected fraud affecting the entity's financial statements communicated by employees, former employees, analysts, regulators or others.
14. We confirm that we are not aware of any possible or actual instance of non-compliance with those laws and regulations which provide a legal framework within which the company conducts its business and which could affect the financial statements. The company has complied with all aspects of contractual agreements that could have a material effect on the financial statements in the event of non-compliance.
15. We confirm that we have disclosed to you the identity of the company's related parties and all related party relationships and transactions relevant to the Company that we are aware of.
16. The company has satisfactory title to all assets, and there are no liens or encumbrances on the assets except for those disclosed in the financial statements.
17. There are no liabilities, contingent liabilities or guarantees to third parties other than those disclosed in the financial statements.
18. The Company has at no time during the year entered into any arrangement, transaction or agreement to provide credit facilities (including loans, quasi loans or credit transactions) for directors, nor to guarantee or provide security for such matters, except as disclosed in the financial statements.
19. We consider that the pension asset position meets the criteria for recognition under FRS 102 and have provided to you all the information, including details from the scheme actuary, to support the accounting treatment to recognise the recoverable element of the pension asset on the Statement of Financial Position and that the appropriate disclosures have been made.

We confirm to the best of our knowledge and belief that the above representations are made on the basis of enquiries of management and staff with relevant knowledge and experience and, where appropriate, of inspection of supporting documentation sufficient to satisfy ourselves that we can properly make each of the above representations to you.

We acknowledge our legal responsibilities regarding disclosure of information to you as auditors and confirm that so far as we are aware, there is no relevant audit information needed by you in connection with preparing your audit report of which you are unaware. Each director has taken all the steps that they ought to have taken as a director in order to make themselves aware of any relevant audit information and to establish that you are aware of that information.

Yours faithfully

Signed on behalf of the Board of Directors by:

.....(Signature)

.....(Director)

.....(Date)

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

St Leger Homes of Doncaster Board Meeting

Date : 03 August 2023

Item : 06

Subject : Health and Safety Policy Review

Presented by : Chris Margrave
Director of Property Services

Prepared by : Laura Dougan
Health, Safety and Compliance
Service Manager

Purpose : To seek approval from EMT for the reviewed Health and Safety Policy.

Recommendation :

Members of Board are asked to approve the reviewed Health and Safety Policy attached to this document

Company Number 05564649
A Company Limited by Guarantee
Registered in England

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

**Agenda Item No. 06
Date: 03 August 2023**

1 Report Title

1.1 Review of Health and Safety Policy

2 Executive Summary

2.1 St Leger Homes is required under Health and Safety legislation to have a policy in place for managing health and safety.

2.2 The health and safety policy sets out our general approach to health and safety. It explains how St Leger Homes, as an employer, will manage health and safety including roles and responsibilities.

2.3 A periodic 3 yearly review of the Health and Safety Policy has taken place. Feedback from previous British Safety Council Five Star and ISO 45001 audits have been included within the review. No fundamental changes have been identified.

3 Purpose

3.1 To seek approval from the Board of the reviewed Health and Safety Policy.

4 Recommendation

4.1 As there are no fundamental changes to the policy the Board are asked to approve the Health and Safety Policy attached to this report.

5 Background

5.2 A significant review of the Health and Safety Policy was carried out in April 2020. This was approved, at the time by Employment and People Committee.

5.3 The Health and Safety Policy was changed to reflect the requirements of ISO 45001 and with feedback from the British Safety Council Five Star Audit

5.4 Key changes in the reviewed Health and Safety Policy were –

- Links to other key documents including the legal compliance register and strategic risk register – both of these are key elements of ISO 45001 and Five Star Audit
- A leadership statement of intent that sets clear achievable commitments to our management of health and safety

- A clear framework for the management system as a whole based on 'plan-do-check-act' with examples of how we do this in the business
- Tied into this a diagram demonstrating how the management system looks to us.
- Focus on strategic roles and responsibilities

5.5 The periodic 3 yearly review of the Health and Safety Policy is due in April 2023. No significant changes have been identified. The main changes are within the statement of intent and shown in Appendix 1. They include-

- Explicit statement around providing suitable information, instruction and training
- Periodic review of the H&S management system
- Co-operation and support of all employees in the implementation of H&S arrangements.

5.6 These changes were identified in previous British Safety Council Audits and strengthen the statement of intent. The draft Health and Safety was shared at the most recent British Safety Council audit in February 2023.

5.7 A draft version of the Health and Safety Policy was also sent out for consultation with Joint Safety Committee in January 2023. Feedback from this consultation is included in the attached proposed Policy.

6 Procurement

6.1 Not applicable

7 VFM Considerations

7.1 Not applicable

8 Financial Implications

8.1 Currently there are adequate budget provisions to support the Health and Safety Policy to ensure St Leger Homes are compliant across all aspects of Health and Safety. These include a dedicated H&S and Compliance Team that has increased since 2022, training, risk assessments, H&S audits and bespoke IT software. Budgets and requirements are reviewed annually as part of the budget setting process. Any additional funding required has to be approved by EMT.

9 Legal Implications

9.1 The policy underpins compliance with the Health and Safety at Work Act etc. 1974.

10 Risks

10.1 The policy is linked to the strategic risk register and legal compliance

register. The policy supports these documents with assurances to St Leger Homes around management of health and safety in the business.

11. Health, Safety & Compliance Implication

- 11.1 This policy sets out the structure of our health and safety management system including strategic roles and responsibilities.
- 11.2 Having a robust health and safety management system in place assists St Leger Homes manage its legal and other risks to ensure we are compliant with all identified requirements.

12 IT Implications

- 12.1 Not applicable

13 Consultation

- 13.1 Consultation was carried out with Joint Safety Committee in January 2023. Feedback from this has been added to the draft policy attached.
- 13.2 The draft policy was also shared with the British Safety Council auditor in February 2023 and feedback from this has been added to the draft policy attached.

14. Diversity

- 14.1 Not applicable

15 Communication Requirements

- 15.1 Once approved the policy will be communicated out to all employees via Staff Focus. Line Managers will also be asked to ensure this is discussed at team meetings or team briefs.

16 Equality Analysis (new/revised Policies)

- 16.1 An Equality Analysis was completed, with no adverse impacts identified, when the policy was approved by Employment and People Committee in March 2020. As there are fundamental changes to the policy it is proposed that a new Equality Analysis is not required.

17 Environmental Impact

- 17.1 Not applicable

18. Report Author, Position, Contact Details

- 18.1 Laura Dougan – Health, Safety and Compliance Service Manager
Email – laura.dougan@stlegerhomes.co.uk

19. Background Papers

19.1 Appendix 1 - Health and Safety Policy



POLICY DOCUMENT

Health and Safety Policy

POLICY TITLE:	Health and Safety Policy
LEAD OFFICER:	Health, Safety and Compliance Service Manager
DATE APPROVED:	June 2023
APPROVED BY:	Employee and People Committee
IMPLEMENTATION DATE:	April 2023
DATE FOR NEXT REVIEW:	April 2026
ADDITIONAL GUIDANCE:	Health and Safety Strategy
TEAMS AFFECTED:	All St Leger Homes Employees
THIS POLICY REPLACES:	General Health and Safety Policy

Brief Policy Summary: This policy sets out the organisations approach towards managing health and safety (H&S).

Page	Version	Date	Author
Page 1 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

Document Control

Revision History

Date of this revision:	April 2023
Date of next review:	April 2026
Responsible Officer:	Health, Safety and Compliance Service Manager

Version Number	Version Date	Author/Group commenting	Summary of Changes
0.1	October 2019	Health, Safety and Compliance Service Manager	First draft of policy, replacing previous General Health and Safety Policy.
0.2	January 2020	Heads of Service, Joint Safety Committee, British Safety Council	Feedback from consultation added to policy – main comments – <ul style="list-style-type: none"> • Use of system rather than framework • Definition of Leadership Team • Including wellbeing within statement of intent • Adding communication methods
1.0	March 2020	Employment and People Committee	Policy Approved
1.1	October 2020	HSC Service Manager	New CEO signature on Statement of Intent – no change to content of policy
1.2	April 2023	Health, Safety and Compliance Manager	Periodic review of policy –no significant changes. Main changes to statement of intent include- <ul style="list-style-type: none"> • Explicit statement around providing suitable information, instruction and training • Periodic review of the H&S management system • Co-operation and support of all employees in the implementation of H&S arrangements.

Page	Version	Date	Author
Page 2 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

CONTENTS

1.	Introduction	5
2.	Purpose	5
3.	Context of the Organisation	5
4.	Scope	6
5.	Leadership Statement of Intent	7
6.	Roles and Responsibilities	8
7.	Consultation and Participation of Employees	8
8.	Health & Safety Management System	8
Appendix 1 – How our H&S Managements System Works		11
Appendix 2 – Roles and Responsibilities Matrix		12

Page	Version	Date	Author
Page 3 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

1. Introduction

- 1.1 St Leger Homes have legal duties to ensure the health and safety (H&S) at work of our employees as well as our customers and other stakeholders who may be affected by our work activities. We manage a [legal register](#) to identify the relevant pieces of legislation, approved codes of practice (ACoPs) and guidance that are relevant to the organisation and monitor our compliance with these; including the consumer standards
- 1.2 In addition to its legal responsibilities, St Leger Homes is also aware, and fully embraces, its moral duty to 'do the right thing', ensuring our employees, customers and other stakeholders are safe at work and not adversely affected by the activities we carry out.

2. Purpose

- 2.1 This Health and Safety Policy is part of the H&S Management system St Leger Homes has in place. Appendix 1 shows how our management system looks. The overall management system is there to guide and assist management teams and all employees to develop and maintain a positive H&S culture.
- 2.2 The policy will communicate the overall structure of the H&S Management System and set out our Leadership Teams commitment to H&S through our Chief Executive's statement of intent. Our Leadership Team is made up of our Executive Management Team and Heads of Service.

3. Context of the Organisation

- 3.1 St Leger Homes is an Arm's Length Management Organisation (ALMO), established in 2005 to manage Doncaster 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.
- 3.2 We have a diverse workforce, including office and trade employees, who work over an extensive geographical area covering urban and rural locations. Our employee profile includes apprentices through to experienced employees. We acknowledge that we have an aging work profile.
- 3.3 Managing housing in a post Grenfell world highlights the importance of ensuring statutory compliance but also going beyond compliance taking us to being a nationally recognised housing provider of choice.
- 3.4 External issues, such as national policy changes, and internal issues, such as the diverse workplaces of our employees, feedback from employees and recommendations from audit processes, can affect our management of H&S. St Leger Homes identify these issues by managing a [strategic](#) risk register. Managing the risk register allows St Leger Homes to identify any threats, along with opportunities to improve on management controls in place.

Page	Version	Date	Author
Page 4 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

4. Scope

- 4.1 This policy is applicable to all employees of St Leger Homes.
- 4.2 Other relevant interested parties are affected by the activities carried out by St Leger Homes and the management system covered by this policy; these include-
- Customers
 - Doncaster Council
 - Legal and regulatory bodies
 - Agency Workers
 - External providers e.g. suppliers and contractors
 - Trade Unions
- 4.3 This policy and the H&S management system covers all workplaces and activities that St Leger Homes carry out.

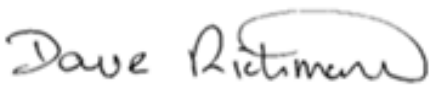
Page	Version	Date	Author
Page 5 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

5. Leadership Statement of Intent

The Leadership Team of St Leger Homes consider that health, safety and wellbeing (H&S) is one of the highest priorities within our organisation. We are committed to keeping our employees, our customers and the public safe by promoting high standards of H&S in all of our workplaces, premises, and in all of our activities. We aim to go beyond compliance demonstrating best practice and continual improvement to make us a nationally recognised housing provider of choice.

To achieve this, we will:

- Constantly work towards improving the H&S culture at all levels within the organisation, using a 'top down' and 'bottom up' approach where worker participation and feedback is encouraged and recognised.
- Ensure compliance with all relevant legal duties in respect of H&S at work legislation.
- Ensure and seek assurance through the board that suitable and sufficient Health and Safety management systems are in place.
- Align H&S within corporate objectives and set annual development and service delivery plans.
- Monitor performance on objectives set and report on these.
- Provide adequate resources to identify and evaluate risk, with the aim to eliminate hazards or reduce to an acceptable level.
- Ensure operational teams are supported in the planning, provision and maintenance of safe working conditions.
- Develop and implement a management system to support all aspects of the business ensuring that relevant documented information is available; ensuring this is periodically reviewed.
- Take action where standards fall short of our expected behaviours and values.
- Encourage reporting of incidents including near misses. Employees are encouraged to report short falls but equally to contribute good ideas and improvements.
- Provide suitable information, instruction and training to employees
- Informal involvement and participation of employees in H&S is encouraged through discussions with management teams.
- Formal involvement of employees in H&S will take place through team meetings, inspection programmes and Joint Safety Committee.
All employees will co-operate and support in the implementation H&S arrangements



Dave Richmond
Chief Executive
St Leger Homes of Doncaster Limited

Date: XXth April 2023

Page	Version	Date	Author
Page 6 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

6. Roles and Responsibilities

- 6.1 Board Member are an integral part of ensuring that and have a responsibility to
- Ensure there is a written health & safety policy.
 - Set the direction for effective health and safety management.
 - Ensure delivery of the policy, including health and safety arrangements are adequately resourced, risk assessments are carried out and employees are involved in decisions.
 - Ensure a formal review of health and safety performance takes place.
 - Ensure arrangements are in place to communicate, promote and champion health and safety
- 6.2 The Board receives regular health and safety performance information and monitors progress against the approved health and safety strategy and action plan.
- 6.3 The Leadership Team, Executive Management Team and Heads of Service, are responsible and accountable for H&S and ensuring effective systems are in place within the services they deliver. The assessment and recording of risks both strategic and operational from part of their responsibilities and accountability. Day to day decisions and work will be delegated to others in the organisation.
- 6.4 The matrix in appendix 2 sets out strategic health, safety and compliance responsibilities in the organisation. Specific operational responsibilities will be covered by other documents such as job descriptions and discussed as part of checkins.

7. Consultation and Participation of Employees

- 7.1 St Leger Homes encourages formal and informal consultation and participation of employees.
- 7.2 Formally employees are consulted through Trade Union representatives and Joint Safety Committee.
- 7.3 Employees are encouraged to participate and be actively involved in day to day decisions around their work. Risk assessments are encouraged to be collaborative with those who understand the potential hazards giving insight into these.

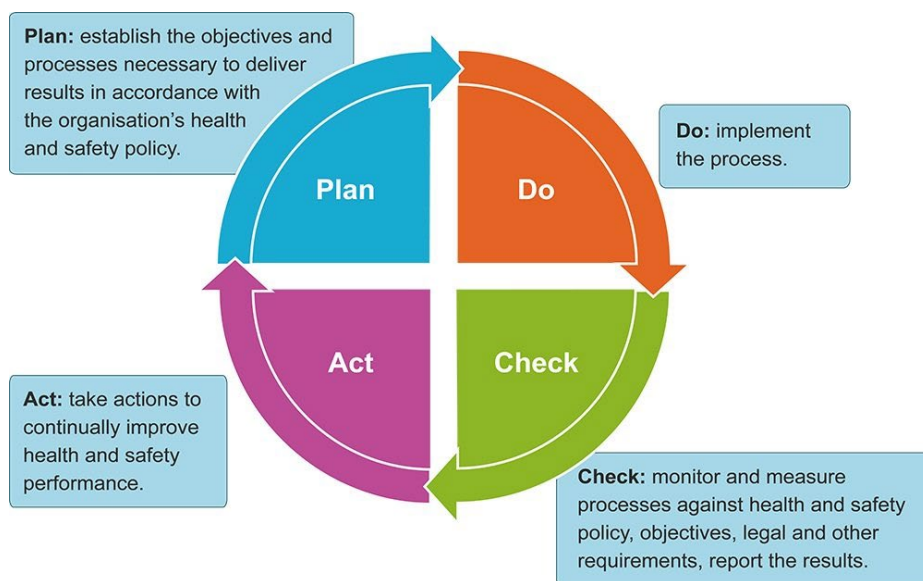
8. H&S Management System

- 8.1 The H&S management system is made up of different elements of documented information; this policy is one element as shown in appendix 1. By adopting this approach St Leger Homes has an auditable structured system in place

Page	Version	Date	Author
Page 7 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

8.2 The St Leger Homes H&S Management system adopts a 'plan-do-check-act' approach (see figure1 below).

8.3



8.4 Plan (this sets the framework for our H&S management system) –

- Set out overall commitments to managing H&S - in our H&S policy
- Set objectives for improvement – in our Corporate Plan, Annual Development Plan and Service Delivery Plans
- Determine legal and other requirements – in our legal register
- Identify risks and opportunities – in our strategic risk register
- System in place to identify hazards and assess risks – risk assessments process
- Assessment of H&S management system – audit programme
- Resources in place to deliver H&S team and the H&S management system – organisational development, financial planning
- Processes in place to deliver H&S and the H&S management system – learning and development, procedures, EVOTIX

8.5 Do –

- Assessment of risks – risk assessments and safe working procedures in place
- Learning and development activities in place to ensure right people with the right competencies – learning and development systems
- Managing change as it occurs – change management processes
- Managing external contractors and supplier – procurement and contract management processes
- Communication – through Staff Focus, team meetings, team briefs and toolbox talks

Page	Version	Date	Author
Page 8 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

- Emergency preparedness and response – corporate and operational business continuity plans

8.6 Check –

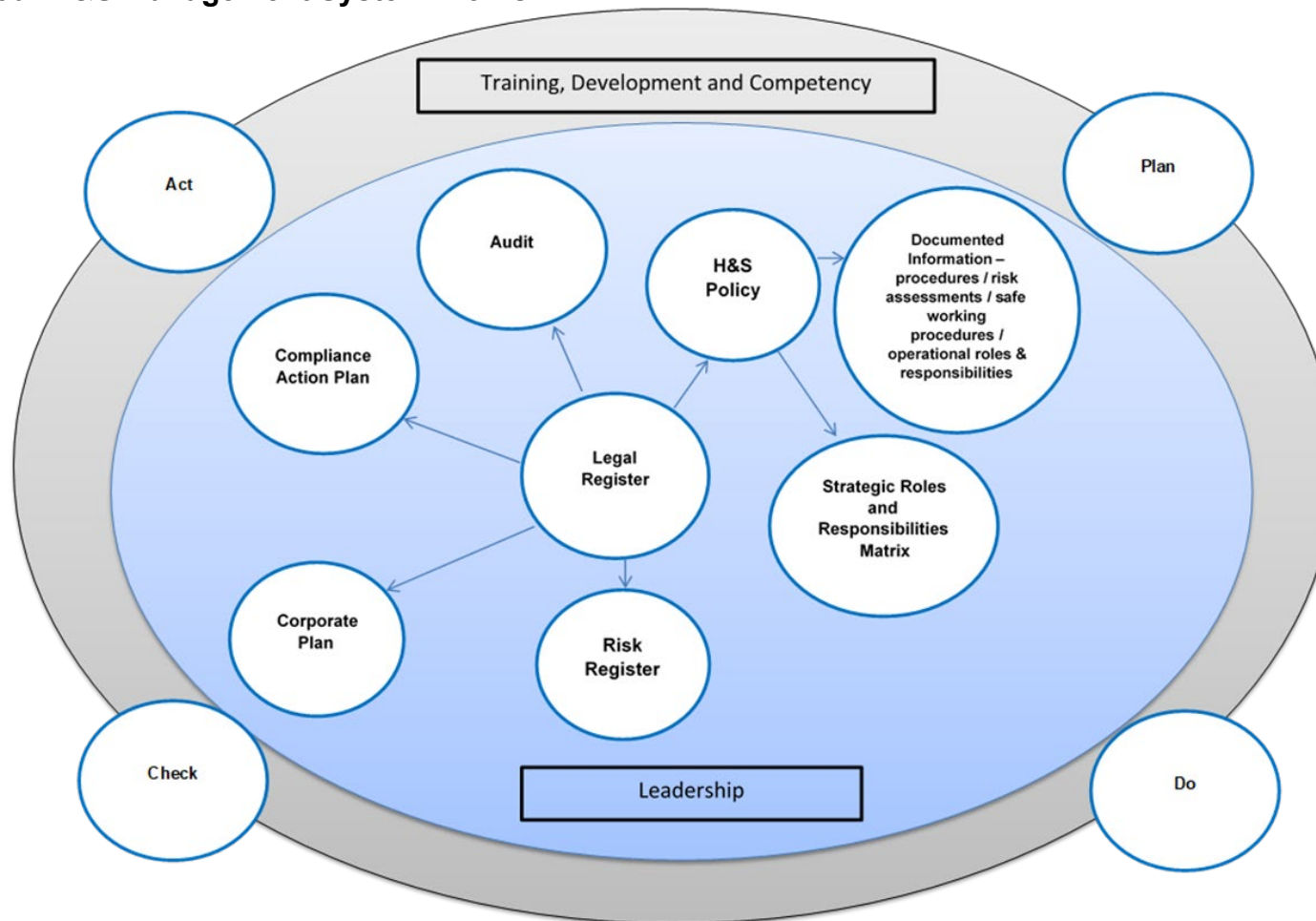
- Evaluation of legal and other compliance requirements – in our legal register
- Audit programme in place to check how we are performing –in terms of H&S performance and the H&S management system
- Governance of H&S performance including accidents and incidents – through the Safety and Compliance Performance report
- Accident and incident reporting including near misses – through EVOTIX and the Safety and Compliance Performance Report
- Workplace inspections and auditing– utilising iAuditor
- Management Review of the H&S management system – governance through the Safety and Compliance Performance Report to feedback to Joint Safety Committee
- External assurance – through British Safety Council 5* Occupational H&S Audit and ISO 45001

8.7 Act -

- Learning from accident and incident outcomes
- Feedback from audits, internal and external, identifying any non-conformities, processes not being followed
- Benchmarking and learning from best practice locally, regionally and nationally within the housing sector
- Responding to changes in the national landscape including changes to legislation
- Continuing professional development such as learning from professional journals
- Opportunities for continual improvement of the H&S management system
- Development of Service Delivery Plans

Page	Version	Date	Author
Page 9 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

Appendix 1 – How our H&S Management System Works



Page	Version	Date	Author
Page 10 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

Appendix 2 – Roles and Responsibilities Matrix

Responsibility	Plan							Do										Check					Act			
	Determine legal and other requirements	Set overall commitments to managing H&S	Set objectives for improvement	Identify risks and opportunities	System in place to identify hazards and assess risks	Resources in place to deliver H&S and the H&S management system	Processes in place to deliver H&S and the H&S Management System	Assessment of risks	Lead by personal example	Follow risk assessments and safe working methods in place	Learning and development activities in place	Managing change as it occurs	Managing external contractors and suppliers	H&S standard agenda item of team meetings	Report accident and incidents including near misses	Report short falls in H&S Management and contribute solutions	Providing and using Personal Protective Equipment	Emergency preparedness and response	Internal audit programme in place	Governance of H&S performance	Accident / Incident Reporting Investigation / Monitoring	Workplace Inspections and Monitoring	Management Review of the H&S Management System	Learning from accident and incident outcome	Feedback from internal programme	Continual improvement of H&S Management System
Role																										
Board or Sub-Committees	✓	✓	✓	✓		✓	✓		✓	✓		✓		✓	✓		✓			✓						✓
Executive Management Team	✓	✓	✓	✓		✓	✓		✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Heads of Service	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Service Managers	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓
Line Managers			✓	✓			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓				✓	✓	✓		✓		✓
Employees				✓			✓	✓	✓		✓	✓	✓	✓	✓	✓					✓					✓
Health, Safety and Compliance Team	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			✓	✓	✓	✓	✓	✓	✓	✓
HR and OD Team						✓		✓	✓	✓	✓			✓	✓											
Trade Union Safety Representatives				✓			✓	✓	✓	✓	✓			✓	✓	✓				✓	✓	✓		✓		✓
Joint Safety Committee	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓			✓	✓				✓	✓	✓	✓	✓	✓	✓	✓

Specific Operational roles and responsibilities are documented on the intranet e.g. first aiders and fire wardens or by job descriptions.

Page	Version	Date	Author
Page 11 of 11	1.2	April 2023	Health, Safety and Compliance Service Manager
File Path			

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

Board Meeting

REPORT

Date : 03 August 2023

Item : 07

Subject : Damp, Mould & Condensation Policy

Presented by : Chris Margrave, Director of Property Services

Prepared by : Christine Tolson, Head of Asset Management

Purpose : To present the newly created Damp, Mould & Condensation Policy for consideration and approval.

Recommendation :

SLHD board is asked to consider and approve the attached Damp, Mould & Condensation Policy

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: 03 August 2023**

1. Report Title

1.1 Damp, Mould & Condensation Policy

2. Executive Summary

2.1 SLHD is committed to addressing damp, mould and condensation issues in the homes it manages should this arise. A dedicated damp and mould policy has now been developed to document this commitment and provide transparency on the level of service tenants can expect in relation to damp, mould and condensation issues. The policy also sets out clear responsibilities for SLHD and tenants, as well as a proposed framework for monitoring and managing performance.

2.2 Following approval of the policy, the plan is for the policy to be launched during September 2023, ahead of an expected increase in the number of reported issues as the colder and damper months approach.

3. Purpose

3.1 The purpose of the report is to present the newly created Damp, Mould & Condensation Policy for consideration and approval.

4. Recommendation

4.1 SLHD board is asked to consider and approve the attached Damp, Mould & Condensation Policy

5. Background

5.1 Whilst SLHD has always taken reports of Damp, Mould & Condensation seriously, it hasn't until now had a dedicated policy which sets out how it will deal with such issues.

5.2 The Housing Ombudsman's 'Spotlight on Damp and Mould' report, which set out 26 specific recommendations for landlords in relation to damp, mould and condensation, specifically highlighted that it would be expected that all housing providers would have a dedicated Damp & Mould Policy in place.

5.3 As a social housing provider, committed to providing safe, decent and modern homes, it was therefore imperative that SLHD developed a dedicated Damp, Mould and Condensation Policy.

6. Damp, Mould & Condensation Policy

- 6.1 A new policy has now been developed and approval to adopt this is now sought from the Board. A copy of the policy is attached at Appendix 1.
- 6.2 The policy has considered the best practice highlighted in the Housing Ombudsman's Spotlight on Damp and Mould report, as well as taking on board wider best practice from the housing sector.
- 6.3 The policy will be supported by a number of operational procedures, which will set out in more detail how the commitments in the policy will be delivered in practice, including any timescales. Both the policy and the operating procedures will sit alongside a Damp, Mould & Condensation improvement plan, which sets out a series of actions that SLHD is working through to further strengthen its approach to management damp, mould and condensation issues. The development and adoption of this policy is an example of just one action contained within the improvement plan.

7. Future Revisions

- 7.1 Further changes and requirements of social housing providers in relation to damp, mould and condensation are expected over the next 6-18 months. This includes the introduction of Awaab's law, as well as changes to the decent homes standard. It is also expected that damp, mould and condensation will feature highly in the regulatory inspection process.
- 7.2 The precise detail and impact of these changes is not yet known. However, it is likely to impact on the way we respond to damp, mould and condensation issues. For example, it is expected that specific timescales will be mandated for responding to damp, mould and condensation issues, which once known will need to be incorporated into the policy and operating procedures.
- 7.3 With this in mind, this policy will be kept under review and updated as and when required to reflect any changes to statutory requirements alongside updating of the operating procedures.

8. Procurement

- 8.1 There are no procurement issues directly arising from this report.

9. VFM Considerations

- 9.1 VFM is about optimising the balance between costs and performance, including customer satisfaction levels, and at this stage the extent of DMC on these is not known. A new, dedicated DMC team shows investment in this area and in turn it is hoped this will help to maintain or improve operational and satisfaction levels, and ultimately VFM reporting.

10. Financial Implications

- 10.1 Funding of £500k over a two year period has been discussed with CDC, the majority of which will be to fund a dedicated DMC team comprising 4 FTEs : a Damp and Mould Manager, two Surveyors and a Support Assistant. The cost of this new team, including on costs, will be £159k for a full year. In addition, this funding is being utilised on resource in the Tenancy Sustainability Team, plus PPE, vehicles and materials within Assets and Property Services Teams to undertake the required works.

The projected cost of DMC repairs is not known at this stage but all DMC type repairs are in the process of being able to be captured within OpenHousing for future analysis and reporting.

11. Legal Implications

- 11.1 The key statutory and contractual obligations applicable to this policy are:

- Housing Act 2004
- Decent Homes Standard
- Homes (Fit for Human Habitation) Act 2018
- Housing Health and Safety Rating System (HHSRS)
- Defective Premises Act 1972 (Section 4)
- Secure Tenants of Local Housing Authorities (Right to Repair) Regulations 1994
- Landlord and Tenant Act 1985 (Section 11)
- Tenancy Agreement
- Equality Act 2010
- The Health And Safety At Work Act 1974

12. Risks

- 12.1 Without a dedicated damp, mould and condensation policy in place, SLHD is at risk of not meeting the recommendations of the Housing Ombudsman's Spotlight on Damp and Mould report. More importantly, this could mean that our approach and actions fail to meet our statutory and moral requirements, and lead to customers not receiving the level of service or housing that they should be able to expect. Approving and implementing this policy sets out SLHD's commitment to dealing with damp and mould and provides transparency for customers around the level of service they can and should expect.

- 12.2 A significant risk centres on SLHD's ability to meet all of the commitments and objectives contained within the policy. In 2022/23 there was a significant increase in the number of customers seeking help and support in relation to damp and mould issues. Demand was more than double than previous years, making it difficult for SLHD to meet these requests in a timely manner with the resources available. Whilst budgetary provision has been made for 2 dedicated damp and mould surveyors, in the winter months this is unlikely to be sufficient to meet demand and may need to be

temporarily supplemented by existing staff. There is also a wider pressure on repairs budgets and staffing resources to respond to any remedial repairs required in a timely manner. Through the repairs excellence programme work has already been undertaken to reduce wasted appointments and increase productivity to help meet some of this demand. However, there is still a risk that demand outstrips resources available and should this arise, a process will need to be put in place to ensure damp, mould and condensation repairs are prioritised over and above less urgent repairs and investment.

- 12.3 Of particular concern, highlighted during the winter months of 2022/23, are the number of households who are struggling to adequately heat their homes due to high energy costs and the general impact of the cost of living crisis. Between late January and end of April 2023, 13% of homes where a damp and mould inspection was undertaken were heated to less than 16 degrees, which has no doubt played a contributing role to some of the issues being experienced in some homes. SLHD have a dedicated tenancy support team and a referral process is in place for tenants where these issues are identified to look at what help and support can be offered.

13. Health, Safety & Compliance Implication

- 13.1 Mould is identified as a specific hazard within the Housing, Health & Safety Rating System (HHSRS) and it is recognised that its presence in domestic properties can have a detrimental impact to the dwelling environment and its occupants. The policy seeks to put in place a set of intentions and objectives that will ensure that any issues identified are dealt with in an appropriate and timely way to mitigate the risk to property and occupants.
- 13.2 Upon adoption of this policy, damp, mould and condensation will be regarded by St Leger Homes as the seventh area of compliance, with updates included within the regular Health, Safety & Compliance updates.

14. IT Implications

- 14.1 Minor amendments to the existing housing management system will be needed to ensure that damp, mould and condensation issues and repairs can be more easily identified and reported. These tweaks should be fairly straightforward to accommodate and fall within the existing skills set of staff.
- 14.2 As part of the ongoing review and upgrade of the website, information and advice regarding damp, mould and condensation will be reviewed and updated where relevant.

15. Consultation

- 15.1 A range of consultation has been undertaken in the development of this policy including with the following:
- SLHD Damp & Mould Working Group

- SLHD Executive Management Team
- Tenants - via One Voice Forum, TRIP and tenant survey
- SLHD staff – via staff survey

15.2 All feedback received has been considered and used to refine the document to the version now being presented for consideration.

16. Diversity

16.1 Please see comments below in the Equality Analysis section.

17. Communication Requirements

17.1 Following approval, the policy will be launched and communicated via the following mechanisms:

Staff

- Included in EMT key messages
- Communicated via team meetings and toolbox talks
- Included in an e-learning package (to be developed and launched in Autumn 2023)
- Information provided on the intranet
- Property services awayday

Customers

- Article in Houseproud
- Information provided on SLHD website
- QR code on tenant advice sheet with link to the policy
- Social media campaign
- Updates provided to One Voice Forum and TRIP

Other key stakeholders

- Shared with CDC via Building Safety Group
- Shared with relevant contractors via contract/site meetings

18. Equality Analysis

18.1 An equality analysis has been completed and no significant negative issues or impact has been identified through the creation of the new policy. A copy of the equality analysis is attached at Appendix 2.

18.2 The equality analysis has considered the 9 protected characteristics and it is considered that the following characteristics may be impacted more by the introduction of the policy.

Age – There is a greater chance that younger (under 14) or elderly customers may be more vulnerable to the effects of damp, mould and condensation. For older people this may be due to underlying health conditions and they may be less likely to report a problem or less able to

undertake action as set out in the policy which is considered the responsibility of the customer.

Disability – it is acknowledged that damp, mould, and condensation may have a greater impact on customers with certain disabilities and underlying health conditions.

Race – It is acknowledged that based upon a customer's race and ethnicity there may be communication and language barriers that must be overcome on the part of St Leger to ensure that the policy is effectively communicated, understood and action is taken as required.

- 18.3 The policy has considered and makes specific provision for vulnerable individuals that may be impacted by damp, mould and condensation, allowing for services to be prioritised and tailored accordingly.

19. Environmental Impact

- 19.1 Mould is identified as a specific hazard within the Housing, Health & Safety Rating System (HHSRS) and it is recognised that its presence in domestic properties can have a detrimental impact to the dwelling environment and its occupants. The policy seeks to put in place a set of intentions and objectives that will ensure that any issues identified are dealt with in an appropriate and timely way to mitigate the risk to property and occupants.

20. Report Author, Position, Contact Details

- 20.1 Christine Tolson, Head of Asset Management
Email: Christine.tolson@stlegerhomes.co.uk

21. Background Papers

- 21.1 Appendix 1 – Damp, Mould & Condensation Policy
Appendix 2 – Equality Analysis



POLICY DOCUMENT

DAMP, MOULD & CONDENSATION POLICY

POLICY TITLE:	Damp, Mould & Condensation Policy
LEAD OFFICER:	Head of Asset Management
DATE APPROVED:	August 2023
APPROVED BY:	St Leger Homes Board
IMPLEMENTATION DATE:	September 2023
DATE FOR NEXT REVIEW:	August 2026 (or sooner if new guidance or legislation is introduced)
ADDITIONAL GUIDANCE:	Damp, Mould & Condensation Operating Procedures (to be developed)
ASSOCIATED CUSTOMER/EMPLOYEE PUBLICATIONS:	<ul style="list-style-type: none"> • Asset Management Strategy • Repairs & Maintenance Policy • Customer Complaints Policy • Environmental Strategy • Tenant's Handbook • Tenancy Agreement • Damp & Mould Operating Procedures
TEAMS AFFECTED:	All staff and departments
THIS POLICY REPLACES	This is a new policy

Brief Policy Summary: This policy sets out the organisation's approach towards managing damp, mould and condensation in tenanted homes.

Page	Version	Date	Author
Page 1 of 11	1.2	July 2023	Head of Asset Management
File Path			

DOCUMENT CONTROL

Revision History

Date of this revision:	19.07.2023
Date of next review:	August 2026
Responsible Officer:	Head of Asset Management

Version Number	Version Date	Author/Group commenting	Summary of Changes
1.0	01.06.2023	HoAM	Original version for initial consultation with EMT
1.1	04.07.2023	EMT, Customers, Staff	Minor tweaks throughout the document following consultation feedback
1.2	19.07.2023	EMT	Minor tweaks to the document following final consultation

Policy Creation and Review Checklist

Action	Responsible Officer	Date Completed
Best practice researched (HouseMark, HQN, Audit Commission, general websites)	D,M & C Working Group	31.05.2023
Review current practices from similar organisations	D,M & C Working Group	31.05.2023
Review customer satisfaction data from the area the policy relates to	Head of Customer Services	N/A
Review Customer complaints from the area the policy relates to	Head of Customer Services	06.06.2023
Undertake customer consultation if applicable	Head of Asset Management	June 2023
Staff consultation if applicable	Head of Asset Management	June 2023
Trade Union consultation if applicable	Head of Asset Management	N/A at present
Stakeholder consultation if applicable	Head of Asset Management	N/A at present
Equality Analysis carried out	Head of Asset Management	19.06.2023
General review and refresh	Head of Asset Management	N/A at present

Page	Version	Date	Author
Page 2 of 11	1.2	July 2023	Head of Asset Management
File Path			

POLICY DOCUMENT

DAMP, MOULD & CONDENSATION POLICY

1. Introduction

This policy is intended to provide clarity for customers, staff and other key stakeholders around the level of service that can be expected from St leger Homes, and the approach that will be taken in relation to Damp, Mould and Condensation.

The policy sets out SLHD's commitment to ensuring that damp, mould and condensation issues are always be taken seriously, and that these are dealt with in true partnership with tenants, with each party having their own responsibilities and roles to play.

The tragic death of Awaab Ishak is a stark reminder of the devastating consequences of the failure to manage damp and mould in homes can have. The Regulator of Social Housing expects all registered providers of social housing to fulfil their responsibility to take action to protect tenants from hazardous damp and mould. More importantly, our customers rightly expect to be able to live in safe and decent housing.

St Leger Homes of Doncaster (SLHD) wants to do the right thing, and we are firmly committed to providing good quality, safe and decent homes. This commitment is a key objective within our corporate plan and is at the heart of our customer-focused approach to delivering our services.

Providing safe and decent homes includes ensuring that any damp or mould issues identified within our properties are robustly addressed in a reasonable timescale, commensurate with the scale of the issue, and with the collaboration and support of our tenants.

SLHD recognises the wider impact damp, mould and condensation within a home can have on our tenants, and we understand our responsibilities and obligations in addressing such issues when they occur. We have developed this policy to set out our commitment to tackling issues of damp and mould, demonstrating the importance we place on meeting our responsibilities and obligations.

To enable us to fulfil our obligations we also recognise the need to work in true collaboration and partnership with our tenants, working together to achieve a common goal: ensuring our homes are decent, modern, safe and free from hazards.

Page	Version	Date	Author
Page 3 of 11	1.2	July 2023	Head of Asset Management
File Path			

2. Purpose

This policy sets out our specific commitment to a **zero** tolerance approach to damp and mould in our properties. This policy complements and supports other key strategies, policies and documents including SLHD's:

- Asset Management Strategy
- Repairs & Maintenance Policy
- Customer Complaints Policy
- Environmental Strategy
- Tenant's Handbook
- Tenancy Agreement
- Damp & Mould Operating Procedures

The policy will underpin the work of our dedicated Damp and Mould Team to provide assurance that SLHD:

- Takes all reports of damp and mould seriously.
- Takes appropriate and reasonable measures to maintain the Decent Homes Standard and Homes Standard across its managed housing stock.
- Has robust systems in place to ensure that tenants' homes are free from hazardous levels of damp and mould, alongside comprehensive operational processes in place to identify and effectively deal with cases that may arise within a reasonable timescale.
- Complies with all relevant associated legislation and takes account of existing and emerging best practice.

3. Scope

This policy applies to:

- All City of Doncaster Council properties under the management of SLHD that are tenanted.
- Communal spaces in residential accommodation under the management of SLHD.

It covers:

- Rising, penetrating and condensation damp, including internal leaks. A definition of the different types of damp is covered in Appendix 1.

It sets out:

- SLHD's responsibilities for identifying and dealing with damp, mould and condensation.
- Tenants' responsibilities for identifying, reporting and dealing with damp, mould and condensation.

Page	Version	Date	Author
Page 4 of 11	1.2	July 2023	Head of Asset Management
File Path			

It confirms:

- Our commitment to addressing damp and mould issues and how we will meet these promises.

It also:

- Clarifies the guidance, advice, and assistance available throughout the process to all tenants living in SLHD managed properties.
- Identifies situations where SLHD will not be able to undertake works to rectify damp, mould and condensation.

4. Ownership and Responsibilities

Our Statutory Obligations

The key statutory and contractual obligations applicable to this policy are:

- Housing Act 2004.
- Decent Homes Standard.
- Homes (Fit for Human Habitation) Act 2018.
- Housing Health and Safety Rating System (HHSRS).
- Defective Premises Act 1972 (Section 4).
- Secure Tenants of Local Housing Authorities (Right to Repair) Regulations 1994.
- Landlord and Tenant Act 1985 (Section 11).
- Tenancy Agreement.
- Equality Act 2010.
- The Health And Safety At Work Act 1974.

Our Responsibilities

In preventing and managing issues relating to damp, mould and condensation, SLHD is responsible for:

- Maintaining the main fabric of the building in good condition including: walls, roof, chimneys, doors, windows, guttering, fascia and soffit.
- Ensuring that internal components such as pipework, heating, insulation and ventilation are in good working order.
- Responding to reports of faulty components or repairs in a reasonable timescale (and in accordance with our repairs and maintenance policy).
- Responding to reports of damp and mould in a reasonable timescale.
- Utilising data and other asset intelligence to proactively identify potential issues.
- Delivering the specific commitments contained within this policy.

Page	Version	Date	Author
Page 5 of 11	1.2	July 2023	Head of Asset Management
File Path			

Tenant Responsibilities

In preventing and managing issues relating to damp mould and condensation, tenants are responsible for:

- Regularly checking for, and reporting in a timely manner, any damp or mould issues. This includes faulty equipment that will hamper the management and control of damp, condensation, and mould (e.g. leaks, faulty extract fan, unable to open windows, faulty or absence of heating in habitable spaces etc.).
- Regularly checking for mould and cleaning signs of mould as soon as they are discovered.
- Following all advice and guidance issued by SLHD on managing and controlling damp and condensation and taking all reasonable steps to reduce and manage condensation within the home, e.g., using fans where provided, adequately ventilating the property, using trickle vents, covering pans when cooking, drying laundry outside where possible, keeping the kitchen or bathroom door closed when cooking or bathing.
- Adequately heating the property (recommended between 18-21 degrees) and keeping humidity levels below 60%.
- Providing reasonable access for repairs and inspections, in accordance with the tenancy agreement.

If the tenant fails to take the advice and reasonable steps to reduce damp the tenant may be recharged for any resulting repairs required which are considered to be as a result of this neglect.

5. Policy

Our Policy Commitments

In delivering our Damp and Mould service to our customers, we are committed to delivering the following to the best of our abilities:

- Taking all reports of damp, mould and condensation seriously.
- Making it easy for tenants to report and raise concerns relating to damp, mould and condensation and to raise a formal complaint where they are dissatisfied with the response.
- Triaging reports of damp, mould and condensation to ensure more urgent cases and issues are prioritised accordingly, including consideration of tenant circumstances and vulnerabilities.
- Ensuring that concerns raised are listened to, and tenants are treated fairly and with respect.
- Focusing on working in partnership with tenants to resolve any issues raised together.
- Taking into account individual tenant needs, circumstances and vulnerabilities when investigating and addressing concerns raised.
- Undertaking effective and time appropriate investigations.
- Keeping a record of issues raised and our response (including inspections).

Page	Version	Date	Author
Page 6 of 11	1.2	July 2023	Head of Asset Management
File Path			

- Using independent specialists where appropriate.
- Informing tenants of findings following a property inspection and the proposed next steps.
- Delivering all reasonable remedial repair solutions and improvements to eradicate damp and mould including, managing, and controlling condensation, in line with our repairs policy.
- Making good internal surfaces following any remedial work carried out ensuring that surfaces are prepared to a condition ready for the tenant to redecorate.
- Ensuring that when a third party deliver works on behalf of SLHD, only competent contractors are used.
- Ensuring that tenants have access to comprehensive advice and guidance on managing and controlling damp, mould and condensation.
- If it is unsafe for the occupants to remain in the property while the works are carried out, arranging for alternative accommodation. This may be on a day-by-day basis or a temporary move to an alternative property. The tenant will be supported through this process to find suitable accommodation.
- Supporting tenants, where appropriate, to take their own proportionate and reasonable actions to help control and manage condensation related issues within the home.
- Making referrals to the Tenancy Support Team for tenants where financial issues or other vulnerabilities may have been a contributory factor in instances of damp, mould or condensation. The team will work with the tenant to maximise incomes and build financial resilience.
- Ensuring that the fabric of SLHD managed property is protected from deterioration and damage resulting from damp and condensation.
- Maximising available budgets and ensuring that they are used effectively and efficiently to deal with damp and condensation problems.
- Using information gathered from reports of damp and mould to inform future investment programmes across the housing stock, ensuring strong links with the journey to net zero carbon.
- Complying with appropriate statutory requirements.
- Adopting a continuous improvement approach to the service, including learning from complaints and customer feedback, and identifying and adopting emerging best practice where feasible.
- Ensuring that relevant staff have appropriate damp, mould and condensation training and understand their obligations under this policy.

Policy and Commitment Limitations

In responding to concerns around damp, mould and condensation, there are some limitations and exclusions to what SLHD will, or are able to provide, and these include, but are not limited to:

- Controlling damp and mould where it is unreasonable or impractical to do so or if any remedial action would be ineffective. For example poor construction or design (not meeting current construction and living standards), i.e. listed buildings, or cold

Page	Version	Date	Author
Page 7 of 11	1.2	July 2023	Head of Asset Management
File Path			

bridging areas in the fabric of the building that cannot be eliminated. Where such buildings are identified, the future retention and use of these will be reviewed.

- Non-habitable rooms, for example: out-buildings and other add-on structures or unheated or uninsulated semi external toilets and storerooms. Where tenants are considering converting or using non-habitable buildings and spaces or rooms they should seek advice and permission from SLHD in accordance with the tenancy agreement conditions.
- Where internal conditions within a home prevent inspections or remedial work being safely carried out, for example overcrowding or excessive hoarding of personal belongs. In such instances, SLHD will provide support and assistance to review the tenant's options that may include moving to more appropriate alternative suitable accommodation, or referral for other methods of support.

Also, under this policy:

- Mould wash treatment will only be carried out by St Leger Homes where this is found to be:
 - A persistent or extensive issue.
 - Cannot be controlled by the tenant following previous documented attempts.
 - Where vulnerabilities prevent the tenant being able to undertake independently.
- Surfaces will be prepared ready for decoration, but decoration will not be provided following works. In very exceptional circumstances, SLHD may consider this at their discretion as a gesture of goodwill.
- SLHD will not normally reimburse for personal items damaged by mould unless it is proven that SLHD have been negligent.

6. Monitoring, Compliance and Effectiveness

The Director of Property Services has overall responsibility for this policy, including ensuring its effective implementation and delivery of the commitments specified.

- The Head of Asset Management is responsible for:
 - The day-to-day implementation and delivery of the policy.
 - Monitoring the day-today performance and delivery of the policy.
 - Reviewing the policy.
- The Damp and Mould Manager has responsibility for:
 - Supporting the development and ongoing review of this policy.
 - Developing the processes and procedures that underpin this policy.
 - Delivering the Damp & Mould action plan, which brings to life the aims and commitments within this policy.

Page	Version	Date	Author
Page 8 of 11	1.2	July 2023	Head of Asset Management
File Path			

As a minimum, the Policy will be reviewed every three years, or sooner if required in response to:

- Legislative changes.
- SLHD strategy or policy changes.
- Customer feedback, including complaints.
- Emerging new best practice.
- Ineffective policy terms.

Oversight, governance and monitoring of this policy will be provided through the existing SLHD Board & Committee structure, with regular damp and mould updates being provided as a minimum via the Health, Safety and Compliance report.

7. Performance Standards

New performance monitoring measures will be developed and introduced within the first six months of the policy. As a minimum, these will include:

- **Number of damp, mould & condensation inspection requests made by tenants each week or month.**
- **Number of damp, mould & condensation inspections completed each week or month.**
- Average time to complete a damp, mould & condensation inspections (from the date reported to the date the inspection completed).
- Number of repairs raised following a damp, mould & condensation inspection.
- Number of repairs completed following a damp, mould & condensation inspection.
- Average time to complete damp, mould & condensation related repairs following an inspection.
- Number of properties where a category 1 hazard in relation to damp & mould is recorded at a moment in time.
- Number of properties where a category 2 hazard is relation to damp & mould is recorded at a moment in time.
- Number of referrals made to the tenancy sustainability team.

The indicators highlighted in bold above will be included in the Health, Safety & Compliance report, which is monitored by the Executive Management Team and Building Safety Committee (on behalf of the Board).

Page	Version	Date	Author
Page 9 of 11	1.2	July 2023	Head of Asset Management
File Path			

8. Appendices

Appendix 1: Types of Damp & Mould

The types of damp covered by the policy are:

Rising Damp: The movement of moisture from the ground rising up through the structure of the building through capillary action.

Penetrating Damp: (including internal leaks); Water penetrating the external structure of the building or internal leaks causing damp, rot and damage to internal surfaces and structure. The cause can be the result of, for example:

- Water ingress due to defective or poor original design or workmanship of the structure.
- Defective components for example roof coverings, external wall doors and windows.
- Defective or blocked rainwater gutters and pipes.
- Defective or leaking internal waste pipes, hot and cold water and heating systems.
- Flooding due to burst pipes.

Condensation Damp: Condensation occurs when moisture held in warm air comes into contact with a cold surface and then condenses producing water droplets. This can take two main forms:

- Surface condensation arising when the inner surface of the structure is cooler than the room air.
- Condensation inside the structure where vapour pressure forces water vapour through porous materials (e.g., walls), which then condenses when it reaches colder conditions within the structure.

The conditions that can increase the risk of condensation are:

- Inadequate ventilation e.g., natural opening windows and trickle or background vents and mechanical extraction in bathrooms and kitchens.
- Inadequate heating e.g., undersized boilers and radiators.
- Inadequate thermal insulation. e.g., Missing, or defective wall and loft insulation.
- High humidity e.g., presence of rising and penetrating damp
- Poor building design and construction – specific cold areas (bridging) which are integral with the building construction.

Page	Version	Date	Author
Page 10 of 11	1.2	July 2023	Head of Asset Management
File Path			

Conditions that can lead to condensation are:

- Inadequate ventilation – lack of opening windows or mechanical ventilation or extraction, not opening windows, blocking up vents not turning on extract fans, not allowing air to circulate around furniture.
- Inadequate heating – absence of suitable heating system or not heating property appropriately (acknowledging that in some cases fuel poverty may be a contributing factor).
- Defective insulation –dislodged insulation in lofts.
- High humidity - not covering pans when cooking and drying laundry inside the house can contribute to this.
- Overcrowding.

Mould is a natural organic compound that develops in damp conditions and will only grow on damp surfaces. This is often noticeable and present in situations where condensation damp is present.

Page	Version	Date	Author
Page 11 of 11	1.2	July 2023	Head of Asset Management
File Path			

Appendix 2: Damp, Mould & Condensation Policy Equality Analysis

Name of policy, service or function: Damp, Mould & Condensation Policy

Name of service area and directorate: Property

Lead manager and others involved in Equality Analysis: Christine Tolson

Date of Equality Analysis: 19/06/2023

What type of policy, service or function is this and what is its main purpose?: This is a brand new policy. This policy sets out SLHD's specific commitment to a zero tolerance approach to damp and mould in the properties it manages. This policy complements and supports a range of other existing key strategies, policies and documents. The main purpose is to clarify what we will and won't do to address issues of Damp, Mould & Condensation, as well as clarifying what our responsibilities are and what responsibilities tenants have.

Who will this policy, service or function affect?: The policy impacts mainly on customers and also staff who will need to deliver on the promises made within it.

Who is this policy, service or function intended to help/benefit?: Mainly customers in terms of clarifying the level of service they can expect, but also staff by being clear on their responsibilities to provide a good level of service in relation to damp, mould and condensation.

List below any evidence, data or sources of information you have used to help you assess impact on any communities, groups and individuals: We have looked at records of previous damp, mould and condensation inspection requests. We have taken on board past complaints, and held discussions with the One Voice Forum. We have also taken on board feedback from staff. This has enabled us to consider the impact of the policy on particular groups, communities or individuals.

Please provide the details and key findings from any consultations that have been carried out with staff, customers, stakeholders, partners or other interested parties.: The key emerging issue is around timescales for responding to reports of damp, mould and condensation and how individual circumstances and vulnerabilities will be taken into account when prioritising inspections and remedial works.

Will the policy, service or function have a POSITIVE impact on any individuals, communities or particular groups?: The policy will have a positive impact on all tenants, but in particular those who have or will go on to experience damp, mould and condensation issues in their homes. This will be achieved by having a clear set of commitments which highlight the service they can expect to receive and which they can hold SLHD to account for. The policy specifically make reference to vulnerable groups and how special provisions will be made for them, i.e. mould washes.

Will the policy, service or function have an ADVERSE impact on any individuals, communities or particular groups?: The introduction of a triaging system under the new policy may mean that less urgent cases may be de-prioritised. Some customers who fall into this category may regard this as a negative or lesser service. However, our view is that a good level of service will still be provided to all customers and that by triaging incoming issues, those most urgent cases are prioritised, leading to a better service overall.

Your Equality Analysis form has now been submitted.

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England

Company Number 05564649

St Leger Homes of Doncaster Board Meeting

REPORT

- Date** : 03 August 2023
- Item** : 08
- Subject** : Passenger and Residential Lift Safety Policy
- Presented by** : Chris Margrave
Director of Property Services
- Prepared by** : Kathryn Richmond
Water Hygiene and Lift Compliance Officer
- Purpose** : To seek approval from Board for the Introduction of a Passenger and Residential Lift Safety Policy to be taken to Board for approval.

Recommendation:

Members of the Board are asked to approve the Introduction of a Passenger and Residential Lift Safety Policy attached to this document

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

**Agenda Item No. 08
Date: 03 August 2023**

1. Report Title

1.1 Introduction of Passenger and Residential Lift Safety Policy

2. Executive Summary

2.1 St Leger Homes is required under Health and Safety legislation to have a policy in place for Passenger and Residential Lift Safety.

2.2 The Passenger and Residential Lift Safety Policy sets out our general approach to managing lift safety. It explains how St Leger Homes, as an employer, will manage lift safety including roles and responsibilities.

3. Purpose

3.1 To seek approval from the Board for the introduction of a Passenger and Residential Lift Safety Policy.

4. Recommendation

4.1 Members of the Board are asked to approve the introduction of the Passenger and Residential Lift Safety Policy attached to this document in appendix 1.

5. Passenger and Residential Lift Safety Policy 2023

5.1 A new Passenger and Residential Lift Safety Policy has been drafted as attached in consultation with the Internal Service Provider (ISP) delivery team and External Lift Consultants.

5.2 Key points of the new Passenger and Residential Lift Safety Policy are as follows

- The roles and responsibilities of how the Passenger and Residential Lift Safety will be implemented. These are clear and explicit and reflect accurately how the business manages lift safety.
- A management plan has been developed following Policy Principles ensuring that St Leger Homes adhere to any current Legislations and Guidelines.

6. Procurement

- 6.1 There are no direct procurement implications arising from the introduction of the Passenger and Residential Lift Safety Policy.

7. VFM Considerations

- 7.1 VFM is considered within the Management Plan. The frequency of planned preventative maintenance and inspections are carried out based on legislative requirements and dependant on the type of equipment being used.

8. Financial Implications

- 8.1 Financial implications are implicit within the Policy. SLHD must adhere to relevant legislation and follow guidelines and budgetary provision is developed annually to ensure adherence. Budgets are also developed for staff training, risk assessments and ICT systems and are reviewed annually. Close budgetary control operates throughout the financial year. There may be financial implications that arise during in-year service and budget monitoring, or as part of annual budget planning, and these would be considered as separate business cases and briefing notes as required.
- 8.2 In terms of budget management and service delivery, SLHD has a dedicated safety department with 19 WTE employees. The department comprises Health and Safety and Building Safety Compliance teams with budgets totalling £700k and £220k respectively. Over 80% of the total £920k budget relates to employee costs.

9. Legal Implications

- 9.1 These are set out in full in the company's health, safety compliance legal register, however, the key piece of applicable legislation is the Health and Safety at Work etc. Act 1974.

11. Risks

- 11.1 SLHD acknowledges and accepts its responsibilities in accordance with regulatory standards, legislation and best practise, and that failure to discharge these responsibilities properly could lead to a range of sanctions including prosecution. Without a robust and up to date Policy in place, there is potential for SLHD to fail to meet its obligations.

12. Health, Safety & Compliance Implications

- 12.1 The health, safety and compliance implications are already covered within the report.

13. IT Implications

13.1 The implementation of C365 supports the overall principles of the Policy.

14. Consultation

14.1 Consultation was carried out throughout the review of the Policy with relevant stakeholders.

15. Diversity

15.1 There are no diversity issues arising from this Policy review.

16. Communication Requirements

16.1 On approval the new Policy will be shared within SLHD using team briefs, Staff Focus and the intranet. It will also be shared on the internet.

17. Equality Impact Assessment

17.1 An Equality Impact Assessment was completed in April 2023. No adverse impacts of the Passenger and Residential Lift Safety Policy were identified.

18. Environmental Impact

18.1 There are no direct environmental impacts from the annual review.

21. Report Author, Position, Contact Details

21.1 Kathryn Richmond
Water Hygiene and Lift Compliance Officer
Email: Kathryn.richmond@stlegerhomes.co.uk

22. Background Papers

22.1 Appendix 1 Passenger and Residential Lift Safety.



POLICY DOCUMENT

Passenger and Residential Lift Safety Policy

POLICY TITLE:	Passenger and Residential Lift Safety Policy
LEAD OFFICER:	Water Hygiene and Lift Compliance Officer
DATE APPROVED:	
APPROVED BY:	Board of St Leger Homes of Doncaster
IMPLEMENTATION DATE:	July 2023
DATE FOR NEXT REVIEW:	
ADDITIONAL GUIDANCE:	
TEAMS AFFECTED:	Repairs and Maintenance Building Safety and Compliance
THIS POLICY REPLACES:	N/A

Page	Version	Date	Author
Page 1 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

Document Control

Revision History

Date of this revision:	March 2023
Date of next review:	April 2026
Responsible Officer:	Water Hygiene and Lift Compliance Officer

Version Number	Version Date	Author/Group commenting	Summary of Changes
0.1	March 2023	Water Hygiene and Lift Compliance Officer	This is a new Policy.

Page	Version	Date	Author
Page 2 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

Policy Creation and Review Checklist

Action	Responsible Officer	Date Completed
Best practice researched (House mark, HQN, Audit Commission, general websites)	Water Hygiene and Lift Compliance Office	January 2023
Review current practices from similar organisations	Water Hygiene and Lift Compliance Office	January 2023
Review customer satisfaction data from the area the policy relates to	Not applicable	
Review Customer complaints from the area the policy relates to	Not applicable	
Undertake customer consultation if applicable	Not applicable	
Staff consultation if applicable	Water Hygiene and Lift Compliance Office Mechanical and Electrical Manager	January 2023
Trade Union consultation if applicable	Joint Safety Committee	
Stakeholder consultation if applicable	Lift Consultant	January 2023
Equality Analysis carried out	Water Hygiene and Lift Compliance Officer/Health Safety and Compliance Manager	March 2023

NB. The above table must be completed on all occasions. The policy will not be accepted or approved by EMT without this information completed.

Page	Version	Date	Author
Page 3 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

CONTENTS

1.	Introduction	5
2.	Purpose	5
3.	How the Policy will be Implemented	6
4.	Performance measures, targets and triggers	6
5.	Roles, responsibilities and accountabilities	7
6.	Compliance management programme	10
7.	Policy Principles of Passenger and Residential Lift Safety Management	10
8.	Monitoring and Review	11
9.	Management Plan	11

Page	Version	Date	Author
Page 4 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

1.0 Introduction

- 1.1 St Leger Homes of Doncaster have legal duties to ensure the safety of the homes which our customers live in. We manage a [legal register](#) to identify the relevant legislations, approved codes of practice (ACoPs) and guidance that are relevant to the organisation and monitor our compliance with these; including the consumer standards. Lift Management is included in this.
- 1.2 In addition to its legal responsibilities, St Leger Homes of Doncaster is also aware, and fully embraces, its moral duty to 'do the right thing ensuring our employees, customers and other stakeholders are safe at work and not adversely affected by the activities we carry out;
- 1.3 The general Health and Safety duties and responsibilities can be found in the Health and Safety Policy;
- 1.4 St Leger Homes of Doncaster manages a range of assets including single dwellings and non-domestic assets;
- 1.5 The Key Objectives of this Policy is to describe how St Leger Homes of Doncaster will manage Lift Safety Risk so far as is reasonably practicable;

This includes;

- The identification of its specific responsibilities for each of its Assets;
- The key activities (e.g., thorough examination and maintenance) that St Leger Homes of Doncaster undertakes;
- Maintaining competent staff and contractors
- How St Leger Homes of Doncaster, as a Duty Holder, will delegate responsibility for the implementation of this policy, monitor its effectiveness and receive assurance of compliance with this Policy.

2.0 Purpose

- 2.1 The scope of this Policy includes Passenger carrying lifts and other lifting equipment including residential lifting equipment (e.g., hoists, platforms lifts, stair lifts) used to lift people as its principle function;
- 2.2 For the avoidance of doubt, it is only the thorough examination and maintenance of lifting equipment for which St Leger Homes of Doncaster is responsible is dealt with in this policy.

Page	Version	Date	Author
Page 5 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

3.0 How the Policy will be implemented

- 3.1 This policy will be implemented in line with the Housing Act 2004 and other relevant legislation.
- 3.2 Ensuring that adequate resources are available to maintain Compliance with the Lifting Operations Lifting Equipment Regulations 1998 (LOLER) and the Provisions Use of Work Equipment Regulations 1992 (PUWER) standards related to Passenger and Residential Lift Safety are managed as detailed below in the following table.;

Table one Thorough Examination

Equipment Description	Frequency of Inspection
Passenger Carrying Lifts	6 Monthly
Vertical Platform Lifts	6 Monthly
Ceiling Track Hoist	6 Monthly
Step Lifts	6 Monthly
Stair Lifts	12 Monthly

Table Two Maintenance Frequency

Equipment Description	Frequency of maintenance
Passenger Carrying Lifts High Rise	Monthly
Passenger Carrying Lifts Low Rise	Every 2 months
Residential Lifting Equipment	Annually

- The management of assets (e.g.; due dates and actions required) will be managed via our Compliance management system and the Live register which is updated monthly for additions and removals;
- All contractors carrying out Thorough Examinations and Planned Preventative Maintenance will be suitably qualified and Competent;
- Procedures are in place to enable employees to work safely by assessing risks and implementing and monitoring control measures.

4.0 Performance measures, targets and triggers

- 4.1 St Leger Homes of Doncaster use C365 as a Compliance management system and to monitor performance against all KPIs. This allows the Water Hygiene and Lifts Compliance Officer to proactively monitor, measure and report on Compliance activities in real time

Page	Version	Date	Author
Page 6 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

- 4.2 The safety and compliance performance report is the governance and assurance reporting tool for stake holders. This is reported to the Executive Management team on a monthly basis containing all relevant KPIs.
- 4.3 Thorough Examination and Planned Preventative Maintenance work completed, will be by a competent external contractor. The asset will be maintained in line with the current legislation and best practice, unless the competent person undertaking the assessment suggest the maintenance or testing be increased.
- 4.4 Following the Examination or Maintenance visit all actions will be created on St Leger Homes of Doncaster Compliance management system (C365). Each action will be closed down by the Water Hygiene and Lift Compliance Officer once remedial work is completed and a report is received as evidence.

5.0 Roles responsibilities and accountabilities

5.1 Board

The St Leger Homes of Doncaster has Overall responsibility for approving this Policy, delegating responsibility for its implementation, monitoring its effectiveness at high level and receiving assurance of compliance.

5.2 Leadership Team (Executive management team and heads of service)

- 5.2.1 The Leadership Team will take overall responsibility for the delivery of the policy commitments described within this policy document.
- 5.2.2 The leadership team will appoint a Responsible Person (RP) (Head of Building Safety) who will ensure that sufficient resources and information are made available in order that Lift Safety management is maintained.

5.3 Mechanical and Electrical Service Manager

- 5.3.1 The St Leger Homes of Doncaster mechanical and electrical manager is responsible for interpreting relevant legislation and standards and defining the standards and procedures that ensure St Leger Homes of Doncaster complies with such regulations. They are responsible for maintaining the work undertaken to ensure it complies with legislation, including having any relevant items covered by an examination schedule with records kept and sent to the Compliance Officer. They must also ensure that all persons working on Passenger Lifts and Residential Lifting Equipment are competent to do so.
- 5.3.2 The St Leger Homes of Doncaster’s repairs and mechanical Service Manager (or a nominated representative) will attend any applicable meetings as a means of engaging in discussion of Passenger Lifts and Residential Lifting Equipment’s best practice, changes of legislation and other relevant matters

Page	Version	Date	Author
Page 7 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

and report back and disseminate the information as required to St Leger Homes of Doncaster staff.

5.4 Responsible Person

5.4.1 St Leger Homes of Doncaster's Responsible Person (RP) (Head of Building Safety) has the Duty to ensure Compliance with the Policy, Management plan and Compliance with the Regulations.

5.5 Health and Safety Team

5.5.1 The Health, Safety and Compliance team shall provide support and advice to all levels in the organisation with respect to associated Passenger Lifts and Residential Lifting Equipment's standards and safety.

5.5.2 Training will be provided as required dependant on the job role.

5.6 Water Hygiene and Lift Compliance Officer

5.6.1 The Compliance Officer – Water Management and Lifting Equipment is responsible for providing guidance and advice to employees, to ensure the requirements of this policy are implemented at all levels of the organisation, and will:

- Be the accountable person in relation to Lifting Equipment compliance and manage up to date information relating to compliance risks including ensuring the operation and development of appropriate data management systems accurately recording all testing, inspection, and remedial works;
- Lead on ensuring that all Lifts have a Thorough Examination carried out correctly and remedial/follow on works are undertaken on a risk basis;
- Ensure all associated equipment has cyclical and preventative maintenance schedules in place;
- Ensure all staff, including external contractors, are sufficiently competent and skilled in Lift safety and compliance;
- Be able to investigate and resolve any irregularities and non-compliance issues that may arise to a high standard;
- Provide technical support and advice in relation to regulatory requirements to a range of audiences;
- Undertake audits on direct labour/sub contract engineers as required;
- The organisation's Compliance team shall have responsibility for ensuring the maintenance of any Lifting Equipment is undertaken and certification is provided and recorded within C365.

5.7 Contractors

5.7.1 Inspection & Maintenance Contractor

Page	Version	Date	Author
Page 8 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

- These are specialist activities and are contracted out to competent 3rd parties following current procurement rules

5.7.2 Key Activities carried out by engineers to Manage Risk

5.7.3 Thorough Examination

- A thorough examination is a systematic and detailed examination of the lift and all its associated equipment by a competent person. Its aim is to detect any defects which are, or might become, dangerous, and for the competent person to report them to St Leger Homes of Doncaster. St Leger Homes of Doncaster will ensure that a competent person undertakes thorough examinations of all lifts and associated equipment covered by this policy on the following basis:
 - Before first use
 - Following major modification, damage or change of use
 - At void stage (if the lifting equipment is to be retained for use by the new tenant)
 - Regularly whilst in service. This will be every 6 months unless stated otherwise in (section 6 how the Policy will be implemented) that indicates that an alternative frequency is appropriate.

5.7.4 The extent of the thorough examination will depend on the professional judgement of the competent person undertaking the examination, but St Leger Homes of Doncaster shall specify that it needs to include all matters which affect the safety of the lifting equipment, including likely deterioration with time, and shall follow industry guidance.

5.7.5 The thorough examination may identify that additional inspection, supplementary testing or remedial works are required. All follow-up actions will be time-bound and St Leger Homes of Doncaster will seek to undertake the recommended actions in timeframes recommended by the competent person. Any proposed changes to the agreed actions or completion targets will be documented, agreed by a Competent Person and agreed with the St Leger Homes of Doncaster Compliance Management Team.

5.7.6 Inspection & Maintenance

- St Leger Homes of Doncaster will undertake maintenance and inspection in addition to the thorough examination. The nature and frequency of maintenance and inspection activity will be based on the specific equipment and shall take account of manufacturer's instructions, any recommendations from thorough examinations and any risk assessment by a competent person.

Page	Version	Date	Author
Page 9 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

In the absence of manufacturer's instructions, the advice of a competent person will be sought and recorded.

- Inspection or maintenance activity may identify that additional inspection, supplementary testing or remedial works are required. All follow-up actions will be time-bound and St Leger Homes of Doncaster will seek to undertake the recommended actions in timeframes recommended by the competent person. Any proposed changes to the agreed actions or completion targets will be documented, and agreed by a Competent Person.
- The St Leger Homes of Doncaster Compliance Management team will continuously review action points and timescales for completion.
- Inspection or maintenance activity may also identify improvement recommendations that do not affect safety but may be recommended to enhance the lift (e.g., accessibility). These will be recorded and dealt with as part of future planned maintenance activity were reasonably practicable.

5.8 Timescales

All frequencies of any maintenance and inspections are contained within the Management Plan sections 9.0

5.9 Access Procedure

- 5.9.1 All contractors must follow and adhere St Leger Homes of Doncaster requirements for accessing properties.

5.10 Voids

- 5.10.1 When any St Leger Homes of Doncaster property becomes void with lifting equipment in, the mechanical team leader must be made aware to have the asset isolated. This is to prevent misuse of the equipment and also pause the requirements for maintenance and examinations.

6.0 Compliance management programme

- 6.1 All Thorough examination and PPM work will be carried out following current legislations;
- 6.2 All modules are on a cyclical programme based on the policy principles stated in the Passenger and residential Lift safety equipment

7.0 Policy Principles of Passenger and Residential Lift Safety Management

- 7.1 As responsible social landlords, St Leger Homes of Doncaster will minimise the risks associated with Passenger and Residential Lifts and ensure that all safety duties are carried out as stated in section 5.8

Page	Version	Date	Author
Page 10 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

8.0 Monitoring and Review

- This policy will be reviewed every three years for accuracy and appropriateness and will consider any legislative changes or requirements.
- Monitoring of the effectiveness of the policy and policy principles is part of the governance framework and included within monthly performance reporting to EMT.
- Independent auditing functions will be in place as a 3rd line of defence.

9.0 Management Plan

Building Risk Level	Thorough Examination	Frequency
High Rise	Passenger Carrying Lift	Every 6 Months
Low Rise	Passenger Carrying Lift	Every 6 Months
Residential Stair lift	Residential Transport Equipment	Every 12 Months
Residential Lifting Equipment e.g.; Hoist, Through Floor Lift, Vertical Lift	Residential Lifting Equipment	Every 6 Months

Building Risk Level	Maintenance Management	Frequency
High Rise	Passenger Carrying Lift	Monthly
Low Rise	Passenger Carrying Lift	Every 2 Months
Residential Stair lift	Residential Transport Equipment	Every 12 Months
Residential Lifting Equipment e.g. Hoist, Through Floor Lift, Vertical Lift	Residential Lifting Equipment	Every 12 Months

Page	Version	Date	Author
Page 11 of 11	0.1	March 2023	Water Hygiene and Lift Compliance Officer
File Path			

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

Board Meeting

REPORT

Date : 03 August 2023

Item : 09

Subject : Housing Management Policy review

Presented by : Mark McEgan, Director of Housing and Customer Services

Prepared by : Jane Davies, Head of Housing Management

Purpose : To approve the housing management policy following a review

Recommendation:

To approve the housing management policy for immediate implementation

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

**Agenda Item No. 09
Date: 03 August 2023**

1. Report Title

1.1 Housing Management Policy

2. Executive Summary

2.1 The Housing Management Policy was reviewed in 2019 where various policies were brought together to form one comprehensive policy covering all services under the umbrella of housing management.

The policy is extremely significant due to the impact on tenants and neighbourhoods. It was therefore important that tenants were consulted meaningfully in this review.

The Housing Management Policy feeds into the overall Doncaster Tenancy Strategy which City of Doncaster Council are responsible for.

3. Purpose

3.1 The purpose of this policy is to ensure that SLHD carries out a robust, effective, and inclusive housing management function and set down detail of how we will deliver our housing management responsibilities, adhere to the legal framework, and deliver our vision.

4. Recommendation

4.1 Board is recommended to approve the Housing Management Policy for 2023. The full housing management policy is attached as background paper 1.

5. Consultation

5.1 Consultation has taken place with the following groups:

- ✓ Tenant Focus Group
- ✓ Tenant One Voice Forum
- ✓ Housing Management Service Managers
- ✓ All housing management workforce
- ✓ Head of Asset Management

- ✓ Head of Access to Homes
- ✓ Head of Health, Safety and Compliance
- ✓ Head of Customer Services
- ✓ Head of Finance and Business Assurance
- ✓ Income Management Team Leader
- ✓ CDC Legal Services

5.2 All feedback and proposed changes have been recorded and either accepted and changed or not accepted and fed back the reasons why. The full table of changes is attached as background paper 2.

9. Procurement

9.1 There are no procurement issues arising from this report.

10. VFM Considerations

10.1 There are no VFM issues arising from this report.

11. Financial Implications

11.1 There are no financial implications arising from this report.

12. Legal Implications

12.1 Legal Services have been consulted and happy with the proposed changes.

13. Risks

13.1 The main risk is around ensuring our workforce are structured and skilled to deliver the services set out in this policy.

14. Health, Safety & Compliance Implication

14.1 Health, Safety and Compliance implications exist mainly around no access for essential regulatory safety work and the management of high-risk buildings. The Head of Health, Safety and Compliance has been consulted and involved in this review and the wording around no access has been strengthened.

15. IT Implications

15.1 There are no IT implications arising from this report.

16. Consultation

16.1 Consultation is set out earlier in the report.

17. Diversity

17.1 An equality analysis has been completed.

18. Communication Requirements

- 18.1
- Communication requirements to tenants, particularly those involved in the consultation.
 - Communication to staff responsible for deliver of these services.
 - Communication to other departments in the organisation where relevant.

19. Equality Analysis (new/revised Policies)

- 19.1 An Equality Analysis has been completed and submitted via our Intranet. There are no positive or adverse effects identified for any particular groups of tenants.

20. Environmental Impact

- 20.1 Some of the changes involve more regular and tighter monitoring of estates including open plan land, trees in enclosed gardens, communal areas and estate inspections. These changes will have a positive environmental impact on our estates.

21. Report Author, Position, Contact Details

- 21.1 Jane Davies, Head of Housing Management

22. Background Papers

- 22.1 Housing Management Policy 2023
22.2 Table of Changes



POLICY DOCUMENT

Housing Management

POLICY TITLE:	Housing Management Policy
LEAD OFFICER:	Head of Housing Management
DATE APPROVED:	3 August 2023
APPROVED BY:	Board
IMPLEMENTATION DATE:	1 September 2023
DATE FOR NEXT REVIEW:	September 2026
ADDITIONAL GUIDANCE:	Housing Management Strategy 2019 – 24 Housing Management Procedures Doncaster Tenancy Strategy 2018 – 21 Secure Tenancy Agreement
ASSOCIATED CUSTOMER PUBLICATIONS:	
TEAMS AFFECTED:	Housing Management – Area Teams, Tenancy Sustainability, Safeguarding & ASB team Asset Management Health & Safety
THIS POLICY REPLACES WITH IMMEDIATE EFFECT:	Housing Management Policy 2019

DOCUMENT CONTROL

Revision History

Date of this revision:	August 2023
Date of next review:	September 2026
Responsible Officer:	Head of Housing Management

Version	Date	Author / Group commenting	Summary of Changes
0.1	May 2023	Head of Housing Management	Reviewed
	May 2023	Housing Management staff	Table of changes produced
	June 2023	Tenant Focus Group	Table of changes produced
	June 2023	Heads of Service	Table of changes produced
0.2	July 2023	EMT	Agreed to go to Board for final approval
1.0	August 2023	Board	

Contents

DOCUMENT CONTROL	1
Housing Management.....	3
1. Introduction	3
2. Purpose	3
3. Scope	3
4. Responsibilities	4
5. Tenancy Types	4
6. Ending Tenancies	8
7. Tenancy Changes	10
8. Tenancy and Estate Management	13
9. Anti-Social Behaviour (ASB).....	18
10. Garage Management	25
11. Safeguarding, Vulnerability and Domestic Abuse	29
12. Rent Collection and Arrears Recovery	34
13. Tenancy Sustainability.....	38
14. Information Sharing and Data Protection.....	38
15. Workforce Development	39
16. Partnership Framework	39
17. Links to other policies	40
18. Customer Involvement and Consultation	40
19. Performance Management	40
20. Feedback	41



POLICY DOCUMENT

Housing Management

1. Introduction

- 1.1 St Leger Homes of Doncaster (SLHD) aspire to deliver first class, efficient and effective housing management with a mission of 'creating successful, thriving, and sustainable tenancies' within safe and clean estates and communities. The Support to Sustain model is designed to identify tenants support needs and provide the right level of support to provide confidence, skills, and capacity to manage and sustain tenancies. This was approved through Board.

We also aim to deliver fairness and equality across all the services we deliver, and a full and comprehensive Equality Impact Assessment has been undertaken of this policy.

The Secure Tenancy Agreement sets out the rights and responsibilities of both the landlord and tenant and ensures services are delivered within the Housing Act 1985.

2. Purpose

- 2.1 The purpose of this policy is to ensure that SLHD carries out a robust, effective, and inclusive housing management function and set down details of how we will deliver our housing management responsibilities, adhere to the legal framework, and deliver our vision.

3. Scope

- 3.1 The policy applies to all council tenancies managed by SLHD and impacts on the wider communities including private residents on our estates who may be affected.
- 3.2 The policy applies to all leaseholders within buildings managed by SLHD.
- 3.3 The policy relates and delivers against the following:
- Secure & Introductory Tenancy Agreements
 - City of Doncaster Council (CDC) Tenancy Strategy

Page	Version	Date	Author
Page 1 of 38	1.0	August 2023	Head of Housing Management

3.4 The policy covers the following housing management functions and responsibilities:

- Tenancy Types
- Ending Tenancies
- The circumstances in which SLHD will grant a fixed term tenancy and the circumstances in which the tenancy will be reviewed and extended or ended
- Tenancy Changes
- Tenancy and Estate Management
- Garage Management
- Anti-Social Behaviour and Tenancy Breaches
- Safeguarding and Vulnerability
- Rent Collection & Arrears Recovery

4. Responsibilities

4.1 SLHD employees must adhere to the principles set out in this policy. Detailed procedures sit underneath this policy to ensure our workforce deliver services aligned with this policy and in an effective and consistent way.

Overall responsibility for the effective delivery of this policy is with the Director for Housing and Customer Services and Head of Housing Management.

5. Tenancy Types

5.1 The CDC Tenancy Strategy 2018 sets out the types of tenancy that the Council will offer:

- Secure 'lifetime' tenancies
- Introductory tenancies
- Secure 'fixed term' tenancies
- Licences

SLHD will offer tenancies as per the circumstances set down in the Tenancy Strategy and Council's Allocations Policy.

5.2 SLHD manage private rented properties on behalf of private landlords via St Leger Lettings (SLL). These properties are let as Assured Shorthold Tenancies (ASTs) and processes are delivered in accordance with legislation. SLL do not hold agreements with private tenants and manage these on behalf of the landlords via a management agreement between SLL and each private landlord.

5.3 *Introductory Tenancies*

All new tenancies will be introductory tenancies unless the applicant is an existing secure tenant of: -

- City of Doncaster Council (CDC)
- Any other Council; or is
- A tenant of a private registered provider of social housing such as a Housing Association and is on an assured tenancy with them.

Page	Version	Date	Author
Page 2 of 38	1.0	August 2023	Head of Housing Management

A minor (person under 18) who cannot hold a secure tenancy will be granted a licence agreement and, in most cases, will have a suitable person to act as a guarantor until they reach the age of 18 years. At the age of 18 years, he or she will be required to sign an introductory tenancy agreement, this will usually last for 12 months and automatically transfer to a secure tenancy if there have been no tenancy related issues.

Minors who succeed tenancies following the death of a tenant will be allocated a tenancy on trust until they reach the age of 18 years. The identified trustee will also be asked to act as guarantor.

All introductory tenancies will last for 12 months unless they are extended. The tenancy can be extended for up to a maximum of 6 months, making the introductory period 18 months. All extensions to introductory tenancies will comply with the law and the tenant will be given the right of appeal against the extension.

5.4 *Joint Tenancies*

Where possible SLHD will offer joint tenancies when the tenancy is first signed, unless not appropriate to do so. A joint tenancy is when two or more persons are named on a tenancy as the tenants of the property. All persons named on the tenancy have equal security of tenure and are joint and severally liable for adhering to the terms of the Tenancy Agreement. In law, up to four people can be joint tenants of a property.

Joint tenancies can be granted to: -

- Married couples or those living in civil partnerships
- Applicants living together as a couple
- Two people who have originally joined the housing register together and both applicants are moving into the property

SLHD will normally allow only two persons to be on a joint tenancy but will consider more in extenuating circumstances up to a maximum of four persons.

A joint tenancy can be changed into a single tenancy in the following circumstances: -

- By a court order (property adjustment order / transfer order Matrimonial Clauses Act 1973 & 1983).
- Where one tenant dies, the right of survivorship takes effect, passing the deceased tenant's interest in the property to the other joint tenant. This uses up the one legal right of succession, therefore nobody has the right to succeed to the tenancy in future.

Either joint tenant has the right to terminate the tenancy and should give vacant possession of the property. If a joint tenant wishes to remain in the property after the termination of the tenancy, SLHD would need to grant a new tenancy. The decision as to whether a new tenancy should be granted is based on the circumstances of the case taking into consideration the Doncaster Council Allocations Policy. The decision will be made by the area housing team and escalated to Housing Assessment Panel (HAP) for

Page	Version	Date	Author
Page 3 of 38	1.0	August 2023	Head of Housing Management

complex cases or those outside the allocations policy. All circumstances will be considered including vulnerability and affordability with the objectives of the best use of housing stock and prevention of homelessness.

An existing sole tenant can apply to change the tenancy to a joint one. All applicants must be living in the property for a period of twelve months or more as their only and principal home and the rent account must be clear.

SLHD will not unreasonably refuse such requests but will assess the circumstances and will refuse in the following circumstances: -

- If there are existing current rent arrears.
- If there are any former tenants' arrears or other housing related debt.
- If the applicant is a homeowner.
- If the property has been adapted, then consideration must be given as to whether a joint tenancy can be granted.
- Consideration must be given to the size and suitability of the property.
- Age designated accommodation where the applicant does not meet the age criteria for the property.
- If a tenancy has been created by way of a succession or assignment, then a joint tenancy will not be granted at any point during the tenancy period as this would give a second right to succession or assignment which is not permitted by law under Section 91 of the Housing Act 1985.
- If by granting a joint tenancy and the current tenant dies that the property would either be under-occupied or is age designated.
- Where the property is under-occupied.
- The applicant is named on any other tenancy.
- There is a demotion order in place.
- A Possession Order is in place.
- A Suspended Possession Order is in place.
- There are breaches of tenancy for which action is ongoing.
- On Introductory or Licence tenancies unless in exceptional circumstances

5.5 *Secure 'Fixed Term' Tenancies*

The Localism Act 2011 introduced a new duty on local authorities to publish a tenancy strategy setting out how the Council will make best use of flexibilities with tenancy types and terms. Doncaster's tenancy strategy was reviewed in 2018 following the Localism Act 2011, which placed a greater duty on local authorities to consider fixed term tenancies.

The objectives of the strategy are to:

- Enable the best use of stock.
- Enable access to suitable accommodation.
- Help maintain stable and vibrant communities.
- Ensure that the fundamental principle of having a secure home in a balanced and stable community is at the heart of all housing providers 'tenancy policies across Doncaster; and
- Inform residents what they might expect when they move into or between

Page	Version	Date	Author
Page 4 of 38	1.0	August 2023	Head of Housing Management

social housing properties.

The strategy sets out that secure ‘lifetime’ tenancies are the default tenancy the Council will offer except in certain circumstances, which are:

- 4, 5, 6-bedroom properties
- Properties with significant adaptations and allocated via the Council’s accessible housing register

The length of fixed term tenancies will be:

- 4, 5, 6 bedrooms – until the youngest child in the household reaches 19 years
- Adapted – minimum term of 5 years

We will carry out a review of all fixed term tenancies 6-9 months before the end of the fixed term. SLHD will seek to renew the tenancy where possible unless there are specific grounds not to do so. SLHD will consider the following circumstances when deciding whether to renew a fixed term tenancy:

- The household makeup and the occupancy levels and whether they still require the size of property as per the current allocations policy.
- Relevant vulnerabilities and health needs of household members particularly where a tenant or household member is seriously or terminally ill.
- Any caring responsibilities of the tenant to a member of the household and/or relatives/neighbours within proximity.
- Whether the property was allocated as an adapted tenancy and whether that person still resides in the property and needs the adaptations.
- The support needs of the household and whether this could be jeopardised by a decision to end the tenancy.
- The conduct of the tenancy and whether there are ongoing breaches of tenancy.
- Affordability – this will not be considered as a primary reason to end a tenancy and will be considered alongside other factors. An appropriate affordability assessment will be carried out and support offered to assist with affordability.

SLHD will always look to provide suitable alternative accommodation when ending a fixed term tenancy.

5.6 *Licence Agreements*

SLHD will issue licence agreements to 16/17-year-olds with a guarantor. The joint protocol for care leavers with CDC Children’s Services enables care leavers to be granted a licence with the trust acting as guarantor. All licences will be transferred into introductory secure tenancies at the eighteenth birthday of the licensee, unless grounds exist to refuse or defer this.

6. Ending Tenancies

6.1 *Ending a sole tenancy*

Page	Version	Date	Author
Page 5 of 38	1.0	August 2023	Head of Housing Management

On termination of a tenancy, all tenants must provide a minimum of four weeks' notice and hand the keys in to any housing office. If a tenant hands the keys in without giving the correct notice SLHD will continue to charge rent until the property is re-let up to the maximum four-week notice period from the date the keys were returned.

The notice period will be waived for tenants going into residential care once a permanent residence has been agreed.

An NTQ must expire on either the first or last day of the period of the tenancy/licence. SLHD tenancy periods run from Monday to Sunday and therefore notice periods are calculated 28 days from the following Sunday after the valid NTQ is received. The tenancy will end on the date the tenant returns the keys, unless this is before the notice expires, in which case the tenancy will continue until the end of the notice period.

The tenant must hand the property back in good condition with all items and rubbish removed. The garden should be cleared, and all unauthorised external structures removed.

Vacant possession must be provided to allow the tenancy to be ended.

Any alterations or improvements made by the tenant should have had permission granted from SLHD. If alterations are found with no permission, SLHD will ask these to be restored to the original condition or may charge for this work to be carried out.

SLHD will reasonably recharge for costs associated with rectifying properties to re-let in accordance with our Rechargeable Repairs Policy.

If a tenant wishes to retract their notice they are not legally permitted to do so. In these circumstances SLHD will consider all the relevant circumstances before deciding whether it is appropriate for the tenant to remain in the property and if so, issue a new tenancy.

6.2 *Ending a joint tenancy*

Where there is a joint tenancy, any person named on the Tenancy Agreement can terminate the tenancy without the consent of the other joint tenant/s. If one tenant terminated the joint tenancy, the remaining tenant/s would no longer hold a tenancy. In this situation SLHD will consider the circumstances and whether the remaining tenant qualifies for a sole tenancy under the terms of the Allocations Policy. There would be no automatic right for the tenant to remain in the property.

Joint tenants are required to give a minimum of four weeks' notice as in sole tenancies and tenancies will end on a Sunday after the 28 days notice.

If the above scenario takes place and there are rent arrears, SLHD will handle the arrears in the following way: -

- The level of rent arrears will be considered as part of the decision to award a sole tenancy. The expectation is that all arrears will be paid prior to the

Page	Version	Date	Author
Page 6 of 38	1.0	August 2023	Head of Housing Management

commencement of a new sole tenancy and all joint tenants are liable for this.

- Should the decision be made to award a sole tenancy where rent arrears exist, the whole debt will be transferred to the remaining sole tenant as part of their new tenancy.
- The debt will be enforceable against the new tenancy via repossession, however any existing Notice of Seeking Possession or court order will be void and would require reissuing against the new sole tenancy

6.3 *Storage of contents*

Tenants must remove all contents from a vacated property. If a tenant leaves contents in a property after vacating either through termination, abandonment or eviction, an inventory will be undertaken, and an estimated value placed on the belongings. Items deemed to have low or zero value will be disposed of. Other items will be stored for a period of 28 days. We will serve a notice under the provisions of Section 41 of the Local Government (Miscellaneous Provisions) Act 1982 and will send this to the last known address or forwarding address if one has been provided.

If the items are not collected, we will donate to charities or our own Garage 32 recycling scheme. The removal and disposal of items and rubbish left within the property or garden following a tenancy ending, including disinfestations, and washing down of dirty walls or fixtures and fittings will be carried out by SLHD. SLHD Rechargeable Repairs Policy sets out the circumstances in which we will recharge costs to tenants.

6.4 *Abandoned Tenancies*

If a tenant ceases to occupy a property as their only or principal home and they have not given notice or handed in the keys, SLHD will, if after thorough investigation conclude they have no intention to return, deem the tenancy abandoned and accept this as implied surrender of the tenancy, following all reasonable attempts to locate the tenant.

Wherever possible we will serve a notice to quit and apply to court for possession and will take all reasonable steps to locate the tenants' whereabouts to do this. If we are unable to locate the tenant, we will serve a Notice to Quite (NTQ) at the property as their last known address.

If all reasonable enquiries have been made and it is obvious that the tenant has left the property, the tenancy will be treated as surrendered and the locks will be changed as a matter of urgency. Evidence can include, for example, the contents having been removed, the tenant not being seen by neighbours, and the dustbin being empty. In this situation the final decision must be made by a Service Manager.

Four weeks rent will be added to the rent account in these circumstances from the date the NTQ is served. SLHD will change the locks for security purposes but may provide them back to the tenant should they return within the notice period.

Under such circumstances, we will undertake a detailed inventory of any

Page	Version	Date	Author
Page 7 of 38	1.0	August 2023	Head of Housing Management

belongings left in the property and keep photographic evidence where possible. We will store the tenant's belongings, where appropriate to do so. If we are aware of the tenant's whereabouts, we will write to the tenant advising of the need to recover their belongings within 28 days.

If we are unaware of the tenant's whereabouts, we will store for a minimum period of 28 days. After this period the belongings will be dealt with as per paragraph 6.3.

We will recharge to the tenant any costs associated with the storage and disposal of tenant's belongings at their last known address.

6.5 *Deceased Tenants*

In the event of a sole tenants' death where no one is entitled to succeed to the tenancy, the tenancy will need to be terminated. That can be done either by a person who the tenant has chosen to be the executor of their estate or a person who has applied to administer the estate and has been given the power to end the tenancy. In the absence of either an executor or an administrator St Leger Homes will take the necessary legal steps to serve a notice to quit and end the tenancy that way. Rent continues to be payable after the death and until the keys are returned to St. Leger Homes of Doncaster.

SLHD will provide a period of grace for relatives to clear the property and appreciate the time immediately after a relative's death is a difficult time. We will allow up to two weeks rent-free following the death.

SLHD will seek proof of the death by way of the deceased residents list from the coroner. Should the tenant have passed away out of the area, they will not be included in this list and SLHD will request a copy of the death certificate from the next of kin before the tenancy is ended.

7. Tenancy Changes

7.1 *Successions*

The rights of tenants to succeed to a tenancy is legislative and outlined in the Housing Act 1985. The Localism Act 2011 Act reduced succession rights to a spouse or civil partner (or persons living together as if they were a spouse or civil partner) only but gave landlords the discretion to expand this to other relatives by making this an express term in the tenancy agreement.

As per the CDC Tenancy Strategy, the right of succession will extend beyond spouse and partner to other immediate family, brother, sister, child and adult grandchild. Only one succession is permitted in law and SLHD will only allow this.

If a relative is left in occupation and does not qualify to succeed, then SLHD will undertake a full assessment of the circumstances and refer to the Area Housing Service Manager for a decision as to whether the occupant can be granted the tenancy or refer to our Housing Assessment Panel for an alternative property. We do reserve the right to refuse applications to remain in the current property to make best use of housing stock and will provide all necessary help, advice, and support to secure alternative accommodation in these circumstances.

Page	Version	Date	Author
Page 8 of 38	1.0	August 2023	Head of Housing Management

If an occupant succeeds to a tenancy but the property is deemed unsuitable either due to under occupation, age-designation, or adaptations which the successor does not require, SLHD will consider using Grounds 13, or 15A of the Housing Act 1985 to repossess the property and make every attempt to help the tenant relocate to reasonable alternative accommodation. Legal enforcement action will be taken as a last resort and circumstances and vulnerability will be considered. As a last resort a Notice of Seeking Possession will be served after alternative accommodation has been offered and 6 months after the death of the previous tenant and within 12 months. If the successor was either a joint tenant, spouse or common law partner this does not apply, and the successor will be able to remain in the property.

7.2 *Assignments*

The rights of tenants to assign or exchange their tenancy is legislative and outlined in the Housing Act 1985, amended 1996. SLHD will only approve assignments in the following circumstances:

- The assignee is a qualifying individual i.e., ‘would be successor’;
- The tenant is residing in the property as their only and principal home.
- The assignee is residing in the property as their only and principal home – if they aren’t a spouse or civil partner the assignee must have been living in the property for 12 months at the time of application.
- The rent account is clear.

The property is suitable for the assignee in relation to size and type and is not adapted or age designated

7.3 *Mutual Exchanges*

The correct legal term for a mutual exchange is assignment by way of exchange. We will process applications within the statutory timescale of 42 calendar days from the date of the application. Failure to decide within the maximum period of 42 days will result in approval of the exchange by default.

Exchange requests will be refused for any of the grounds set out in Schedule 3 of the Housing Act 1985, the main grounds are: -

- Where there is a valid Possession Order (legal action for eviction) against one of the tenants or a Notice Seeking Possession has been served and is still in force
- The exchange would result in either under occupation or overcrowding of one or both properties
- One of the properties has been designed or adapted for special housing needs and these facilities would not be required by the incoming tenant.
- The premises were let in consequence of employment and form part of, or are in the grounds of a non-housing building
- Ground 2a – S191 Housing Act 2004 also allows a landlord to withhold consent for a mutual exchange if one of the tenants has an injunction, demotion order, ASBO or possession order granted on the grounds of anti-social behaviour in force or court action is pending.
- Where the rent lawfully due from the tenant has not been paid or an

Page	Version	Date	Author
Page 9 of 38	1.0	August 2023	Head of Housing Management

obligation of the tenancy has been broken or not performed (section 92(5)). In this case consent can be given subject to a condition.

If there are no grounds to refuse the exchange outright conditional consent will be given. This means that the exchange can be agreed in principle but delayed until certain conditions are complete. In this case, we will notify the tenant in writing before the end of 42 days from receiving the application. Our letter will specify the actual breaches of the Tenancy Agreement, the action required to remedy those breaches and a timescale to remedy the breaches.

Where conditional consent is given, the exchange will only be allowed to take place when all the conditions have been satisfied.

7.4 *Mutual Exchanges between flexible tenants and secure tenants*

The Localism Act 2011 provides that if a secure or assured tenant whose tenancy commenced before 1 April 2012 wishes to exchange their property with a tenant holding a flexible or fixed term tenancy, the exchange will be achieved by surrender and re-grant of new tenancies.

Section 158 Localism Act 2011 provides that surrender and re-grant will take place where:

- at least one of the tenants who wishes to transfer has a secure or assured tenancy which commenced before 1 April 2012
- at least one of the tenants has a flexible tenancy or fixed term assured short hold tenancy

All existing tenants retain the security of tenure enjoyed under their original tenancy before exchange. However, they will only be able to retain this security once because should they ever exchange again, they will fall outside the requirements of s158 in that the tenancy would have commenced after 1 April 2012.

Surrender and re-grant do not apply where a secure or assured tenant exchanges with:

- tenant with a fixed term tenancy of less than two years
- affordable rent tenant (the landlord can charge up to 80% of what it would cost if you were renting the property privately),
- intermediate rent tenant (tenants who pay rent levels below the normal market rent level in that area, although rents are higher than what a tenant would normally expect to pay in social housing),
- mortgage rescue tenant (typically where a housing association buys their property and rents it back to them as assured short hold tenants).

Secure or assured tenancies granted after 1 April 2012 will not retain security of tenure (not protected by s158) if they exchange and mutual exchange will take place by deed of assignment which means, if a secure or assured tenant wants to exchange with a fixed term tenant, they lose their security of tenure.

7.5 *Transfers*

Page	Version	Date	Author
Page 10 of 38	1.0	August 2023	Head of Housing Management

Applicants who are existing tenants, who have lived in their property for over 12 months and are not eligible to be included in any category of the Housing Register will be placed onto the transfer list after a satisfactory inspection of their home and confirmation of satisfactory tenancy conduct. We will carry out a pretransfer inspection of the property prior to transfer applicants being allowed to bid and will not allow applicants to bid if their property is not up to an acceptable standard.

We will also carry out a technical inspection of the property at the time of an offer of a transfer and will not allow transfers to proceed if the property is not up to an acceptable standard. Exceptions to this will be considered on an individual basis and normally only medical grounds will be considered.

Applicants with rent arrears or other housing related debt equivalent to eight weeks rent arrears will not qualify to join the register until their arrears reduce. This includes current or former tenant arrears.

If a customer is registered with housing related debt, it is expected that they will clear the arrears in full before any offer of accommodation is made. If a tenant is moved due to extenuating circumstances such as fleeing violence and has rent arrears, we will transfer the arrears from the former tenancy to the new tenancy. We will continue to actively recover this debt and expect the tenant to make and keep to an arrangement to clear the debt.

Current tenants affected by under-occupation restrictions to housing benefit under Welfare Reform will be assessed separately by the Tenancy Sustainability team and can be rehoused with rent arrears and/or housing related debt where there are issues of affordability and sustainability. We will transfer and manage arrears in the same way as the paragraph above.

8. Tenancy and Estate Management

8.1 *Enforcement of tenancy conditions*

SLHD adopts a zero-tolerance approach to breach of tenancy conditions and will take all necessary steps to ensure tenants are able to live in quiet enjoyment of their property. We have robust processes and procedures in place to take quick and effective enforcement action and will, utilise all tools and powers available to us. Cases are categorised as follows: -

- Anti-Social Behaviour
- Tenancy Breach
- Safeguarding

We respond to different types of problem based on the level of priority, as follows:

High Priority Category – within 1 working day (usually same day) – e.g., cases involving threats of physical assault, hate crime, safeguarding, serious intimidation or harassment, racial incidents, criminal activity and domestic violence. Serious damage to St Leger Homes of Doncaster property or insecure premises.

Medium Priority Category – within 3 working days – e.g., allegations of verbal abuse, youth nuisance, noise nuisance, harassment.

Page	Version	Date	Author
Page 11 of 38	1.0	August 2023	Head of Housing Management

Low Priority Category – within 5 working days – e.g., Minor neighbour disputes, minor breaches of tenancy, access/boundary disputes, garden nuisance.

SLHD will carry out a thorough investigation into all complaints received to ensure the most appropriate action is taken to resolve the issues.

SLHD see eviction as a last resort and will make every effort to work with perpetrators of anti-social behaviour and obtain the necessary support to improve their behaviour. However, if such efforts fail, we will take the necessary legal steps to repossess a tenancy should the tenant continue to breach their agreement.

We will liaise with mental health services where vulnerability and mental health exist and will work with partners to try and resolve issues prior to any enforcement action being undertaken – see section 11.8 on mental health and equalities assessments.

8.2 *Tenants fleeing non-domestic violence*

Tenants fleeing violence is dealt with differently and is set out in section 9.7.

Tenants fleeing non-domestic violence are dealt with in two ways. A tenant has the choice which route they wish to progress:

A – make a homeless application under the Homeless Reduction Act and placed in temporary accommodation if found to be in priority need and unable to return. With this option we will encourage termination of the secure tenancy if there is no intention to return and we may discharge the homeless duty into the private sector.

B – do not make a homeless application and not placed in temporary accommodation. We will investigate fully and request a direct match transfer if the household qualify for this and source one offer of alternative council accommodation in an area of the borough that is deemed safe by the Police.

8.3 *No Access – health, safety, and compliance*

SLHD puts the health and safety of its tenants before anything else and has a zero-tolerance approach to tenants who prevent or hinder access for the purposes of carrying out essential health and safety checks and maintenance work.

The tenant is responsible for granting access for SLHD to carry out all regulatory standard work and emergency repairs and must comply with allowing access for their own safety and the safety of other tenants.

Attempts will be made to gain access without the need for legal enforcement action but if attempts fail, depending on the specific circumstances we will obtain a warrant, or a legal injunction will be obtained to gain access without further delay. Costs associated with any legal action will be re-charged to the tenant.

Where tenants repeatedly prevent access, we will use demotion and/or possession proceedings as appropriate considering equality and proportionality.

8.4 *Fire Safety*

Page	Version	Date	Author
Page 12 of 38	1.0	August 2023	Head of Housing Management

Fire safety is paramount to the safety of our tenants and communities, and we will ensure we comply fully with the Building Safety Act 2022. We will carry out fire safety checks as per our Fire Safety Management Plan. We will take legal action to gain entry if access is denied.

We liaise and work closely with South Yorkshire Fire and Rescue and will request fire safety visits and checks as required.

We ask that any tenant who has an oxygen tank fitted to let us know and this is in the tenancy agreement. We will advise South Yorkshire Fire and Rescue when properties are fitted with an oxygen tank and when they are removed. Tenants/other residents must ensure that they only use oxygen tanks in strict compliance with any safety instructions or could themselves and others at risk. As a last resort, SLHD will take enforcement action if safety instructions are not being adhered to and the actions are putting themselves or others at risk of significant harm.

8.5 *Parking / Vehicles*

Section 2.4 of the Secure Tenancy Agreement clearly states where tenants are permitted to park and not permitted to park on and around the property and estate. We will take appropriate enforcement action on anyone breaching these tenancy conditions after taking all circumstances into consideration.

Tenants are not permitted to park any vehicle on the property except where there is a hard standing, driveway or paved area intended for parking and tenants must not park any vehicle on a shared driveway.

Additionally, tenants must not park on, or cross any footpath, open plan or communal area without obtaining consent for and installation of an approved vehicular access which includes a dropped kerb, hard standing and double gates, where appropriate.

8.6 *Gardens and Trees*

Tenants are responsible for the upkeep of their garden. Section 2.6 of the Secure Tenancy Agreement states the tenant obligations with regards maintenance of the garden, boundaries, and encroachment.

SLHD will take enforcement action against the tenant if the garden is not maintained to an acceptable standard. We will always try to support and assist and assess the most appropriate action which could include:

- Carry out the remedial work by default by our in-house team and recharge the cost to the tenant
- Seek an injunction through the court
- In serious cases apply for demotion or possession of the tenancy
- Work with Environmental Health in cases where the condition is prejudicial to health

Tenants must not prune or plant their own trees in enclosed gardens due to this work requiring an arboricultural specialist.

Page	Version	Date	Author
Page 13 of 38	1.0	August 2023	Head of Housing Management

Tenants of new build properties where shrubbery has been installed to discharge planning regulations must not remove this. If tenants do remove it SLHD will reinstate and recharge the tenant for the cost.

8.7 *Pets and Animals*

Section 2.7 of the Secure Tenancy Agreement outlines the obligations for tenants with regards pets and animals kept on the premises. These obligations include the type of animals permitted and the behaviour and any nuisance caused by animals. Tenants are wholly responsible for animals kept on their premises.

SLHD will only allow dogs in high-rise accommodation where it is a requirement to address a disability (which could be physical or mental). SLHD must provide permission in these circumstances and will request medical proof of requirement.

SLHD will require all dog owners in flats to sign a Responsible Dog Owner contract and abide by the requirements. We will take enforcement action against the tenant for nuisance caused by animals in or around the property.

8.8 *Communal Areas*

Section 2.8 of the Secure Tenancy Agreement outlines the obligations for tenants with regards communal areas.

Tenants must not store items in communal areas and areas are to be kept clean, sterile, and safe always. Communal area doors must not be propped open and must be always closed.

SLHD will ensure communal areas are cleaned on a regular basis. High rise buildings will be cleaned and checked daily Monday to Friday by our in-house caretaker team.

SLHD officers will inspect every communal area every quarter as a minimum standard. Some areas which are deemed higher risk will be inspected more regularly. Items stored or left in areas which are causing an obstruction or fire risk will be removed without notice.

8.9 *Grounds Maintenance & Arboriculture*

SLHD manage Housing Revenue Account (HRA) land on behalf of City of Doncaster Council (CDC) as part of the delegated responsibilities in the management agreement. This includes open plan land, hedges, footpaths, unadopted roads and play areas. The land is detailed in a schedule agreed and reviewed between SLHD and CDC on an annual basis. The maintenance of these areas is undertaken by CDC via a Service Level Agreement (SLA). Maintenance standards are contained within the SLA and provide a minimum standard of thirteen visits per year. Each visit includes litter picking and blowing grass cuttings off the paths onto the grassed area. Standards are monitored by SLHD via

- Tenant reality checks
- Estate Inspections
- Complaints

Page	Version	Date	Author
Page 14 of 38	1.0	August 2023	Head of Housing Management

SLHD are responsible for and will maintain all trees on HRA open plan land and those in tenant's enclosed gardens. SLHD have adopted the Council's policy with regards the management of trees and will only prune, remove or treat trees if they are dangerous and/or a health and safety risk. Exception to this is conifers, which can be removed if they are causing a nuisance.

8.10 *Estate Inspections*

SLHD carry out estate inspections on every estate in the borough at least once a year. Estates are categorised and inspected as follows as a minimum:

- Low – once a year
- Medium – once every 3 or 6 months
- High/Hot Spot – to be agreed following assessment but will be monthly as a minimum and normally weekly or fortnightly
- Ad Hoc – these will be carried out by the Customer Involvement team as engagement opportunities

Additional estate inspections can be undertaken as ad-hoc or in response to an issue or incident.

The estate inspection programme is published on the website, in Houseproud and via Tenant and Resident Associations (TARAs). Tenant representatives, ward members and partners are encouraged to attend.

The results of estate inspections are summarised in a report and all issues identified are actioned accordingly.

8.11 *Mobility Scooters / Electrical Charging Appliances*

This section sets out how SLHD will consider requests from tenants and leaseholders to use, store and charge mobility scooters on land managed by SLHD.

SLHD is committed to maximising choice and independence and recognise the value of mobility aids such as mobility scooters to tenants in maintaining their independence.

However, at the same time, SLHD has a duty to ensure high standards of health and safety within all properties at all times, for tenants, leaseholders, staff and visitors. SLHD has limited storage facilities for mobility scooters, which are becoming more common, especially in age-designated properties and high-rise accommodation and have no obligation to provide this.

In addition to causing an obstruction, the storage of mobility scooters within communal areas and pathways creates an additional safety risk within designated escape routes.

Section 2.8(c) of the Secure Tenancy Agreement states that communal areas must be kept free from the storage of any items including mobility scooters. Tenants were consulted on this addition to the tenancy agreement as part of the review along with the fire service.

Tenants and leaseholders who wish to use, store, and charge a mobility scooter

Page	Version	Date	Author
Page 15 of 38	1.0	August 2023	Head of Housing Management

on land managed by St Leger Homes of Doncaster must apply to SLHD and a risk assessment will be carried out and help and support be provided to seek alternative solutions.

Permission to store mobility scooters in communal areas will not be granted for the reasons stated above and SLHD will take the appropriate enforcement action against tenants and leaseholders who breach this either via injunction and/or enforcement of the tenancy agreement. SLHD reserve the right to take steps to remove the mobility scooter and may recharge any costs associated with the enforcement action and removal costs.

SLHD also recognise that other electrical charging equipment and appliances such as lithium battery scooters can be stored and charged in tenant's homes. We fully expect tenants to ensure such items are charged in a safe and responsible way, considering fire safety risks.

9. Anti-Social Behaviour (ASB)

9.1 *Our approach to ASB*

This part of the policy sets out our approach to anti-social behaviour (ASB). It specifically aims to deal with ASB where SLHD tenants or leaseholders are involved in a dispute either as a victim or perpetrator. It is based upon principles set out in the Doncaster Community Safety Strategy 2022 – 2025 and seeks to adopt a joint approach with the partnership in dealing with ASB. This policy applies to all customers of SLHD regardless of tenure or property type.

The purpose of this policy is to inform our customers, staff, and key partners of our approach towards ASB. It also ensures SLHD has a fair, transparent, and consistent approach to how we react to, tackle and prevent reports of ASB. The policy sets out the standards we expect from ourselves and outlines what we expect from our partners and customers. Preparation and publication of this policy is a requirement of the Anti-Social Behaviour Act 2003. The policy and associated procedures draw on good practice developed from a range of sources.

- RESOLVE (formerly the Social Landlords Crime and Nuisance Group)
- Department for Levelling Up Housing and Communities (DLUHC)
- Housemark
- Shelter
- Chartered Institute of Housing (CIH)
- Office for the Information Commissioner (OIC)
- Northern Housing ConsortiumSB Help (registered charity)
- www.asbtools.co.uk

SLHD will do all within its power as an Arms Length Management Organisation (ALMO) to create and sustain communities, by preventing ASB from occurring in the first instance. When ASB does occur, it will deal with it in a timely, fair, firm and consistent manner, ensuring a victim centred approach and that enforcement and rehabilitation is pursued where necessary and appropriate.

Our objective is to create neighbourhoods where our tenants and their families can enjoy a quality of life free from crime and ASB. To achieve this objective, we

Page	Version	Date	Author
Page 16 of 38	1.0	August 2023	Head of Housing Management

need to work closely with partners and tenants and the wider community. We participate and actively contribute to partnership operations and measures to tackle serious ASB. In the main:

- Locality Model
- Neighbourhood Action Groups (NAGs)
- ASB Theme Group

Our approach to ASB is a balanced one:

- Early intervention; investment and prevention.
- Support.
- Enforce.
- Rehabilitate.

The Secure Tenancy Agreement is clear on tackling ASB and the following section specifies the tenant's obligations: -

Section 2. The Tenant's Obligations.

Part 2.3 - Nuisance Harassment, Anti-social Behaviour, Hate Crime, Domestic, Violence and Unlawful Activities

It is your responsibility to make sure that every person living in or visiting your property does not do anything which is likely to cause nuisance to, harass, annoy, or distress any person who either lives in or has lawful business in the neighbourhood for any reason.

(a) "You, your friends, relatives and any other person living in or visiting the property must not act in any way which causes or is likely to cause nuisance, alarm or distress to any person, or act in any way, which is anti-social.

9.2 *Definition of ASB*

We have adopted the definition of ASB from the Anti-Social Behaviour, Crime and Policing Act 2014 as:

- a) conduct that has caused, or is likely to cause, harassment, alarm or distress to any person,
- b) conduct capable of causing nuisance or annoyance to a person in relation to that person's occupation of residential premises, or
- c) conduct capable of causing housing-related nuisance or annoyance to any person.

ASB is a key priority for the Safer Doncaster Partnership and the Community Safety Strategy and is a key priority for SLHD.

9.3 *Priority Based Approach*

Page	Version	Date	Author
Page 17 of 38	1.0	August 2023	Head of Housing Management

SLHD aims to achieve a level of consistency in dealing with ASB. This means having consistency in the way ASB is reported and recorded through the use of categories, priorities and definitions to enable effective benchmarking and sharing of best practice. A priority is applied to each reported case of ASB. This rating denotes the urgency of the case and determines how quickly an initial visit or contact should be carried out by a Housing Officer.

These targets are a minimum standard and we will always seek to achieve a higher standard.

PRIORITY/RESPONSE TIME	TYPE OF NUISANCE	RESPONSIBILITY
LOW Priority cases (within 5 working days)	Minor issues such as low-level noise nuisance	Housing Officer – area management team
MEDIUM Priority Cases (within 3 working days)	Verbal abuse, youth nuisance, noise nuisance	Housing Officer – area management team
HIGH Priority Cases (within 1 working day)	Threats of physical assault, serious intimidation, or harassment, hate motivated incidents (due to race, religion/belief, sexual orientation, gender, gender identity, disability, age or any other factor, perceived or otherwise, by the offender), domestic violence, serious damage to St Leger Homes property, insecure or abandoned premises.	ASB / Safeguarding Officer Safeguarding and ASB team

9.4 ASB Categories

SLHD have adopted Housemark’s definitions and categories of ASB and will record cases under 14 primary categories

Housemark is a joint venture by the Chartered Institute of Housing and the National Housing Federation. It is a non-profit making organisation which is dedicated to improving performance and efficiency in social housing and works in partnership with Government Office and regulators.

9.5 Legal Framework

The following acts contain legislation and guidance upon which this policy is based: -

Anti-Social Behaviour, Crime and Policing Act 2014
 Environmental Protection Act 1990
 Civil Evidence Act 1995
 Housing Acts 1985, 1988, 1996, 2004
 Confiscation of Alcohol (Young Persons) Act 1997
 Sexual Offences Act 2003
 Crime and Disorder Act 1998

Page	Version	Date	Author
Page 18 of 38	1.0	August 2023	Head of Housing Management

Protection from Harassment Act 1997
 Human Rights Act 1998
 General Data Protection Regulations 2018
 Police and Crime Act 2017
 Anti-social Behaviour Act 2003
 Serious Organised Crime and Police Act 2015
 Homeless Reduction Act 2018
 Equality Act 2010
 Localism Act 2011
 Deregulation Act 2015
 Housing and Planning Act 2016
 Landlord and Tenant Act 1985
 Prevention of Social Housing Fraud Act 2013
 Police and Justice Act 2006

9.6 *ASB Tools & Powers*

SLHD will utilise all tools and powers available to us and work with partners to utilise tools and powers available to them. We will always undertake a proportionality assessment before commencing legal action, this is a careful consideration of the circumstances of the case to ensure the action is appropriate and necessary. We will always take into consideration of any vulnerabilities and/or mental health of the perpetrator/s and victim/s and where appropriate will hold a case conference involving partners and agencies. Tools and Powers available are: -

Tenancy Breach warning letters
 Repossession
 Demoted Tenancies
 Civil Injunction
 Criminal Behaviour Order
 Community Protection Notice
 Public Space Protection Order
 Closure Powers
 Dispersal Powers
 ASB case review
 Community Remedy

9.7 *Domestic Violence & Abuse*

SLHD class all types of domestic abuse as ASB and will investigate and take appropriate action. We are a member of Doncaster's Domestic and Sexual Abuse Partnership and work closely with partners and agencies to support victims and deal with perpetrators appropriately.

We sit on the Doncaster Multi Agency Risk Assessment Conference (MARAC) and liaise with the Domestic Abuse Hub along with other partners and agencies such as Womens Aid and South Yorkshire Police.

In 2022 we achieved the Domestic Abuse Housing Accreditation (DAHA) and will continue to prioritise our development work in this area to deliver the Domestic Abuse Act 2021.

Page	Version	Date	Author
Page 19 of 38	1.0	August 2023	Head of Housing Management

We abide fully by the Domestic Abuse Act 2022 when dealing with tenants fleeing domestic abuse. We will refer tenants to our Home Options team to undertake a homeless application and source emergency temporary accommodation. We will always offer alternative council accommodation in an area suitable and safe for the tenant and their family.

9.8 *Hate Crime & Harassment*

Hate Crime

St Leger Homes will use a robust approach to deal with discrimination on the grounds of: -

- race, colour, ethnic origin, nationality, or national origins
- religion or belief
- gender
- gender identity
- sexual orientation
- disability
- age

A hate crime is a prejudice-motivated crime, which occurs when a perpetrator targets a victim because of their membership in a certain social group or race. It is recognised that a victim of hate crime does not necessarily have to belong to any of the above strands but is perceived to be by the perpetrator. It is further recognised that unacceptable behaviour, motivated by hatred in respect of any of the above equality strands, may not always be a criminal offence. SLHD takes hate crime very seriously and works closely with partners to report, respond to and prevent hate crime.

Harassment

SLHD will not tolerate any form of harassment on its estates. We are committed to tackling swiftly and efficiently those individuals or groups who are involved in harassment and will work closely with partners to support victims and take appropriate enforcement action.

Harassment is defined as any unwanted behaviour directed at an individual or group which is offensive or objectionable to the recipient. It is behaviour or conduct which will interfere with the peace and comfort of individuals or groups which has the effect of hurting, intimidating, humiliating, ridiculing and/or undermining confidence. We consider that the main types of harassment are:

- Racial Harassment
- Sexual Harassment
- Disability Harassment
- Age Harassment
- Harassment due to sexuality
- Gender Harassment
- Religious Harassment
- Physical Harassment

Page	Version	Date	Author
Page 20 of 38	1.0	August 2023	Head of Housing Management

- Verbal Harassment
- Gender Identify Harassment

SLHD also has clear prohibitions under section 2.3 of the Tenancy Agreement which states:

The Tenants Obligations
Part 2.3(b) Nuisance, Harassment and Anti-Social Behaviour

“You, your friends, relatives, and any other person visiting the property must not harass or discriminate against anyone because of their gender, gender identity, race, religion, sexuality, disability, or age. You must not threaten to harass, use, or threaten to use violence to anyone in the neighbourhood, or incite others to do so. Examples of harassment include but are not limited to: Racist behaviour or language, using or threatening to use violence; using abusive or insulting words or behaviour; damaging or threatening to damage another person’s home or possessions; writing threatening, abusive or insulting graffiti, letters or emails; doing anything that interferes with the peace, comfort, convenience and enjoyment of others”.

9.9 *Violence & Aggression towards staff*

SLHD operates a zero-tolerance policy towards any form of violence, aggression or abusive or offensive language towards our employees, Council employees, ward members or contractors working on our behalf. We will take swift action and use the most appropriate tools and powers. Where necessary and appropriate we will share information on potentially violent persons with partners and register on our potentially violent persons database.

9.10 *ASB Case Reviews (formerly community trigger)*

An ASB case review is the process where a member of the community can request a review of their case to ensure that a group of agencies have provided an appropriate response to the reported anti-social behaviour. The review is designed to ensure that agencies work together to investigate how the case was dealt with. It is important to note that this does not replace the complaints procedure within SLHD. City of Doncaster Council is the nominated body for receiving and managing ASB case reviews in Doncaster.

9.11 *Approach to Witnesses and Complainants*

SLHD understands the crucial role which complainants and witnesses play in coming forward to report ASB and appreciates how difficult this can be. We build an environment in our communities where witnesses and complainants feel safe in coming forward and will utilise tools and powers to protect witnesses from harm and intimidation. We will work closely with partners to protect witnesses and undertake a Vulnerable Victim Risk Assessment and agree a contact contract with complainants.

Sometimes complainants and witnesses are not SLHD tenants, in these cases we will still liaise and update the complainant and will work with partners via

Page	Version	Date	Author
Page 21 of 38	1.0	August 2023	Head of Housing Management

the Neighbourhood Action Group (NAG) and Locality Meeting process to ensure complainants are sufficiently supported.

We will often refer complainants, victims and witnesses to support agencies where appropriate in agreement with the individual such as; Victim Support, Creative Support, Early Help.

We will produce a Contact Contract for every complainant at the beginning of the ASB case, which will agree with each complainant how often we will contact them regarding the ongoing case.

9.12 *Persistent or Multiple Complaints*

SLHD reserves the right to refuse to deal with complaints that are pursued in an unreasonable manner or can be categorized as habitual or vexatious. Our complaints policy sets out how we deal with such complainants. With regards ASB complainants we will trigger this in the following circumstances: -

- The complainant persists in pursuing an ASB or neighbour nuisance complaint when the investigation procedure has been fully and properly implemented and there is insufficient evidence to pursue the matter.
- The complainant focuses on a trivial matter which cannot be classed as anti-social behaviour or nuisance to an extent that it is out of proportion to its significance.
- The complainant has made an excessive number of contacts whilst pursuing a complaint and has placed unreasonable demands on officer time and resources.
- The complainant has harassed or been personally abusive or verbally aggressive towards staff dealing with their complaint on more than one occasion.
- The complainant has threatened or used actual physical violence towards staff investigating their complaint
- In all cases housing management officers will pass the case to a senior officer who will liaise with SLHD Customer Care team before commencing the persistent complainant procedure.

9.13 *Rehabilitation of Perpetrators*

We appreciate that some perpetrators will need help and support to enable them to sustain their tenancy and reduce the risk of losing their home. SLHD deliver a tenancy support service where tenants who are considered high risk of not sustaining their tenancy are supported. We will also work with partners and agencies to support and rehabilitate perpetrators.

9.14 *Suspension from the Housing Register due to ASB*

The Allocation of Accommodation: Guidance for Local Authorities 2012 states authorities may frame their allocations policy to consider factors determining relative priorities between applicants in the reasonable preference categories. The Council's Allocations Policy outlines the criteria and circumstances in which an applicant will be excluded from the housing register due to ASB.

Page	Version	Date	Author
Page 22 of 38	1.0	August 2023	Head of Housing Management

9.15 Closure of Cases

SLHD understands that to retain the confidence of its customers in its approach to ASB, no case should be closed unless it has been thoroughly investigated and resolved. Before closing a case, a team leader will carry out a case review and the complainant will be contacted to agree for the case to be closed. We currently have the following case closure reasons: -

Complainant satisfied – case investigated, and complainant satisfied that the nuisance/problem has been resolved. **(resolved)**

No complaints for 3 months – the case has been closed because the nuisance has ceased, and no further complaints have been received for 3 months **(resolved)**

Case resolved to landlord satisfaction – the case has been resolved to the satisfaction of the landlord but not necessarily to the satisfaction of the complainant (e.g., no further action can be taken, all reasonable actions exhausted) **(resolved)**

Case withdrawn by the complainant – the complainant no longer wishes to pursue the complaint **(closed)**

Unsubstantiated complaint – the complaint has been investigated but no evidence can be found to substantiate the complaint **(closed)**

Property Terminated – the perpetrator gives up their tenancy, so the nuisance ceases, or the complainant is relocated via the Housing Assessment Panel (HAP) **(closed)**

Property Abandoned – the perpetrator abandons their tenancy so the nuisance ceases **(closed)**

Eviction for ASB – the perpetrator is evicted from their tenancy so the nuisance ceases **(resolved)**

Other (please specify) Resolved – the case has been successfully resolved to landlord satisfaction when the ASB has ended for any other reason than those listed above (e.g., intervention by another agency).

Other (please specify) Closed – the case has been closed for any other reason other than those listed above. (e.g., information requested by the landlord has not been provided)

When closing a case, we will always let the complainant know in writing giving 7 days' notice of the intention to close the case. This gives them the opportunity to make a further complaint if they disagree with the case being closed. We will carry out satisfaction testing on our ASB service to ensure our tenants are happy with how they are handled.

10. Garage Management

10.1 The allocations and estate management function, including enforcement and rent recovery, is performed by the Housing Management Area Teams. Repairs, maintenance, and site improvement are carried out by Property Services or its approved contractors. The Asset Management Team is responsible for the management of future investment in the sites and sale of sites deemed surplus to requirements. Decisions over the future investment or sale of a site are made by the Executive Management Team (EMT) and CDC.

10.2 Use of Garages

Page	Version	Date	Author
Page 23 of 38	1.0	August 2023	Head of Housing Management

- Garages are for the use of housing a private motor vehicle, motorbike or mobility scooter, or storage of appropriate personal belongings
- Garages must not be used to keep livestock
- Vehicles and motorbikes must be taxed and insured, or the owner should have made a Statutory Off-Road Notification (SORN).
- SLHD will on occasions use a garage for its own purposes such as the storage of equipment & other contents.
- SLHD will not take responsibility for any loss or damage to the contents of a garage because of any criminal action and tenants are advised to take out the appropriate insurance cover.
- Tenants must not cause a nuisance to surrounding tenants or residents on the garage premises, access road or forecourt. This includes causing an obstruction on the garage site access or in front of neighbouring garages.
- Tenants must not keep flammable materials on the garage premises including petrol, diesel, or oil except for those liquids within the vehicle.
- Tenants must not sublet the garage or allow anyone else to use the garage.
- Tenants must not make any structural alterations or additions to the garage without the prior written consent of SLHD. This includes the fitting of additional security locks and shelves. SLHD will always take into consideration the risk posed by asbestos.
- Garages cannot be used for business premises or for any sort of trading or vehicle repairs
- Tenants must not use the garage to display any sort of advertising, billboard, or nameplate.
- The tenant of a garage must allow access for repairs and periodic inspections of the garage by SLHD. This is to ensure that the garage is safe and maintained to a satisfactory standard, and any potential breaches of the Garage Tenancy Agreement and Plot Agreement are investigated and dealt with accordingly.
- The tenant will be charged for the cost of repairing any willful damage to the garage and the cost of replacing garage door locks due to lost or stolen keys.
- If the tenant moves to another residential property more than one mile from the rented garage, they may be asked to vacate the garage. The final decision on this matter will be made by the Area Housing Manager or Team Leader considering demand for garages on the site and any other relevant factor. If the tenant refuses to give up possession when requested, a 7-day Notice to Quit (NTQ) will be served.
- On termination of the garage the premises must be left clean and tidy and completely cleared of all belongings. Any items left in the garage will be disposed of by SLHD and the costs will be recharged to the tenant. All keys for the garage must be returned to an Area Housing Office.
- Upon termination of a garage plot the garage and all its contents must be removed from the plot, failure to do this will result in the tenants being recharged for the cost of any clearance. Tenants do not have the right to pass the keys onto another person for their use without the prior written permission of SLHD. Any items left in the garage will be disposed of by SLHD and the costs charged to the tenant.

Page	Version	Date	Author
Page 24 of 38	1.0	August 2023	Head of Housing Management

10.3 *Use of Garage Plots*

- The rules regarding the use of SLHD purpose-built garages also apply to garages constructed privately on plot sites.
- Before building a garage on a plot site the tenant must firstly obtain written permission from SLHD to ensure that the garage to be constructed is of a professional standard. If required, the tenant should also obtain any necessary planning permission from DMBC.
- The tenant of a garage plot must allow SLHD access to the premises for the purpose of inspecting its condition and contents.
- If the tenant of the plot moves to another residential property more than one mile from the garage, they may be required to either remove the garage from site or transfer it / sell it to another resident nearby. If the tenant wishes to transfer or sell the garage to another resident, they should first obtain written permission from SLHD. The final decision on this matter will be made by the Area Housing Manager or Team Leader.
- Tenants of garage plots are responsible for keeping their plot & garage in a good state of repair, failure to do so could result in SLHD carrying out the work in default. This work can include demolition and removal of the garage. The tenant will be recharged the full cost of the work.

10.4 *Allocation of Garages*

Relevant checks will be undertaken to ensure an applicant is eligible to join the register. Applicants considered not to be eligible will be notified in writing of the reason. Applicants are not limited in the number of sites they can choose.

Applicants are not allowed to join the register if: -

- They do not reside in the locality of the garage site; locality refers to within 1 mile of the site, however this rule can be relaxed if it is a low demand site.
- The applicant has a housing related debt, for example, rent arrears, sundry debt or former tenant arrears.
- The applicant has a history of anti-social behaviour or other tenancy breaches to be determined by the Area Housing Manager or Team Leader

10.5 *Allocating Garages*

Garage sites are managed by the Area Housing Offices, therefore all enquiries regarding a site or application should be made to the local office.

Allocation Priority

Tenants and residents of Doncaster are eligible to join the waiting list for a garage site or garage plot site. However, their residential address must be in the locality of their chosen sites. Garages will be let in the following priority order:

1. A tenant of a garage / plot included in a redevelopment / demolition scheme.

Page	Version	Date	Author
Page 25 of 38	1.0	August 2023	Head of Housing Management

2. Tenants registered on the waiting list who have a substantial mobility dependency (including a family/member or carer who transports them by car), if they live in the locality of the garage. They must provide proof that they are in receipt of a mobility related benefit and/or have a blue badge.
3. Tenants who wish to rent a garage for the storage of a mobility scooter. They must have a mobility dependency and must provide proof that they are in receipt of a mobility related benefit.
4. Tenants of flats and maisonettes with garages that are integral to the block or built on the same site.
5. Tenants at the top of the waiting list because of waiting the longest time, and who reside within 1 mile of the garage (and do not already have a garage in the locality).
6. Residents (non- tenants) registered on the waiting list that have a mobility dependency (including a family/member or carer who transports them by car) and live within 1 mile of the garage. They must provide proof that they are in receipt of a mobility related benefit, or a copy of their blue badge drivers pass.
7. Residents (non- tenants) who wish to rent a garage for the storage of a mobility scooter and have a mobility dependency. They must provide proof that they are in receipt of a mobility related benefit.
8. Residents of flats and maisonettes with garages that are integral to the block or built on the same site.
9. Residents who are top of the list with regards to waiting time and live in the locality of the garage and do not already have a garage.
10. Tenants who are top of the list with regards to waiting time and reside in the locality of the garage and already have a garage.
11. Residents who are top of the list with regards to waiting time, who reside in the locality of the garage and already have a garage.
12. Eligible tenants & residents who require the garage for an approved use and reside any distance from the garage

10.6 *Garage Commencement and Terminations*

All garage agreements commence on a Monday and rent will be charged on a weekly basis.

SLHD will serve a 7-day Notice to Quit (NTQ) if it wishes to terminate a garage tenancy. If the tenant wishes to terminate their garage tenancy, they must also give 7 days in writing or complete a form at their local area housing office. Notice can be given to a tenant for several reasons including rent arrears, site redevelopment or misuse including anti-social behaviour.

SLHD will serve a 28 days' NTQ if it wishes to terminate a garage plot. If the tenant wishes to terminate their garage plot, they must also give 28 days' notice in writing or complete a form at their local area housing office. Notice can be given to a tenant for several reasons including rent arrears, demolition of the site or misuse of the site.

On demolition sites, the same notice periods apply as stated above.

10.7 *Encroachment / Rights of Way*

Page	Version	Date	Author
Page 26 of 38	1.0	August 2023	Head of Housing Management

Tenants are not entitled to encroach on any land owned by the Council and managed by St. Leger Homes of Doncaster. This includes altering the boundaries to their garden or installing exit and entrance points directly on to land owned by the Council and managed by SLHD, thus creating rights of way.

SLHD will request these situations to be rectified at the cost of the tenant in a timely manner and may either rectify us and recharge the cost to the tenant or take legal enforcement action.

10.8 *Maintenance & Inspection*

SLHD will inspect every site on a quarterly basis and will prioritise each site based on need. SLHD will ensure sites are clean, tidy, free from rubbish and undertake work to cut grass, hedges, sweep areas and remove any graffiti and fly tipping

10.9 *Investment, Options Appraisals, Demolitions*

As part of the Housing Revenue Account (HRA) Land and Asset Review all garage sites are reviewed to identify any re-development potential and note any constraints, for example any encroachments and unauthorised use. This will help to inform the future utilisation of sites.

Investment is an ongoing process that involves consultation with SLHD staff, CDC, elected members and customers and forms the basis for decisions over the future investment of the sites. A plan identifies future investment requirements for garage sites across the borough; this helps to make decisions about retaining and investing, demolition and the provision of new parking sites.

Demolitions are circumstances where for the health and safety of the public dictates the emergency demolition of a garage, for example, anti-social behaviour and storm damage. All demolitions whether emergency or planned will be undertaken by the SLHD Asset Management Team.

11. **Safeguarding and Vulnerability**

11.1 This section sets out our approach to promoting the wellbeing of children, young people, and adults at risk by safeguarding them from risk and abuse.

The objectives of this section are to:

- Outline what constitutes abuse, neglect and harm
- Ensure we fulfil our legal obligations to report safeguarding concerns to the relevant authority
- Support the local authority with their statutory duties relating to safeguarding
- Ensure we recognise and consider vulnerabilities in our housing management functions

Page	Version	Date	Author
Page 27 of 38	1.0	August 2023	Head of Housing Management

This section should be read in conjunction with the Safeguarding and Anti-Social Behaviour procedures.

11.2 Definitions

Safeguarding means protecting a person's right to live safely, free from abuse and neglect. Working with other organisations, we safeguard customers by aiming to prevent and stop both the risk and experience of abuse and neglect. Safeguarding applies to children, young people and adults at risk.

- A **child** is anyone under the age of eighteen
- A **young person** is a care leaver, a person who is 18 and over but still receiving children services. For example, a person who is a care leaver with complex needs might be supported by children services until the age of 25.
- An **adult at risk** (sometimes called vulnerable adult) is someone aged 18 or over who has needs for care and support. Safeguarding applies to adults at risk who are unable to protect themselves from experiencing, or at risk of experiencing, abuse as a result of their care and support needs.

Abuse is the violation of a person's human and/or civil rights by any other person or persons. The Care & Support Statutory Guidance identifies eight main categories of abuse: Physical, Sexual, Psychological, Financial or material, Discriminatory, Organisational, Modern-Day Slavery, Domestic Violence, Neglect and Self Neglect. The Children Act includes definitions for Emotional, Physical, Sexual abuse and Neglect specific to child abuse.

More information on the forms of abuse, possible signs and behavioural changes is detailed in the safeguarding procedure.

Neglect is the failure to meet a child, young person, or adult at risks basic needs. The Care & Support Statutory Guidance identifies two categories of neglect, neglect and acts of omission and self-neglect. The Children Act includes definitions specific to child neglect.

Harm is physical and/or psychological injury

11.3 Prevention

We work to minimise the potential for abuse and neglect to occur by raising awareness of abuse and its effects and inform our customers on how to keep themselves and others safe by giving appropriate advice and accessing appropriate support. We also publish articles about safeguarding for our residents across our customer media channels.

We highlight the role that local people play in safeguarding and encourage and support members of the community to report suspected abuse either to us or to a relevant agency.

We have a single point of contact telephone number, which allows all staff and customers to report safeguarding concerns.

All staff undertake training, and we regularly raise awareness across SLHD to ensure that staff remain vigilant to indicators of abuse and neglect.

Page	Version	Date	Author
Page 28 of 38	1.0	August 2023	Head of Housing Management

SLHD are committed to working in partnership to deliver the Doncaster safeguarding agenda. We are a key member of the Doncaster Safeguarding Board and related subgroups. The Boards ensure that there are effective arrangements in place in Doncaster to safeguard children, young people and adults from abuse. We are also members of various statutory panels and groups established to risk manage safeguarding cases, e.g., Multi Agency Risk Assessment Conference, MARAC and the Multi Agency Public Protection Arrangements Panel, MAPPA.

11.4 *Safeguarding Concerns*

All staff are required to report any safeguarding concerns they have as soon as they arise. We report concerns on our internal reporting systems and to partners via their referral process. If we consider a criminal offence has occurred, or the customer faces an imminent risk we notify the police immediately. If we have concerns about the immediate health and wellbeing of a customer in relation to a safeguarding matter, we notify the emergency services and local authority as soon as possible using established referral pathways.

In addition to the abuse types defined by statutory guidance and the Children Act, we respond to any concerns around radicalisation under our safeguarding process. We have due regard to our responsibilities under PREVENT and work with our partners to counter the risk of terrorism.

We seek to offer customers the safest and most supportive environment in which they can report abuse. Any report or allegation of abuse will be listened to and investigated. As a responsible provider we are committed to working in partnership with agencies that have a statutory responsibility and a non-statutory involvement with children, young people and adults at risk and have embedded management tools in our safeguarding procedure to reflect this.

We support and cooperate with partners where there are concerns that relate to one of our customers. We respond to all local authority requests regarding safeguarding (Sometimes referred to for adults, Section 42 or for children, Section 17 or 47) in a timely manner.

11.5 *Making Safeguarding Personal*

We support customers through the investigation process. We ensure that an adult's wellbeing is promoted when reporting and responding to safeguarding concerns. We have regard to their views, wishes, feelings and beliefs in deciding on any action and support them to share their views with other agencies. We recognise that adults at risk can sometimes have complex interpersonal relationships and may be ambivalent, unclear or unrealistic about their personal circumstances.

In child safeguarding cases we will work with the family and other agencies as appropriate to produce a holistic solution that best meets the child and/or families' needs.

11.6 *Partnership Working*

Page	Version	Date	Author
Page 29 of 38	1.0	August 2023	Head of Housing Management

Responsibility for safeguarding children, young people and adults at risk is shared amongst several agencies. We work with other organisations to achieve our aims and recognise our legal requirements.

Local authorities have specific duties to organise and plan services to safeguard and promote the welfare of children, young people, and adults at risk. They also have expertise in handling cases of abuse, providing support and counselling to victims of abuse, and in assisting the police with any criminal investigations. It is the responsibility of local authorities to arrange advocates for any adults who would be deemed in need of this. We do not usually perform this function. We recognise the importance of cooperating with the police to help them protect, investigate, and deter abuse. We are a member of the Safeguarding Children & Adults Boards and inform them of any serious concerns.

We work with our partners to safeguard vulnerable people who are at risk of radicalisation, in all its forms. If we suspect that a person is being drawn into terrorism, we make a referral to Channel, an early intervention multi-agency panel designed to assess the risk to individuals and decide whether intervention is necessary.

11.7 *Consent and Capacity*

We always assume that an adult has the mental capacity to make decisions about their personal safety, unless we have been formally advised otherwise by an appropriate health and/or social care professional or have seen relevant documentation e.g., power of attorney. If we suspect that an adult does not have mental capacity, we refer them to the appropriate agency for an assessment and this may lead to a mental capacity being undertaken.

We only accept consent to share information with other agencies if it is freely given, informed, and not inferred or provided under duress. If consent is refused, information is only shared in the following circumstances: -

- There is a need to safeguard a person/people at risk
- There is a significant risk of harm to self or others
- The person lacks the mental capacity to make an informed decision about sharing the information
- We suspect the person has the mental capacity to make that decision, but they may be under duress or coerced
- We suspect a criminal offence has been or will be committed
- St Leger Homes are implicated in the allegation
- Some other legal provision requires it, e.g., under a Court Order.
- Where the issue relates to a child, we do not need to seek consent to make a referral

11.8 *Mental Health*

Page	Version	Date	Author
Page 30 of 38	1.0	August 2023	Head of Housing Management

SLHD will always take mental health into consideration when taking any action against a tenant or when communicating with a tenant. Every attempt will be made to liaise with mental health professionals and/or support workers or refer for support if none is in existence. Where appropriate, a multi-agency case conference will be held to determine the best course of action.

SLHD will refer individuals to the Council's Vulnerable Persons Panel for more complex cases.

In all cases of enforcement involving individuals affected by mental health an Equalities Assessment and/or Proportionality Assessment will be undertaken to ensure any action is fair and proportionate and complies with the Equalities Act 2010.

11.9 *Doncaster Multi-Agency Self-Neglect and/or Hoarding Policy*

This policy and procedure have been developed alongside the safeguarding boards and Safer, Stronger Doncaster Partnership and includes agencies across Doncaster who encounter adults at risk on a daily basis. The procedure includes a practical assessment tool called the Self-neglect and risk management (SNARM) tool, which provides a template for a multi-agency response across all agencies. SLHD officers will complete this assessment and template and refer to the appropriate agency when dealing with vulnerable adults.

For hoarding cases along with liaising with support workers, SLHD will involve the fire service to assess the property for fire risk.

12. **Rent Collection and Arrears Recovery**

12.1 This section describes the activities and responsibilities involved where tenant rent accounts of both current and former tenants are in arrears. This policy will help to ensure Performance targets are met, that we are customer focused and that the financial capability of customers is met.

The term "rent collection" applies to rent on dwellings, garages, garage plots and service charges.

12.2 *Objectives*

- Maximise income collected from rent, rent arrears and service charges whilst providing cost-effective rent collection methods. Fair and effective means of recovering arrears are in place.
- Minimise the level of arrears, by early intervention and appropriate money and tenancy management advice.
- Minimise evictions and bad debts, making use of all appropriate remedies and only using possession and eviction when these have been exhausted.
- Apply firm, fair, efficient, and consistent approaches to arrears work, taking a staged approach to recovery action and ensuring that tenants are aware of the consequences of not meeting their obligations.
- Establish a sense of responsibility among tenants for paying their rent

Page	Version	Date	Author
Page 31 of 38	1.0	August 2023	Head of Housing Management

and service charges.

- Help tenants to sustain their tenancies and maximise their income through tenancy support, advice and assistance, debt counselling and money advice, using referrals to external financial and debt advice providers where appropriate.
- Assist those tenants affected by welfare reform, cost of living crisis or other financial pressures with financial and tenancy support and access to financial assistance.
- Provide services to all of our tenants taking into account the needs of the most vulnerable and least advantaged sections of the community.
- Reduce poverty and increase financial inclusion amongst our tenants
- Utilise latest/current methods in optimising income collection and communication with customers
- Share and utilize best practice within the sector

12.3 *Tenant Responsibilities*

The term 'tenant' includes sole and any joint tenants.

If two or more people have signed the Tenancy Agreement, they are jointly and severally liable for the payment of rent. This means that each person is fully responsible for the payment of rent and any arrears of rent.

Tenants have an obligation under the Terms and Conditions of their Tenancy Agreement to pay rent due every week, in advance of, on or before the first day of each rental period.

Tenants have a responsibility to notify St Leger Homes of Doncaster of any change that may affect their ability to pay their rent.

Page	Version	Date	Author
Page 32 of 38	1.0	August 2023	Head of Housing Management

12.4 *SLHD Responsibilities*

We will provide tenants with the necessary information in the most appropriate format and a range of options and facilities to pay their rent and service charges when they are due.

Rent is charged in accordance with the Government's Rent Standard 2020 and any successor to this framework.

We will charge rent over 52 weeks per year (53 weeks where there are 53 Mondays within the year). All tenants will receive an annual rent (and/or service charge) statement or more regularly by request. Tenants can also view their account(s) at any time via their online account. When a tenant does fall into arrears, we will consider all available options such as but not limited to; manageable payment agreements, third party payments, referrals to debt advice agencies, suspended possession orders, postponed possession orders, attachment of earnings, garnishee orders, money judgement orders, small claims court, distraint of goods orders and ultimately outright possession.

SLHD will take all measures possible to prevent arrears accruing initially including early and personal contact with tenants. This will include an assessment of affordability, an assessment to housing benefit/Universal Credit entitlement, assistance in completing a housing benefit application form within the sign-up process along with emphasis on the payment of rent.

SLHD will ensure that there is early intervention when an account falls into rent arrears before a debt escalates. Accounts are monitored on a weekly basis and action will be taken as appropriate.

SLHD recognises that many of its tenants are on low incomes and may have trouble in paying their rent and other charges. We acknowledge that personal circumstances can change potentially causing difficulty with benefit claims and income. SLHD will therefore assist tenants as much as possible in ensuring they maximise their income, providing advice where possible and will signpost to appropriate independent agencies where the relevant knowledge does not exist in-house.

Where arrears do occur, we will always seek to recover the debt in full. Where appropriate we will offer payment of arrears in instalments following a financial assessment of circumstances with a view to making realistic and sustainable arrangements to pay off the arrears.

We will aim to establish personal contact with tenants and members of their household over 18 years of age throughout the debt recovery process to prevent eviction

12.5 *Payment Methods*

We will ensure that a wide choice of payment methods are available and transaction costs are not passed on to tenants. Tenants can choose to pay their rent and any other amounts due using any of the methods available, however, we do list these methods in order of our preference: -

Page	Version	Date	Author
Page 33 of 38	1.0	August 2023	Head of Housing Management

1. Direct Debit
2. Credit Union account
3. Standing Order
4. On line at www.stlegerhomes.co.uk or via our tenant portal
5. By debit card over the phone using our automated payment line
6. By debit card over the phone to our Customer Access Team
7. Any outlet displaying the Pay point sign
8. Any post office in the country
9. Credit Card over the phone or online

We actively encourage payment methods which are reliable, cost effective and deter from the tenant incurring debt and interest charges. If a tenant is regularly using payment methods 5 to 9 from the list above, we will have a discussion around moving them on to preferred payment methods.

12.6 *Payment Priorities*

To ensure that monies received are treated with a degree of importance dependant on both the impact on the organisation and potential impact on the tenant, we will always prioritise dwelling rent as a priority debt before any other housing related debt when accepting payments from customers.

12.7 *Rent Setting*

CDC set the rents in line with the Governments Rent Standard 2020 and its successor to this framework. Rent will be reviewed on an annual basis and any new charge will commence on the first Monday in April. We will ensure that all customers are informed in writing at least four weeks in advance of the new rent charges. New tenancies which are not mutual exchange or successions will be charged at the target rent.

12.8 *Housing Benefit / Universal Credit*

We liaise with CDC Housing Benefit department and the Department for Work & Pensions (DWP) to maximise the receipt of benefits due to our tenants and to minimise the delay in receiving these payments. Housing Benefit and Universal Credit advice will be available by SLHD officers and via the SLHD Moneywise Website. Where a tenant in receipt of UC falls into arrears and fits the criteria laid down by the DWP we will diligently apply for an Alternative Payment Arrangement (APA).

12.9 *Legal Action / Eviction*

SLHD does not wish to evict any of its tenants. Any tenant falling into arrears will therefore be given adequate opportunities to pay off the arrears, and every attempt will be made to reach payment agreements with tenants before Court action commences. Legal action will not be pursued against tenants who adhere to repayment agreements. Eviction action will be pursued only as a last resort. No eviction will go ahead without an independent review of the case by the Tenancy Sustainability Service Manager and the SLHD Eviction's Panel.

All legal costs incurred will be charged to the tenant (s) in addition to their arrears.

Page	Version	Date	Author
Page 34 of 38	1.0	August 2023	Head of Housing Management

12.10 *Arrears left when tenancies are ended*

When notice to terminate a tenancy is received and there are any outstanding arrears, we will always seek to recover the debt in full. Where appropriate we will offer repayment of arrears in instalments following a financial assessment of circumstances with a view to making a realistic and sustainable arrangement to pay off the arrears. A financial assessment will look at what the former tenant can afford and how long the debt will take to clear based on the proposed repayment plan.

We will always ask for a forwarding address at the time a tenant terminates their tenancy.

12.11 *Former Tenancy Arrears*

Former tenants are tenants who have ended a tenancy and have outstanding rent arrears related to the dwelling, garage or garage plot they have vacated.

If a forwarding address was not provided when the tenancy ended and there are arrears owing, we will attempt to trace the former tenant.

Where our detailed FTA procedures have failed to recover arrears, the debt may be referred to a Debt Collection Agency.

Legal action to recover the arrears will be taken in cases where, an assessment of the former tenant's financial circumstances, indicate that such action would be appropriate.

Where a debt is uneconomic to pursue or there is no prospect of recovery, the debt will be written off in accordance with the City of Doncaster Council's policy on irrecoverable debt. However, we reserve the right to reinstate the debt where appropriate.

Where the arrears are in respect of a deceased tenant action will be limited to contacting the next of kin or an executor to claim against the estate. However, we may contact other agencies to establish if there are any monies left in the estate.

If the debt is six years old or more and specific procedures have not been followed or certain conditions not met, the debt is classed as 'statute barred'. This means that recovery of the debt can no longer be pursued through the courts. However, the debt still exists and will still be pursued by SLHD.

FTAs will be reviewed on a regular basis and will be written off as not recoverable as considered appropriate, providing all recovery options have been considered.

The write offs and reinstatements in respect of Former Tenants Arrears will be authorised as follows:

- Up to £1,000 - Prepared by FTA Officer and authorised by Head of Finance and Business Assurance
- £1,000 - £2,499 – Prepared by FTA Officer and authorised by Director of Corporate Services

Page	Version	Date	Author
Page 35 of 38	1.0	August 2023	Head of Housing Management

- Over £2,500 - Prepared by FTA Officer, authorised by DC

FTAs will be reinstated if the former tenant applies for housing.

Any person owing Current or Former Tenants Arrears seeking rehousing will be dealt with in line with CDC allocations policy.

12.12 *Rental Exchange*

SLHD participates in the rental exchange project to provide good rent paying tenants with a credit rating to increase financial inclusion. Tenants who fall into arrears will incur a negative impact on their credit rating. Tenants are only affected after eight weeks rent arrears. Tenants are provided with full information on this scheme and are given the option to 'opt out'.

13. Tenancy Sustainability

- 13.1 To achieve our objective of sustaining tenancies we have implemented a Tenancy Sustainability Model which is designed to identify those tenants at risk of losing their tenancies or posing a high risk of not sustaining their tenancy. We will undertake a RAG rating assessment of tenants as we come into contact with them and deliver support based on each category:

Red – Intensive Category – intensive tenancy support for up to three months
 Amber – Housing Plus Category – medium level support with no time limit
 Green – Sustainable Tenancy Ready Category – universal services

Intensive support will be provided for a period of 3-6 months until the tenant is either ready to be stepped down, referred to accommodation support for longer term support or, as a last resort, subject to enforcement action.

14. Information Sharing and Data Protection

- 14.1 SLHD is committed to respecting and protecting tenants' privacy by complying with UK General Data Protection Regulation (GDPR) and the Data Protection Act 2018.

We have a number of privacy notices and these are published on our website at [Privacy Notices](#).

These documents explain how we look after and protect customer's personal information. The documents also outline under what circumstances we will share information without consent. Alongside this we have a number of data sharing protocols with partners outlining the information we will share and the legitimate reasons for doing so: -

Safer Doncaster Partnership Information Sharing Protocol
 Stronger Families Information Sharing Protocol
 Welfare & Housing Benefit Information Sharing Protocol

15. Workforce Development

Page	Version	Date	Author
Page 36 of 38	1.0	August 2023	Head of Housing Management

15.1 SLHD will ensure all employees delivering housing management services are sufficiently skilled and knowledgeable to deliver a high-quality service and meet the Government's Professionalism Agenda, as a minimum we will deliver the following training to our staff: -

- Housing Professional Qualification appropriate to the role to meet the professionalism agenda
- Housing Law and legal tools and powers
- Procedures
- Welfare Reform / Benefits / Financial Inclusion
- Supporting tenants
- Effective case handling including investigation, witness statements, preparing for court
- Building resilience
- Handling aggression and violence
- Health and Safety
- Customer Experience

16. Partnership Framework

16.1 Partnership working is key to delivering our objectives and priorities within our communities. Team Doncaster is the umbrella for four strategic theme boards with various multi-agency subgroups and boards below, which SLHD play an integral part: -

- Safer & Stronger Partnership Board
- Health & Wellbeing Board
- Children & Families Strategic Board
- ASB Theme Group
- Substance Misuse Theme Group
- Crime & Reoffending Theme Group
- PREVENT
- Neighbourhood Action Groups
- Case Identification Meetings
- Children & Adults Safeguarding Boards
- Early Help Strategy Group
- Stronger Families
- MARAC (Multi Agency Risk Assessment Conference)
- MAPPA (Multi Agency Public Protection Arrangements)

17. Links to other policies

17.1 This policy is closely linked to the following other SLHD/CDC policies:

- CDC Tenancy Strategy
- CDC Allocations Policy
- SLHD Rechargeable Repairs Policy
- SLHD Fencing Policy
- CDC Sustainable Tenancies Fund Policy
- SLHD Equality & Diversity Policy
- Secure Tenancy Agreement

Page	Version	Date	Author
Page 37 of 38	1.0	August 2023	Head of Housing Management

18. Customer Involvement and Consultation

18.1 SLHD consult and involve tenants in all aspects of our services. Tenants are consulted on policy changes and can be involved in the housing management service through a variety of activities: -

- Reality Checking
- Focus Groups
- TARAs
- High Rise Forum
- Estate Inspections
- Tenant and Residents Involvement Panel
- One Voice Forum

19. Performance Management

19.1 SLHD have an overarching performance management framework with a suite of Key Performance Indicators (KPIs), service standards and relevant Tenant Satisfaction Measures (TSMs). Underneath this there are several local indicators and measures using a balanced scorecard approach for housing management. These indicators are reviewed annually to ensure they remain relevant.

19.2 *Performance Indicators*

KPIs

- % of current rent arrears against annual debit
- % of tenancies sustained 6 months post intensive support
- Number of ASB cases opened per 1,000 properties in management

Further to this we monitor and measure performance across the following service areas:

- Rent Arrears Recovery
- Anti- Social Behaviour / Tenancy Breach case management
- Estate Inspections
- Safeguarding

19.3 *Monitoring & Review*

Performance and compliance are monitored through supervision and case reviews on a regular basis.

20. Feedback

20.1 SLHD welcomes feedback from our staff, customers and partners and will use comments and suggestions to help us improve services. If you have any feedback for SLHD please contact our Customer Access Team on 01302 862862 or online at www.stlegerhomes.co.uk.

Housing Management Policy Review – 2023

Consultation feedback and changes

Section	Change	Source	Agreed yes/no	Status
Whole document	Condense information and review repetitions	Tenant Focus Group	Yes	Complete
	Insert names of people responsible for each part of the policy	Tenant Focus Group	No but add Head of Housing Management	Complete
	Change Doncaster MB Council to City of Doncaster Council	Head of Housing Management	Yes	Complete
	Change Children’s Trust to Children’s Services CDC	EMT	Yes	Complete
	Remove 2017 date of secure tenancy agreement as being reviewed this year	EMT	Yes	Complete
3.4 and 5.1	Tenancy Strategy is out of date	Head of Housing Management	No – tenancy strategy not renewed	taken date out
5.3	Minors – those succeeding will have a tenancy on trust not a licence – legal changes to the responsibility of guarantors Legal wording on social housing providers	Legal	Yes	Complete
5.4	Joint Tenancies – ensure matches allocations policy and procedure for who can be a joint tenant	Head of Housing Management	Yes	Complete
6	Ending tenancies – need to include our policy on tenants going into residential care	Tenant Focus Group	Yes	Complete
6	Ending tenancies – add vacant possession must be given	Area Housing Managers	Yes	Complete
6.1	Any day terminations – this is not a legally viable process as periodic tenancies must be ended on the last day of the term of	Legal Services	Yes	Complete

	<p>the tenancy – i.e., Sunday for our tenancies, which run Monday to Sunday</p> <p>We will amend our tenancy agreement and procedures to advise tenants that notice periods will be 28 days plus the days that take it up to the following Sunday – this in accordance with tenancy law. We will not implement this policy change until the new tenancy agreement is in place.</p>			
6.1	Handing in keys – update with current procedure	Area Housing Managers	Yes	Complete
6.1	Cannot allow notice of terminations to be withdrawn as per legislation	Legal Services	Yes – will reallocate new tenancy if tenant wishes to stay	Complete
6.1	More than outhouses – include recharging for rectifying and cleaning	Heads of Service	Yes	
6.3	Storage of belongings – review procedure	Shelter – by way of outcome of a complaint	Yes	Complete
6.5	<p>Death – add that we will receive confirmation from registrars</p> <p>We need to put in that where there is no executor, we will serve Notice on the Public Trustee to bring the tenancy to an end legally. We will also reserve the right to serve notice on the executor if the keys are not returned within a reasonable period.</p> <p>Next of kin cannot legally end a tenancy – it has to be an executor or administrator of the estate</p>	<p>Area Housing Managers</p> <p>Legal Services</p>	<p>Yes</p> <p>Yes</p>	Complete
7.1	Successions – clearer about offering alternative accommodation from our stock if do not qualify or qualify and property not suitable	Tenant Focus Group	Yes	Complete

7.1	One succession not enough – what about children who lose both parents and end up homeless?	Tenant Focus Group	No	One succession is set out in law
7.1	Successions – succession relatives do not match what tenancy agreement says regarding common law partner Clear on para 4 not applying to those who were joint tenants and married including civil partnerships	Legal	Yes	Complete
8.1	ASB complaint response times – need an out of hours service for out of hours complaints	Tenant Focus Group	No	Not emergency service
8.1	ASB categories – remove criminal activity and intimidation from medium Review whole list	Area Housing Managers	Yes	Complete
8.2	Added section on tenants fleeing nondomestic violence	Head of Housing Management	Yes	Complete
8.3	No access – strengthen this and list what we consider emergency for access – gas, flood, electric testing, fire safety check Clarify gas access power on leaseholders in blocks of flats	Tenant Focus Group	Yes	Complete
8.3	No access – can enter for emergency repairs if tenant cannot be located	Area Housing Managers	Yes	Complete
8.3	Expand on responsibility of tenant and impact on other tenants, say we are a responsible landlord and will deliver all regulatory standards and emergency repairs and maintenance	Heads of Service	Yes	Complete
8.3	State may use Injunction or warrant to gain access depending on circumstances	Legal Services	Yes	Complete
8.4	Fire Safety – what legal action will we take? Do we notify fire service if tenant requires oxygen in property? Lithium batteries	Tenant Focus Group	Yes	Complete

8.4	State that oxygen tank safety procedures must be followed, or enforcement action may be taken as last resort – significant risk of harm to others	Legal Services	Yes	Complete
8.4	Building Safety Act 2022 paramount – particularly to those living in high-risk buildings Add reference to Fire Safety Management Plan	Heads of Service EMT	Yes	Complete
8.5	Remove reference to Environmental Improvement Programme	Area Housing Managers	Yes	Complete
8.5	Delete wording about parking signs	Heads of Service	Yes	Complete
8.6	Remove reference to proactive work – operational not policy	EMT	Yes	Complete
8.6	No pruning trees, no planting New build – if shrubbery is installed and linked to discharge of planning regs must not be removed – if removed will reinstate and recharge	Heads of service	Yes	Complete
8.7	More explicit about animals and must implement no dogs in high rise – this has been allowed and is now out of control	Tenant Focus Group	Not Agreed	We have agreed to allow dogs but with responsible dog owner contracts and tight management
8.7	Dogs in high rise – review considering mental health and covid effect – dogs help loneliness and mental health	Tenant Focus Group	Yes	Complete
8.8	Why do we not charge communal area cleaning charges to leaseholders? Checked and we do charge Need to add cleaning standards for low rise and high rise Be clear about tenant responsibilities for communal areas Responsibility for pest control in communal areas	Tenant Focus Group	Yes	Complete
8.9	Grounds Maintenance – add scope for open plan e.g litter picking and blowing grass	Tenant Focus Group	Yes	Complete

	Put in place more robust monitoring as not happening Change ref to DC to CDC Conifers can be removed			
8.10	Estate Walks – change to Estate Inspections – walks give impression they are just a wander round. These are not happening as per schedule and not effective – need to review schedule and ensure staff know procedure and follow things up as well as knocking on doors as required Review what happens to reports	Tenant Focus Group	Yes	Complete
8.10	Positive activities – delete	Head of Housing Management	Yes	Complete
8.11	Scooters – paths as well as communal areas Say must charge in a safe and responsible way considering fire safety risks Add oxygen tanks – we will notify fire service when installed and removed Add other electrical charging appliances	Heads of service	Yes	Complete
9	Review our definition of ASB – research other organisations and community safety definition	TRIP review	Yes	
9	Add contact contract and review process	TRIP review	Yes	Complete
9.1	Update joint operations – NAG, locality, anticipate and remove civitas Amend government office to DLUHC	Area Housing Managers	Yes	Complete
9.2	ASB definition – review (tenant focus group wanted it sharper) ASB Crime and Policing Act 2004 set new definition – adopt this one (Legal)	Tenant Focus Group Legal Services	Yes	Complete
9.3	Remove criminal from medium	Area Housing Managers	Yes	Complete
9.5	Legal framework – reviewed by Legal and added Prevention of Social Housing Fraud Act 2013	Legal Services	Yes	Complete
9.6	Change enforcement action to legal action and add tenancy breach warning letters	Area Housing Managers	Yes	Complete

9.6	Tools and Powers – update community trigger is now ASB case review – review all	Head of Housing Management	Yes	Complete
9.7	Update domestic abuse to include DAHA accreditation and domestic abuse act	Head of Housing Management	Yes	Complete
9.10	Community Triggers – being reviewed – update as per process and rename to ASB case review	Head of Housing Management		Complete
9.11	Change CIM to locality meetings	Area Housing Managers	Yes	Complete
9.15	Case closures – is this process what currently happens? Reviewed by team leader and 7-day notice in writing	Head of Housing Management	Yes	Complete
9.15	Satisfaction on case closure – what will be our process for this – need to ensure happens	TRIP review	Yes	Method not required in policy
10	Garages – section far too long – condense	Tenant Focus Group	Yes	Complete
10.5	Review advertising considering receptions not open	Heads of service	Yes	Complete
10.7	Terminating garages – update with current process	AHM	Yes	Complete
11.1	Mentions vulnerable persons policy – delete	Head of Housing Management	Yes	Complete
11.9	We convene SNARM but don't complete assessment	Area Housing Managers	Yes	Complete
12.1	Add a bullet point on benchmarking	Head of Finance and Business Assurance	Yes	complete
12.2	Payment methods – Credit Union moved from 1 to 2 and Direct Debit moved to number 1 – due to transactional costs and delays	Income Management Service Manager	Yes	Complete
12.6	Remove payment priority list and add that rent is number 1 priority	EMT	Yes	Complete
12.9	Evictions – reviewed by Tenancy Sustainability Manager not Area Manager – change in responsibility in structure	Head of Housing Management	Yes	Complete
12.11	Write off procedure changed to Head of Finance and Business Assurance	Head of Finance and Business Assurance	Yes	Complete

	Reinstatement of arrears written off – wording changed from may reinstate to will reinstate			
16.1	Add in locality model, OCG and CE groups	Area Housing Managers	Yes	Complete
18.1	Estate walks – estate inspections Add One Voice Forum	Tenant Focus Group	Yes	Complete
19.2	Add KPI's – change ASB one Change estate walks to inspections	Head of Housing Management Tenant focus group	Yes	Complete

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

Board Meeting

REPORT

Date : 03 August 2023

Item : 10

Subject : Customer Charter and Service Standards Review 2023

Presented by : Mark McEgan, Director of Housing and Customer Services

Prepared by : Jackie Linacre, Head of Customer Services

Purpose : To propose a revised Customer Charter and Service Standards for 2023 – 2026, following feedback from customers.

Recommendation: That Board approve the proposed Customer Charter and Service Standards for 2023-26

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

**Agenda Item No. 10
Date: 03 August 2023**

1. Report Title

1.1 Customer Charter and Service Standards Review 2023

2. Executive Summary

2.1 The report advises on changes to the existing Customer Charter taking into account feedback from tenants and employees.

2.2 The changes also reflect, where appropriate, the themes of the recently introduced Tenant Satisfaction Measures, the publication of the Charter for Social Housing, key themes arising from national consultation on the revised Consumer Standards and the proposed themes in the draft Corporate Plan 2024 – 2029.

2.3 Changes to the existing Charter are attached at Appendix A and shown in red font. Deletions are shown using a strike through. Also included is the rationale for the change.

3. Purpose

3.1 To propose a revised Customer Charter and Service Standards for 2023 – 2026, following feedback from customers.

4. Recommendation

4.1 That Board approves the revised Customer Charter and Service Standards 2023-26.

5. Background

5.1 As part of our commitment and vision to ensure we put our customers at the heart of everything we do, we review our Customer Charter and Service Standards every 3 years.

5.2 The Charter sets out what tenants can expect from us and how we will measure our performance against the standards we have set. Performance against the service standards is reported to Performance and Improvement Committee and publicised on our web.

5.3 The proposed measures in the Charter complement Tenant Satisfaction Measures and internal KPIs, introduced in April 2023.

5.4 Other national feedback has also been taken into account and has helped shape the final document. This includes ensuring the Customer Charter links to the key themes of the Charter for Social Housing (attached at Appendix B), takes into account national feedback from tenants regarding the proposed new consumer standards and the themes of the new Tenant Satisfaction measures, implemented by the Regulator of Social Housing in April 2023.

6. Consultation

6.1 Feedback on the existing Charter and Service Standards has taken place with the following groups:

- Focus Group meetings with representatives from the Tenant and Resident Involvement Panel, GIG and the One Voice Forum;
- Survey to all members of the Get Involved Group (GIG);
- Article in April's edition of HouseProud asking for comments online or by email;
- Survey to minority groups via Voluntary Action Doncaster and the People Focus Group;
- Consultation with Heads of Service and Service Managers

6.2 Consultation focused on whether the promises in the existing Charter, and the service standards we use to measure our performance, are fit for purpose, still matter and make a meaningful difference to our customers.

6.3 Customers who were consulted by survey were asked to take into account the needs of our diverse customers when thinking about whether the Charter was fit for purpose. 17 of the respondents indicated they had a disability, 3 identified as LGBT, 1 person indicated they were White Polish.

6.4 Consultation has also taken place internally with Heads of Service and Service Managers to ensure any recommendations can be monitored and reported on a quarterly basis.

6.5 A copy of the revised Charter is attached at Appendix A. This shows the changes proposed in red, together with the rationale for the change. The changes reflect the feedback from customers.

7. Feedback from consultation

7.1 Feedback from the surveys sent to Get Involved Group members was, customers were happy with the current Charter promises, they thought all were relevant and did not need rewording. They did not propose the removal of any of the existing customer promises or propose any new ones.

7.2 Feedback from the focus groups is set out below. Those not specifically applicable to the review of the Charter are being picked up using other mechanisms, as indicated below.

- *Ensure records are kept up to date* – a review is being undertaken of the recently published Housing Ombudsman spotlight report on Knowledge and Information Management to ascertain any learning points;
- *Understanding customers better* – currently investigating how we can work with Voicescape to capture more data about our customers;
- *Focus on quality, as well as response times, for example when answering calls* – the measure has been amended to take this into account feedback;
- *Include something about listening to tenants* – the promise has been amended to take into account feedback;
- *Feedback to tenants in a timely manner* – You Said, We Did procedures and publication currently being reviewed;
- *ASB measures could be more flexible* – an additional measure has been added;
- *Include something about keeping promises* – this is already a Charter promise, but an additional measure is proposed to support with specifically measuring this;
- *Out of hours service performance needs to be looked at to ensure same level of service out of hours as during working day* – regular discussions take place with the Alarm Receiving Centre as part of the management of the Service Level Agreement we have in place;
- *Need more people involved in engagement* – the measure has been changed so we can focus more on outcomes which will encourage greater participation;
- *Need to ensure that targets are realistic so as not to raise expectations and to ensure we are delivering a value for money service* – the measures have been changed where appropriate;

7.3 Other themes taken into account, which the Chartered Institute of Housing have advised are emerging following consultation by the Regulator of Social Housing on the review of existing consumer standards, include:

- Meeting diverse needs;
- Treating tenants with respect, fairly and without discrimination.

8. Next steps

8.1 Once approved, a new design of the customer charter will be produced, incorporating the new standards. This will be advertised on our website and Facebook and will feature in a HouseProud article later in the year.

9. Procurement

9.1 There are no procurement implications arising from this report

10. VFM Considerations

10.1 There are no VFM considerations arising from this report.

11. Financial Implications

11.1 There are no financial implications arising from this report

12. Legal Implications

12.1 There are no legal implications arising from this report

13. Risks

13.1 There are no risks arising from this report, other than reputational risks if the standards are not met.

14. Health, Safety & Compliance Implication

14.1 There are no Health and Safety implications arising from this report

15. IT Implications

15.1 There are no IT implications arising from this report and all Heads of Service have confirmed that these can be measured and reported on.

16. Consultation

16.1 Consultation has taken place - see section 6.

17. Diversity

17.1 There are no diversity implications arising from this report and the Charter has been amended where appropriate to make it clear our promises relate to our diverse community.

18. Communication Requirements

18.1 Once approved the new Customer Charter and Service Standards 2023-2026 will be communicated to all tenants and employees and will be promoted through a variety of communication methods.

19. Equality Analysis (new/revised Policies)

19.1 N/A as this is not a new policy

20. Environmental Impact

20.1 There are no Environmental implications arising from this report

21. Report Author, Position, Contact Details

21.1 Jackie Linacre, Head of Customer Services – 01302 862262

22. Background Papers

22.1 Appendix A – Existing Charter with proposed revisions
Appendix B – Charter for Social Housing Themes

Charter for social housing residents

1. **To be safe in your home.** We will work with industry and landlords to ensure every home is safe and secure.
2. **To know how your landlord is performing,** including on repairs, complaints and safety, and how it spends its money, so you can hold it to account.
3. **To have your complaints dealt with promptly and fairly,** with access to a strong ombudsman who will give you swift and fair redress when needed.
4. **To be treated with respect,** backed by a strong consumer regulator and improved consumer standards for tenants.
5. **To have your voice heard by your landlord,** for example through regular meetings, scrutiny panels or being on its board. The government will provide access to help, if you want it, for you to learn new skills to ensure your landlord listens.
6. **To have a good quality home and neighbourhood to live in,** with your landlord keeping your home in good repair.
7. **To be supported to take your first step to ownership,** so it is a ladder to other opportunities, should your circumstances allow.

Appendix A

Changes are shown in red. Black text is the original with proposed deletions shown as a strike through

Our Themes	Customer Promise	Measure and Target	Rationale for change
<p>People</p> <p>Respectful and helpful engagement</p> <p>Effective handling of complaints</p>	<p>All staff and contractors are: Helpful, respectful, courteous, polite, friendly and professional</p>	<p>98% of customers who thought staff and contractors were polite and respectful and gave them their full attention. (measured through transactional surveys)</p>	<p>Respect and not discriminating has been identified as key themes coming out of the consultation, undertaken by the Regulator of Social Housing, on the revised consumer standards and is part of the Social Housing Charter.</p>
	<p>We will keep our promises and do what we say we will.</p>	<p>95% respond to written enquiries, complaints and compliments within 10 working days</p>	<p>No change</p>
	<p>We will treat you as an individual, with respect and decency and without discrimination.</p>	<p>% of complaints received about broken promises.</p>	<p>Additional measures to support a reduction in the number of complaints about broken promises. The need to keep promises was specifically mentioned in customer consultation.</p>
<p>Homes</p> <p>Keeping properties in good repair and maintaining building safety</p>	<p>We will carry out necessary work to help you make sure you feel safe in your home/neighbourhood and community</p>	<p>Service all Gas and Solid Fuel appliances annually Damp and mould inspections raised during the quarter, completed in target (This measure will be implemented following the introduction of Awaab's law, which will ensure Social housing landlords will have to investigate and fix damp and mould in their properties within strict new time limits.</p>	<p>Remove reference to neighbourhood and community so the focus of this promise is on being safe in the property. Neighbourhood and ASB issues are picked up in another standard.</p> <p>Remove gas and solid servicing as always 100% and cannot report until year end. This is also already reported on via a KPI. Replace with damp and mould standard as targets will shortly be introduced under Awaab's law. The Law comes in the wake of the tragic death of two-year-old Awaab Ishak, caused by the damp and mould in his home.</p>
	<p>We will do our best to get it right first time, every time.</p>	<p>95% satisfied with the condition of your new property (measured via new tenants' satisfaction survey)</p>	<p>Added the word new to reflect that this measures satisfaction with tenants moving into a new home. Satisfaction that the home is well maintained is already measured via a perception Tenant Satisfaction Measure.</p>
	<p>We will always aim to offer you an appointment that is the most convenient to you within the times-operating hours we deliver our services.</p>	<p>% of repairs completed on the first visit (FVC) 88% of tenants satisfied with the most recent responsive repair carried out on their property (measured using Voicescape following the completion of a repair)</p>	<p>Remove FVC as already being reported as a KPI. Insert satisfaction with responsive repair carried out as a key indicator of customer satisfaction.</p>
	<p>We will always aim to offer you an appointment that is the most convenient to you within the times-operating hours we deliver our services.</p>	<p>98% of repairs appointments made and kept</p>	<p>No change</p>
<p>Communities</p> <p>Responsible Neighbourhood Management</p>	<p>We will make sure you feel safe in your home/neighbourhood and community. Working with other agencies, we will make a positive contribution to your neighbourhood</p>	<p>All neighbour disputes, tenancy breaches or anti-social behaviour reports will be allocated a risk rating and you will be visited within 1 working day, 3 or 5 days depending on the risk rating applied. 95% of Low ASB reports responded to within 5 working day. 95% of Medium Risk ASB reports responded to within 3 working days. 90% of High Risk ASB reports responded to within 1 working day.</p>	<p>Promise changed as SLHD is not the only agency to impact on how safe a customer feels in their community and neighbourhood. Safety in home is covered in the promises above under (Homes)</p>
	<p></p>	<p>60% of customers, whose ASB was closed during the quarter, satisfied with the way their anti-social behaviour complaint was handled. (Measured by transactional surveys on close of ASB cases)</p>	<p>Added so we are measuring quality as well as how quickly we process ASB complaints. ASB mentioned as part of the customer consultation.</p>
<p>Partnerships</p> <p>Informing, involving, consulting and collaborating with you on service delivery</p>	<p>We will ask for and listen to your views to help inform the decisions we make and to improve our services</p>	<p>We will make an assessment of tenancy support needs and respond to all referrals within 12 working days</p> <p>88% of customer satisfied that the person they spoke to had the knowledge or information to resolve your call at the first point of contact.(measured through transactional surveys)</p>	<p>No change</p> <p>The ability to demonstrate that we are listening to our customers came out of the customer consultation and is a key element of the Social Housing Charter. Also links to quality of call answering which was another issue discussed at the focus groups.</p>
	<p>We will always aim to deal with your enquiries quickly and effectively having knowledgeable staff</p>	<p>Increase in the number of tenants involved in the Get Involved Group (GIG) on a quarterly basis</p> <p>100% of policies that require approval by Board discussed at the One Voice Forum.</p>	<p>GIG measure removed as it is not a real measure of outcomes or how well we do at engaging with our tenants.</p>
	<p>We will be easy to contact using your own preferred method</p>	<p>95% respond to social media posts within the same working day, when within normal working hours</p> <p>Register 100% of housing applications or contact you if your application is incomplete within 10 working days</p>	<p>Remove responding to social media posts as we can measure this locally and it is nearly always at 100%.</p> <p>Remove registering housing applications within 10 working days as this has been at 100% for well over a year. This will be measured locally.</p>
	<p></p>	<p>95% answer your calls within 20 seconds 90% of calls answered within 150 seconds.</p>	<p>Call answering target changed as not achievable, something which came out of the consultation sessions. Agreed important to focus on quality of call as well as how quickly answered. The proposed indicator is consistent with the call answering target used by CDC.</p>
	<p></p>	<p></p>	<p></p>

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

Board Meeting

REPORT

Date : 03 August 2023

Item : 11

Subject : Q1 Revenue Monitoring Report
2023/24

Presented by : Julie Crook
Director of Corporate Services

Prepared by : Nigel Feirn, Head of Finance and
Business Assurance

Purpose : To inform St Leger Homes of
Doncaster (SLHD) Board of the
projected revenue income and
expenditure for 2023/24 and the actual
and committed income and
expenditure to date as at 30 June 2023.

Recommendation :

For Board to note the Revenue Monitoring report as at 30 June 2023 and the projected outturn for the financial year 2023/24.

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

**Agenda Item No. 11
Date: 03 August 2023**

1. Report title

1.1. Q1 Revenue Monitoring Report 2023/24.

2. Purpose

2.1. To report income and expenditure to 30 June 2023, projected for 2023/24, variances to the approved budget and related commentary.

3. Executive Summary

3.1. After three months of 2023/24, there are a number of variances to budget emerging in the projected outturn to 31 March 2024, due to known impacts or assumptions that have been applied to unknowns at this early stage. These are commented on below.

3.2. An overall **Deficit** is projected for the year of £438k. However, this is **before** additional HRA and General Fund (GF) Management Fees of £436k have been included. These additional fees will go towards known or anticipated inflation or virement impacts (see 3.3 below). A revised overall Deficit of £2k is projected after accounting for these.

	HRA	GF	SLHD
Projected	468	-30	438
Additional management fee	-436	0	-436
Revised	32	-30	2

3.3. The additional management fee items are as follows.

<u>Budget</u>	<u>Comments</u>	<u>£k</u>	<u>Reason</u>
Pay award	Assumed £1,925 per employee (~6.6%)	667	Inflation
Pension costs	Contribution rate reducing to 10.2%	-536	Inflation
Office rents	Civic Office (£96k) and Shaw Lane (£58k)	154	Inflation
District Heating	Fee for maintenance costs in SLHD	101	Virement
Employee charge	Asbestos Officer recharge	50	Virement
		<u>436</u>	

4. Budget pressures / projected variances

4.1. The table below summarises the main variances projected at quarter 1 and why these are expected to occur. Further comments appear below

	HRA	GF	Comments
<u>Variances</u>	Quarter 1 projected variance £k	Quarter 1 projected variance £k	
Salaries (excl Call Out)	-1,556	-140	Vacant posts, pay award
Salaries Call Out	361	0	Budget £663k, Projection £1,024k
Temporary staff	115	10	Vacant post cover
Supplies and Services	212	0	Project Management Balby Bridge remediation
Supplies and Services	0	254	B&B and Security – increased demand
Premises / SLA	154	114	Civic Office, Shaw Lane, Temp Accom (GF)
Building Materials	169	0	CO detectors (= additional income below)
Fuel	-152	0	Reduced mileage due to efficiencies
External Contractors	947	0	EICR £612k, Wates £170k – see below
Net Others	174	-39	
Capital Income	-597	0	Primarily CO detectors (£524k)
Other Income	0	-279	HB due to higher B&B costs
Other Income	-81	0	External Funding (2x Mental health practitioners)
Other income – Pension	722	50	Pension refund replaced by reduced contributions
Deficit/(-)surplus	468	-30	

HRA OPERATIONS - Commentary on main variances

- 4.2. Salary costs – the budget assumed a 4% pay award but this is still in negotiation so an increase of £1,925 per employee has been assumed at this stage, which equates to 6.6% and an additional £667k.
- 4.3. Salary costs – Pension contributions reducing from 16.0% to 10.2% equate to a saving of £1,308k. This is partially offset by removal of an annual pension refund of £772k as part of the new contribution rates, leading to a net saving of £536k.
- 4.4. External contractors are projecting to be £947k over budget. Overspends are analysed as below :

<u>Expenditure comments</u>	<u>£k</u>
EICR contractors funded by surplus from CO detectors and Electrical vacancies	612
Wates £40k spend last year - rest is slippage and is unfunded in 23/24	170
Dunbar Boardman costs	13
Fans - remedial works for high rise buildings	11
Dentons - includes 22/23 showers legacy	30
Metrorod - Responsive repairs	29
Voids revenue works	47
Fire Risk Assessments	63
Net others	-28
	<u>947</u>

- 4.5. Vacant posts are under review in all areas to identify if they need to be filled, and what is the impact on service delivery and alternatives, or when they are likely to be filled. Corporate Services is relatively stable vacancy wise but is suffering from high sickness levels, and the restructure in Housing Management commenced on 1 July. Where vacancies are known or expected at quarter end, recruitment periods of three months have been assumed.

GF OPERATIONS - Commentary on main variances

- 4.6. Salary costs - implementation of the new structure within Home Options is well underway, with the temporary employees from the 22/23 structure ending over the next four months, some of whom have been appointed in the new structure. Some have left early having found other jobs and some have had their temporary contracts extended.
- 4.7. A full review of all 50 WTE posts in the new structure has been undertaken and assumptions applied to those still vacant and recruitment has started or is about to. Where other vacancies exist or are expected, a three month recruitment period is assumed. Four new posts are still vacant and two or three other posts are expected to become vacant shortly.
- 4.8. Salary savings total £130k and current and anticipated workloads are and will continue to be analysed to see if this will need to be utilised with further temporary recruitment.
- 4.9. Bed and Breakfast – In the first quarter of the year, the average B&B placements has been around 30 per night, which is slightly higher than anticipated. However, there has been an increasing trend and numbers in June and July have been between 40 and 50 per night, so 40 has been assumed for the rest of the year. There will be periods where it is higher and lower, but 40 is considered a prudent average. Cost have been projected accordingly and show an overspend to budget of £254k.
- 4.10. Temporary Accommodation – the budget assumes 110 properties used in the year. Current numbers have averaged 135 for the first three months and is at 139 at end of June. 130 has been assumed for the rest of the year leading to an overspend of £114k.
- 4.11. Other income - £279k higher than budget reflecting 90% recovery of additional Housing Benefit from the increased temporary accommodation and B&B costs.
- 4.12. No additional funding, ie grant income, has been assumed other than what is budgeted.
- 4.13. All other budget lines have been projected in line with their respective budgets.

5. Operations – HOS commentary on year to date key operational points and Risks/Key issues/Actions

Housing and Customer Services:

- 5.1. No major issues in the first quarter, with the main focus areas being on
- Implementing the new structure in Housing Management
 - Working towards Customer Excellence accreditation and undertaking related training across the company
 - Implementing new Tenant Satisfaction Measures as part of our work on the Social Housing Regulation Bill.

Corporate Services:

- 5.2. No major budget pressures emerging in the quarter and the only issue has been the higher than normal levels of sickness within the Directorate, increasing workloads and delaying some work.

Property Services: Asset Management Services

- 5.3. At this end of Quarter 1, the Directorate is projecting a Deficit of £307k, but most of this relates to known higher spend levels for which some additional management fee income will be received, namely:
- Increased rental costs at Shaw Lane following the rent review, not fully budgeted;
 - Increased SLA costs for accommodation at the Civic, not fully budgeted;
 - Costs (~£200k) for project management (AHR) of the Balby Bridge render remediation scheme. Put in place due to the number of vacancies within the commercial team, with the intention to use the budget for these vacancies to fund AHR. However, the vacancies covered a range of activities and not just Balby Bridge and are now starting to be filled and therefore the arrangement with AHR will need to be reviewed and budget projections adjusted as a result.
- 5.4. Staff recruitment and retention remains the main risk area, with a number of posts vacant and continued difficulties in recruiting to.

Property Services: Building Services

- 5.5. Staff costs : Recruitment difficulties continue in some parts of Property Services. Generally, savings from vacant posts are funding overtime, agency staff and/or contractors.
- 5.6. The Electrician vacancies are also funding the EICRs by contractors, as agreed by EMT.
- 5.7. Call out salary costs are projecting to be £940k. Although this is projecting £220k less than last year's outturn figure of £1,160k, it is still £309k over the £630k budget for 2023/24. This also incurs additional holiday pay which is projecting to be £52k over budget.

5.8. Other areas to note impacting on budgets are:

- Transport – fuel savings of £151k projected as anticipated price increases not fully materialising, and prices starting to reduce. Also, usage has dropped by approx. 2,500 litres a month (nearly 9%) as we stabilise the areas on 'One repairs'. Potential further savings on this budget;
- Materials – projecting £169k over budget due to the CO detector replacement programme for all properties in this financial year. Increased income will result from this and the net surplus will partially fund the EICRs;
- External Contractors – as detailed at 4.4 above. Some void contractor works are being funded by vacancies but all contractor spend is being closely monitored due to budget pressures;
- Capital Income - additional income from CO detectors as above.

5.9. Repairs and voids volumes to date with comparatives are as follows:

<u>Year to date repairs orders</u> – 3 months	Jun-23	Jun-22	Jun-21	Jun-20	Jun-19
	no.	no.	no.	no.	no.
Emergency Orders	5,296	5,365	2,027	1,848	1,982
Urgent Orders	5,331	6,026	8,472	5,531	7,983
Routine Orders	7,072	3,824	4,195	1,012	4,099
Scheduled Orders	211	2,582	2,797	2,762	2,785
Total	17,910	17,797	17,491	11,153	16,849
<u>Voids</u>					
Terminations – <u>Year to date</u>	307	281	351	219	378
Lettings – <u>Year to date</u>	318	315	277	n/k	n/k
Lettable voids <u>at month end</u>	122	134	125	194	134
Non lettable <u>at month end</u>	10	10	8	0	0
Earmarked for demolition	0	8	0	0	0
Gross voids <u>at month end</u>	132	152	133	194	134

General Fund : Home Options

- 5.10. The two main challenges and risk areas have been around
- the restructure and staffing levels, as commented on above; and
 - the move to a new OpenHousing module in the ICT system from the incumbent Abris allocations system.
- 5.11. The switch to the new system has been a major project for some time and has on the whole gone very smoothly in the first week of July, with any initial teething troubles being swiftly resolved.
- 5.12. Core operations continue to experience high demand for the services and placements in B&B accommodation increased in the quarter after falling at the end of 2022/23.

Staffing levels

- 5.13. As referred to above, vacancies exist in all Directorate as a result of employee turnover, difficulties in recruiting or ongoing restructures and realignments. The table below summarises the number of vacant posts in each area at the end of Q1. The budget assumed a Vacancy Factor of 4% which equates to approximately 34 Whole Time Equivalents (WTEs).

	Q1	Q4	Q3	Q2	Q1
	23/24	22/23	22/23	22/23	22/23
<u>Directorate</u>	<u>WTE</u>	<u>WTE</u>	<u>WTE</u>	<u>WTE</u>	<u>WTE</u>
Housing and Customer	19.0	9.6	15.1	6.5	11.7
Corporate	5.7	2.0	3.5	3.0	6.0
Asset Management	11.0	12.6	13.1	17.8	22.4
Property	45.5	42.5	44.0	44.4	55.2
Home Options (GF)	4.0	*1.0	*1.0	*2.5	*23.0
Totals	85.2	67.7	76.7	74.2	118.3

* includes temporary posts agreed as part of the 22/23 recovery plan and were not included in the budgeted establishment

6. Recommendation

- 6.1. For Board to note the Revenue Monitoring report as at 30 June 2023 and the projected outturn for the financial year 2023/24.

7. Procurement

- 7.1. Procurement implications are referenced as appropriate in the body of the report.

8. Value For Money

- 8.1. Implications are referenced in this report as appropriate. Close budgetary control is imperative. Finance staff are working closely with budget holders to ensure use of timely and accurate information, achieving VFM and robust procurement.

9. Financial Implications

- 9.1. Financial implications are considered within the body of the report

10. Legal implications

- 10.1. There are no legal implications arising from this report.

11. Risks

- 11.1. Financial and Operational risks are detailed in the report.

12. IT Implications

- 12.1. IT implications are referenced in this report as appropriate.

13. Consultation

- 13.1. No specific implications arising and references are implicit within the report where appropriate. Customer involvement and consultation were built in to the budget setting process and budget holders have been directly involved in the revenue monitoring process.

14. Equality and Diversity

- 14.1. There are no diversity issues arising from this report.

15. Communication

- 15.1. There are no communication requirements arising from this report.

16. Environmental

- 16.1. There is no environmental impact resulting from the proposals in this report.

Report author

Nigel Feirn

Budget Monitoring Working Papers 2023/24 Budget

Appendices – Revenue summaries for SLHD, HRA and General Fund

St. Leger Homes of Doncaster Ltd Revenue Summary as at 30 June 2023

	Income/Expenditure for the year				Projected Outturn at year end	Projected Variance at year end	
	Original Budget £'000	Budget to Date £'000	Actuals as at 30 June 2023 £'000	Variance to Date £'000	Estimates £'000	Variance £'000	Variance %
Management Expenditure							
Employee Expenses	32,097	8,020	7,246	-774	30,888	-1,209	-4%
Premises Expenses	2,239	560	-361	-921	2,441	203	9%
Transport	2,576	640	616	-24	2,407	-170	-7%
Supplies & Services	4,385	1,100	1,203	103	4,971	587	13%
Materials-Buildings Services	7,667	1,920	1,908	-12	7,836	169	2%
Service Level Agreements	4,234	1,060	322	-738	4,330	96	2%
Total Management Expenditure	53,197	13,300	10,935	-2,365	52,873	-325	-1%
Maintenance Expenditure							
External Maintenance Contractors (Revenue)	1,576	390	600	210	2,524	947	60%
Total Maintenance Expenditure	1,576	390	600	210	2,524	947	60%
Gross Expenditure	54,774	13,690	11,536	-2,154	55,396	622	1%
Income							
Management Fee - HRA	-36,687	-9,170	-9,172	-2	-36,687	0	0%
Management Fee - General Fund	-2,503	-630	-626	4	-2,503	0	0%
Recharges to Capital Schemes (In House)	-12,837	-3,210	-4,151	-941	-13,433	-597	5%
Other Income	-2,747	-690	-51	639	-2,335	413	-15%
Direct Charge to HRA	0	0	0	0	0	0	-
Total Income	-54,774	-13,700	-14,000	-300	-54,958	-184	0%
Surplus(-) / Deficit	0	-10	-2,464	-2,454	438	438	-

St. Leger Homes of Doncaster Ltd Revenue Summary as at 30 June 2023 - Home Options (General Fund)

	Income/Expenditure for the year				Projected Outturn at year end	Projected Variance at year end	
	Original Budget £'000	Budget to Date £'000	Actuals as at 30 June 2023 £'000	Variance to Date £'000	Estimates £'000	Variance £'000	Variance %
Management Expenditure							
Employee Expenses	1,957	490	467	-23	1,826	-130	-7%
Premises Expenses	872	220	-549	-769	997	125	14%
Transport	0	0	0	0	0	0	-
Supplies & Services	1,207	300	349	49	1,461	254	21%
Materials-Buildings Services	0	0	0	0	0	0	-
Service Level Agreements	43	10	0	-10	43	0	0%
Total Management Expenditure	4,078	1,020	267	-753	4,327	249	6%
Maintenance Expenditure							
External Maintenance Contractors (Revenue)	0	0	0	0	0	0	-
Total Maintenance Expenditure	0	0	0	0	0	0	-
Gross Expenditure	4,078	1,020	267	-753	4,327	249	6%
Income							
Management Fee - HRA	0	0	0	0	0	0	-
Management Fee - General Fund	-2,503	-630	-626	4	-2,503	0	0%
Recharges to Capital Schemes (In House)	0	0	0	0	0	0	-
Other Income	-1,575	-390	13	403	-1,854	-279	18%
Direct Charge to HRA	0	0	0	0	0	0	-
Total Income	-4,078	-1,020	-613	407	-4,357	-279	7%
Surplus(-) / Deficit	0	0	-345	-345	-30	-30	-

St. Leger Homes of Doncaster Ltd Revenue Summary as at 30 June 2023 - HRA ONLY

	Income/Expenditure for the year				Projected Outturn at year end	Projected Variance at year end	
	Original Budget £'000	Budget to Date £'000	Actuals as at 30 June 2023 £'000	Variance to Date £'000	Estimates £'000	Variance £'000	Variance %
Management Expenditure							
Employee Expenses	30,140	7,530	6,779	-751	29,061	-1,079	-4%
Premises Expenses	1,367	340	188	-152	1,444	78	6%
Transport	2,576	640	616	-24	2,407	-170	-7%
Supplies & Services	3,178	800	854	54	3,511	333	10%
Materials-Buildings Services	7,667	1,920	1,908	-12	7,836	169	2%
Service Level Agreements	4,191	1,050	322	-728	4,286	96	2%
Total Management Expenditure	49,119	12,280	10,668	-1,612	48,545	-574	-1%
Maintenance Expenditure							
External Maintenance Contractors (Revenue)	1,576	390	600	210	2,524	947	60%
Total Maintenance Expenditure	1,576	390	600	210	2,524	947	60%
Gross Expenditure	50,696	12,670	11,268	-1,402	51,069	373	1%
Income							
Management Fee - HRA	-36,687	-9,170	-9,172	-2	-36,687	0	0%
Management Fee - General Fund	0	0	0	0	0	0	-
Recharges to Capital Schemes (In House)	-12,837	-3,210	-4,151	-941	-13,433	-597	5%
Other Income	-1,172	-300	-64	236	-480	692	-59%
Direct Charge to HRA	0	0	0	0	0	0	-
Total Income	-50,696	-12,680	-13,387	-707	-50,600	95	0%
Surplus(-) / Deficit	0	-10	-2,118	-2,108	468	468	-

ST LEGER HOMES OF DONCASTER LTD

Company limited by guarantee registered in England
Company Number 05564649

Board Meeting

REPORT

Date : 03 August 2023

Item : 12

Subject : Q1 Capital Monitoring Report 2023/24

Presented by : Julie Crook
Director of Corporate Services

Prepared by : David Henderson
Management Accountant

Purpose : To inform Board of the projected capital expenditure for 2023/24, the funding available and the actual and committed expenditure to date as at 30th June 2023.

Recommendation :

For Board to acknowledge the Capital Monitoring Report and the projected outturn for the financial year 2023/24.

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. 12
Date: 03 August 2023**

1. Report Title

1.1 Q1 Capital Monitoring Report 2023/24 as at 30 June 2023.

2. Executive Summary

2.1 The reported projections at Q1 show the planned, in-year spend on the Housing Capital Programme would be £42.42m, a variance against the £73.01m revised budget of (£30.59m).

3. Purpose

3.1 To inform Board of the projected capital expenditure for 2023/24, the funding available and the actual and committed income and expenditure to date as at 30th June 2023.

4. Recommendation

4.1 Board is asked to acknowledge the Capital Monitoring Report and the forecast outturn for the financial year 2023/24.

5. Background

5.1 The Housing Capital Programme for 2023/24, for which SLHD has overall financial management is summarised at **Appendix A**. The projected in year spend of £42.42m is an under-spend of £30.59m from the budgeted spend of £73.01m.

5.2 Further analysis of the Housing Capital Programme can be found at **Appendices B&C:-**

1. **Appendix B**. Public Sector Housing Capital Programme.

2. **Appendix C**. Private Sector Housing Capital Programme.

5.3 SLHD manage the finances for the whole of the housing capital programme.

5.4 The Council approved a four-year Housing Capital Programme on 27th February 2023, totalling £228m across the four years.

The main priorities of the programme in 2023/24 are:

- Council House Build Programme.
- Council House Acquisitions.
- Section 106 Opportunities
- Council House Improvement and Maintenance Programme.
- Fire Safety Improvements.
- Electrical Works.
- Energy Efficiency Works.
- Residential Site Improvements.
- Net Zero Carbon

6. Expenditure Variances

6.1 The following paragraphs give explanations of expenditure variances as shown in Appendix A. Following consultation with Audit Committee, only variances in excess of £250k or 20% of scheme costs are detailed in the report. (Under) / Overspends and %'s are summarised below.

SLHD Managed Schemes

6.2 The element of the capital programme managed by SLHD is forecast to outturn at £38.87m against resources of £45.41m, an under-spend of £6.54m.

6.3 £0.70m, 21% over budget, Void Improvements

We have seen a 10% increase in the number of major voids and a 20% increase in the cost of the improvements, when comparing this year to last year. This additional £0.70m is made up of £0.40m of payments to external contractors and £0.30m of work by the inhouse repairs service. The increase which will be delivered by the inhouse repairs service is funded by a virement from internal works.

6.4 £0.52m, 15% over budget, Mechanical and Electrical Improvements

The budget was based on the planned replacement of the CO detectors over a few years. The decision to accelerate the replacement of all the planned CO detectors into 2023/24 has resulted in the increased forecast.

6.5 (£1.30m, 42%, under budget), Internal Works

The proposed communal flooring / decor works to the high-rise buildings, £1.0m have been reprofiled due to contractor capacity. It is envisaged that only minimal preparation works will be possible this year with much of the budget being slipped into 2024/25. This budget has also been reduced by £0.30m to reflect virement to void improvement works.

6.6 (£3.60m, 22%, under budget), External Works

(£1.13m) Remedial Works to High Rise. A revision to the delivery plan associated with the remedial works has resulted in a reduction of the forecast spend in this financial year. The slipped works will be carried out next year along with any additional works that are agreed.

(£2.33m) External Planned/ Thermal Works.

A revision to the delivery plan associated with this work has resulted in a reduction of the forecast spend. The profiled costs will be updated following the progression of the future phases.

(£0.14m) Communal Halls Refurbishments & Conversions.

A review of the planned communal hall programme of works is currently being undertaken. The decision to slip into next financial year the delivery of two planned conversions pending the outcome of the review has resulted in the projected underspend.

6.7 £0.14m, 235%, over budget, IT Improvements

The planned 2022/23 integration of both the One Housing and Abrisas systems to the Capita system and installation of the PSTN lines have been slipped into this year. In addition, there has been a revision to the costs associated with the replacement of the SLHD Website/ Intranet.

6.8 (£3.00m, 80% under budget) Caravan Site Improvements

This budget has been adjusted to reflect the revised profile of expenditure on the G&T sites. The forecast expenditure for the year has been reduced to £0.40m as a result of planning permission still being required on two of the three sites and when planning permission is approved a full procurement exercise will need to be undertaken.

7. DMBC Managed Schemes

7.1 The element of the capital programme managed by CDC is forecast to outturn at £3.56m against resources of £27.60m, an under-spend of £24.04m.

7.2 (£24.04m, 95%, under budget) Council House New Build.

£0.12m Adwick Lane Site Phase 1.

The planned completion of the site in 2022/23 was delayed due to utility connection issues. The scheme is now complete, and the final account has been settled.

(£23.95m) All 7 sites in Phase 2.

This phase of the programme has been delayed pending the PCSA (Pre-Construction Services Agreement) being signed off by all parties. The agreement has now been signed off which will allow the Council to obtain a comprehensive view of the full contract costs which, if deemed acceptable will facilitate the awarding of the construction contract. The revised forecast assumes some mobilisation and site set up costs across each scheme along with the £0.65m costs associated with the PCSA. The remaining funding has been slipped into 2024/25.

(£0.21m) Harlington Rd S106.

The opportunity to acquire discounted properties at the Harlington Road site has been reprofiled into 2024/25. The scheme has just been approved by planning and the final purchase price from the developers is yet to be negotiated.

7.3 Aids and Adaptations

Currently this budget is projecting to be on budget, there is considerable pressure on this budget and work is ingoing to try and keep the expenditure in line with the budget.

8. **Future Plans / Work in Progress**

8.1 Expenditure and the associated in-house income will be closely monitored throughout the year to ensure that the budgeted levels are achieved.

8.2 Park Homes Sites.

A report is at Cabinet on 16th August 2023 relating to the Installation of fire shield suppression systems at the three Council owned residential sites. The estimated costs are £1.384m and these will be split over two financial years 2023/24 and 2024/25. Upon approval, the scheme will be added into the programme as part of the Quarter 2 finance and performance report.

8.3 Acquisitions.

The programme includes funding for acquisitions to deliver 232 properties across the four-year period (2023/24 - 2026/27), funded from rent increases and retained right to buy receipts. In addition, a successful bid for LAHF grant funding was secured to deliver 9 properties in 2023/24.

The current position is detailed below;

2023/24 Cumulative position	W/e 14th July
Number of properties completed to date	7
Purchase price of properties completed	£923,000
Number of properties in legal process (offer submitted and accepted)	18
Purchase price of properties in legal process	£2,852,500
Number of property offers submitted but awaiting feedback/decision	0
Number of properties awaiting valuation	5
Number of properties with viewing booked	3

8.4 Empty Homes Scheme / Edlington Royal Estate.

It has been agreed by Doncaster's Executive Leadership Team and Executive Board members to re-purpose £200k of approved funding for Flood and Empty Homes loan schemes to provide a budget for housing interventions at the Royal Estate in Edlington, in support of the Regenerative Neighbourhoods programme of activity taking place in the town.

9. Procurement

9.1 All the work delivered through the CDC capital programme were procured in line with the requirements of CDC's financial procedure rules and contract standing orders.

9.2 Delivery of the projected programme for 2023/24 will be subject to the availability of St leger homes employees, building materials and contractors as the whole sector is experiencing issues post Covid.

10. VFM Considerations

10.1 Efficiency and Value for Money principles have been adopted throughout the capital monitoring process.

11. Financial Implications

11.1 All the financial implications are considered within the body of the report.

12. Legal Implications

12.1 There are no legal implications arising from this report.

13. Risks

13.1 Risk implications are implicit in the report. CDC's Capital Programme budget was £70.36m to deliver several priorities, primarily building new affordable homes and improving and maintaining existing housing stock.

- 13.2 Other noteworthy risks which will potentially have a financial impact are;
- Inflation;
 - Fire doors;
 - Ongoing compliance risks and
 - Ongoing investigations of the render on high rise blocks.

14. Health, Safety & Compliance Implications

14.1 Not applicable.

15. IT Implications

15.1 Not applicable.

16. Consultation

16.1 All Budget holders and EMT.

17. Diversity

17.1 There are no diversity issues arising from this report.

18. Communication Requirements

18.1 There are no communication requirements arising from this report.

19. Equality Analysis (new/revised Policies)

19.1 Not Applicable

20. Environmental Impact

20.1 There are no environmental impact resulting from the proposals in this report.

21. Report Author, Position, Contact Details

21.1 David Henderson
Management Accountant 01302 737987

22. Background Papers

22.1 Capital Programme (2023/24-2027/27) budget report 27 February 2023.

Summary of Housing Capital Programme 2023/24 as at 30 June 2023

	Original Estimate - Approved Programme £000	Revised Budget £000	Forecast Outturn £000	Variance Outturn to Revised Budget £000
SLHD Managed Schemes				
Capital Management Delivery Fee	1,500	1,500	1,500	0
Void Improvements	3,290	3,290	3,990	700
Mechanical and Electrical Improvements	3,502	3,502	4,025	523
Fire Safety Works	2,171	2,508	2,508	0
Internal Works	3,114	3,114	1,814	(1,300)
External Works	15,865	16,065	12,462	(3,603)
Environmental Works	1,370	1,370	1,370	0
IT Improvements	60	60	201	141
Acquisitions	8,348	8,926	8,926	0
Acquisition Refurbishments	-	1,108	1,108	0
Caravan Site Improvements	3,713	3,744	740	(3,004)
Assistance Loans	20	11	11	0
Appropriated Properties	-	212	212	0
Sub-Total	42,953	45,410	38,867	(6,543)
DMBC Managed Schemes				
Adaptations for the Disabled	2,200	2,200	2,200	0
Council House New Build	25,208	25,208	1,169	(24,039)
Affordable Housing	-	87	87	0
Empty Homes Scheme	-	100	100	0
Sub-Total	27,408	27,595	3,556	(24,039)
Overall Housing Programme Total	70,361	73,005	42,423	(30,582)
Funding				
Major Repairs Reserve / Depreciation	32,757	33,410	25,372	(8,038)
Revenue Contribution - HRA	7,280	7,280	5,942	(1,338)
Usable Capital Receipts	6,061	6,394	1,526	(4,868)
Section 106	-	900	900	0
Prudential Borrowing	23,208	23,208	6,870	(16,338)
Grants	1,055	1,813	1,813	0
Under(-) / Over Commitments	70,361	73,005	42,423	(30,582)
Percentage Funded	100%	100%	100%	

Summary of Housing Capital Programme 2023/24 as at 30 June 2023

	Original Estimate - Approved Programme	Revised Budget	Forecast Outturn	Variance - Outturn to Revised Budget
	£000	£000	£000	£000
SLHD Managed Schemes				
Capital Management Delivery Fee	1,500	1,500	1,500	0
Void Improvements	3,290	3,290	3,990	700
Mechanical and Electrical Improvements	3,502	3,502	4,025	523
Fire Safety Works	2,171	2,508	2,508	0
Internal Works	3,114	3,114	1,814	(1,300)
External Works	15,865	16,065	12,462	(3,603)
Environmental Works	1,370	1,370	1,370	0
IT Improvements	60	60	201	141
Acquisitions	8,348	8,926	8,926	0
Acquisition Refurbishment	0	1,108	1,108	0
Appropriated Properties	0	212	212	0
Sub-Total	39,220	41,655	38,116	(3,539)
DMBC Managed Schemes				
Adaptations for the Disabled	2,200	2,200	2,200	0
Council House New Build	25,208	25,208	1,169	(24,039)
Sub-Total	27,408	27,408	3,369	(24,039)
Overall Housing Programme Total	66,628	69,063	41,485	(27,578)
Funding				
Major Repairs Reserve / Depreciation	32,757	33,410	25,372	(8,038)
Revenue Contribution - HRA	7,280	7,280	5,942	(1,338)
Usable Capital Receipts	2,328	2,539	675	(1,864)
Section 106	0	813	813	
Prudential Borrowing	23,208	23,208	6,870	(16,338)
Grants	1,055	1,813	1,813	0
Under(-) / Over Commitments	66,628	69,063	41,485	(27,578)
Percentage Funded	100%	100%	100%	

Summary of Housing Capital Programme 2023/24 as at 30 June 2023

	Original Estimate - Approved Programme £000	Revised Budget £000	Forecast Outturn £000	Variance - Outturn to Revised Budget £000
SLHD Managed Schemes				
Caravan Site Improvements	3,713	3,744	740	(3,004)
Assistance Loans	20	11	11	0
Empty Homes Scheme	0	100	100	0
Sub-Total	3,733	3,855	851	(3,004)
DMBC Managed Schemes				
Affordable Housing	0	87	87	0
Sub-Total	0	87	87	0
Overall Housing Programme Total	3,733	3,942	938	(3,004)
Funding				
Usable Capital Receipts	3,733	3,855	851	(3,004)
Section 106	0	87	87	0
Under(-) / Over Commitments	3,733	3,942	938	(3,004)
Percentage Funded	100%	100%	100%	

ST LEGER HOMES OF DONCASTER LTD

Board Briefing Note

Title:	Quarter 1 2023/24 KPI dashboard
Action Required:	For information
Item:	13
Prepared by:	Nigel Feirn Head of Finance and Business Assurance
Date:	03 August 2023

1. Purpose

- 1.1. To provide Board members with the KPI dashboard as at the end of Quarter 1 (June) 2023/24 of the new financial year - and brief commentary for those KPIs where the target was not met. The KPI dashboard is attached at **Appendix A**. The latest monthly benchmarking is attached at **Appendix B**.

2. Executive summary

- 2.1. For 2023/24, eighteen KPIs have been agreed with Doncaster Council (CDC) and include new Tenant Satisfaction Measures (TSMs). Of the eighteen :
- One is measured quarterly – residents supported in training, education or employment (KPI14). This KPI combines two separate KPIs from 2022/23;
 - Four measured annually - tenant surveys (two), energy efficiency and Decent Homes Standard numbers, the same as in 2022/23;
- 2.2. The table below summarises the KPI dashboard as at the end of Quarter 1 – 30 June 2023, with comparatives. Of the fourteen KPIs measurable at end of Quarter 1 (Q1), five were met or were within agreed tolerances of target.

KPIs	Q1 23/24	Q4 22/23	Q3 22/23	Q2 22/23	Q1 22/23	Q4 21/22	Q3 21/22	Q2 21/22	Q1 21/22
Green (meeting target)	4	6	7	5	6	7	7	6	6
Amber (within tolerance)	1	4	1	2	1	4	3	3	2
Red (not meeting target)	9	6	7	8	6	5	4	5	4
No target (homelessness)	-	2	2	2	2	3	3	3	3
Quarterly / Annual / data unavailable	4	1	2	2	4	0	2	2	4
Total	18	19	19	19	19	19	19	19	19

- 2.3. A further two SLHD Board annual KPIs have been set to measure (1) employee satisfaction with SLHD as an employer (staff survey) and (2) a tenant satisfaction net promoter score KPI (tenant survey).

3. KPI commentary

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

Target	0.50%	
Q1 23/24 performance	0.73%	WORSE THAN TARGET – RED

The KPI of 0.50% equates to approximately 110 void properties.

The number of voids held in the quarter has generally fluctuated between 120 and 140, and at the end of June is 132. This includes ten non-lettable voids, as summarised below with comparatives.

	Q1 23/24	Q4 22/23	Q3 22/23	Q2 22/23	Q1 22/23
Void rent loss YTD %	0.73%	0.67%	0.67%	0.72%	0.76%
Target %	0.50%	0.50%	0.50%	0.50%	0.50%
Void numbers incl. non lettable	132	133	126	110	151

For five consecutive weeks up to the end of June, performance improved each week, helping the KPI to improve slowly from 0.76% to 0.73% at quarter end.

Stringent monitoring remains in place to monitor all voids from keys in to re-let to ensure that accurate planning and communication is shared between all teams. As a result of this the number of voids held will reduce and performance will improve.

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

Target **20.0 days**
Q1 23/24 performance **25.6 days** **WORSE THAN TARGET – RED**

	Q1 23/24	Q4 22/23	Q3 22/23	Q2 22/23	Q1 22/23
Re-let days	25.6	26.7	26.9	29.1	33.6

Standard re-let performance for each week has consistently been around the 24 to 26 levels, which has slowly reduced the YTD KPI to 25.6 at the end of Quarter 1.

Appendix B shows that current performance is top quartile when benchmarked in the monthly pulse surveys.

Void properties receive continued and extensive focus as we work towards meeting this challenging target.

3.3. KPI4 : Number of households placed in B&B/Hotel accommodation at month end

Profiled Target **35**
Q1 23/24 performance **50** **WORSE THAN TARGET – RED**

June saw an increase to 1,382 total nights, a 35% increase on May, which in turn was higher than April.

However, the Q1 total is 46% less than the same period last year and a 27% reduction on the previous quarter. Whilst the number of households placed has remained high, the team are continuing to minimise the number of nights they are staying in hotels. No families were over six weeks. Numbers placed has been impacted by the Council's Ending Rough Sleeping Action Plan which has a commitment to place people who are sleeping rough despite there being no statutory duty to do so.

3.4. KPI5 : % of Settled Accommodation at Prevention Stage

Target	60%	
Q1 23/24 performance	33%	WORSE THAN TARGET – RED

Thirteen prevention cases were closed within the month, of which eight (62%) secured existing or alternative accommodation. Through Q1 we have seen an increase in application at the Relief Stage. The number of new applications for Q1 has reduced by 11%, however compared to the same period last year it is a 14% increase in applications opened.

Capacity is an issue as officers brought in on Temporary Contracts have left ahead of schedule and the service is now operating at establishment with demand not reducing.

3.5. KPI 6 : Complaints relative to the size of the landlord per 1000 properties

Profiled Target YTD	12.5	
Q1 23/24 performance	15.4	WORSE THAN TARGET – RED

This is a new KPI for 23/24 and measures the number of Stage 1 and Stage 2 complaints per 1,000 properties under management.

This KPI is also part of the new Tenant Satisfaction Measures required by the Regulator. Guidance is to include both Stage 1 and Stage 2 complaints. HouseMark also measure complaints as part of their pulse surveys but performance is measured on a monthly basis whereas this KPI is cumulative.

Overall, for Q1 this equates to 15.4 complaints per 1,000 properties (15.0 + 0.4). The split is as follows:

Number of Stage 1 complaints received for Q1 is 299 complaints = 15.0

Number of Stage 2* complaints received for Q1 (7 complaints) = 0.4

* Stage 2 complaints received in month could relate to previous months' complaints.

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

Profiled target YTD	1.97 days	
Q1 performance YTD	2.80 days	WORSE THAN TARGET – RED

June saw 1.10 days absence per FTE against a target of 0.6 days (above target) and a significant increase on the previous two months which sat at 0.84 and 0.85 days. This brings the YTD figure to 2.80 days per FTE against a target of 1.97 days per FTE. The projected outturn has therefore risen to 11.9 days per FTE against a target of 8.5 days.

This month all three directorates report absence above target although there is no significant change in Housing and Customer Services who remain at 0.94 days per FTE

Property Services has seen an increase to 1.08 days per FTE from their improving picture the previous month of 0.75 days. Corporate Services is driving high levels of absence at 2.11 days per FTE accounting for a small number of long term cases within the directorate which due to the relatively small headcount drives a higher impact – one of these long term cases has now begun a phased return to work.

In June, stress, depression and anxiety remain the highest reason for absence accounting for 37% of all absence with no significant change this month on the number of days. This is followed by Musculo-Skeletal (MSK) contributing to 17% and then infection and virus contributing to 15%.

Short Term sickness continues to drive up the number of cases contributing to 0.66 days per FTE this month vs long term absence which accounts for 0.44 days per FTE.

All cases continue to be managed in line with the attendance management procedure. Changes to the attendance management policy have been live from 1st April 2023 introducing additional short term triggers for management of short term absence. We are now seeing the impact of this on the management of sickness with more short term stage 1 and 2 triggers being met providing in the first instance the opportunity to have robust management conversation at early stages. This impact is likely to continue.

Alternative sickness calculation consistent with CDC

CDC have a different calculation for their sickness levels, calculated as :

$$\text{Average Sick Days Lost per FTE} = \frac{\text{FTE Sick Days Lost for the previous 12 months}}{\text{FTEs for the month we are reporting}}$$

So for June reporting, this is FTE days lost for the period 1 July 22 to 30 June 23 and it is divided by the FTEs at 30 June 2023.

For SLHD, the figure as at June 23 would be calculated at 11.73 days and is worse than our full year target of 8.50 days per FTE.

3.7. KPI 12 : % of Local Revenue and Capital Expenditure

Target	70%	
Q1 23/24 performance	49%	WORSE THAN TARGET – RED

Doncaster spend, both capital & revenue in nature, for the three months to date totalled £2.50m out of total spend to all suppliers of £5.11m. This represents KPI performance up slightly again in the month but still below target at 49%. Within Yorkshire and Humber the percentage is also up slightly to 76%.

June analysis shows local/not local splits were similar to April and May but improving slightly in terms of more being local. For June, £0.77m (45%) of £1.73m was outside the borough of Doncaster.

Nearly two thirds (£0.45m) of the £0.77m related to just four suppliers

- Wates – one of our main contractors - £222k. This represents 13% of the total spend for June.

The other three are within Yorkshire:

- Bradford Council for doors - £84k
- SIGD for roofing materials, timber etc. are Sheffield based - £100k
- Lynskey for skips are in Rotherham based - £45k

The KPI will improve when some corporate costs reduce and also when Wates establish a Doncaster base. Local suppliers and contractors will always be targeted wherever possible as part of procurement exercises.

3.8. KPI 13 : Number of ASB cases per 1,000 properties

Profiled Target YTD	15	
Q1 performance YTD	22	WORSE THAN TARGET – RED

This is a new KPI and measures the number of ASB cases per 1,000 properties under management.

This is a new KPI for 23/24 and is also part of the new Tenant Satisfaction Measures required by the Regulator, and is also a HouseMark monthly pulse KPI.

Cumulative performance is tracking at 22 cases per 1000 dwellings, which is just under last year's figure of 22.3 for the same three month period to the end of June. Monthly volumes are summarised below;

	23/24	22/23
April	104	136
May	150	163
June	183	146
Q1 total	437	445

3.9. KPI 14 : Number of residents undertaking training, education or employment

Profiled Target YTD	12	
Q1 performance YTD	9	WORSE THAN TARGET – RED

In Q1 eight Doncaster residents were supported into Employment. Four of the eight started with the WOW Cleaning team, two more new employment starts were participants who had undertaken and completed the March cleaning course and had subsequently found work outside of SLHD following the end of that course.

Of the other two participants assisted into employment, one had attended a previous WOW cleaning course and had been able to secure a part time cleaning role at the Frenchgate Centre in Doncaster, whilst the other, a former attendant of a WOW multi skills course had secured work elsewhere as a trainee roof joiner. The person assisted into training had recently finished the Cleaning course through WOW and had decided to then take several College on-line training courses in order to improve her chances of securing employment.

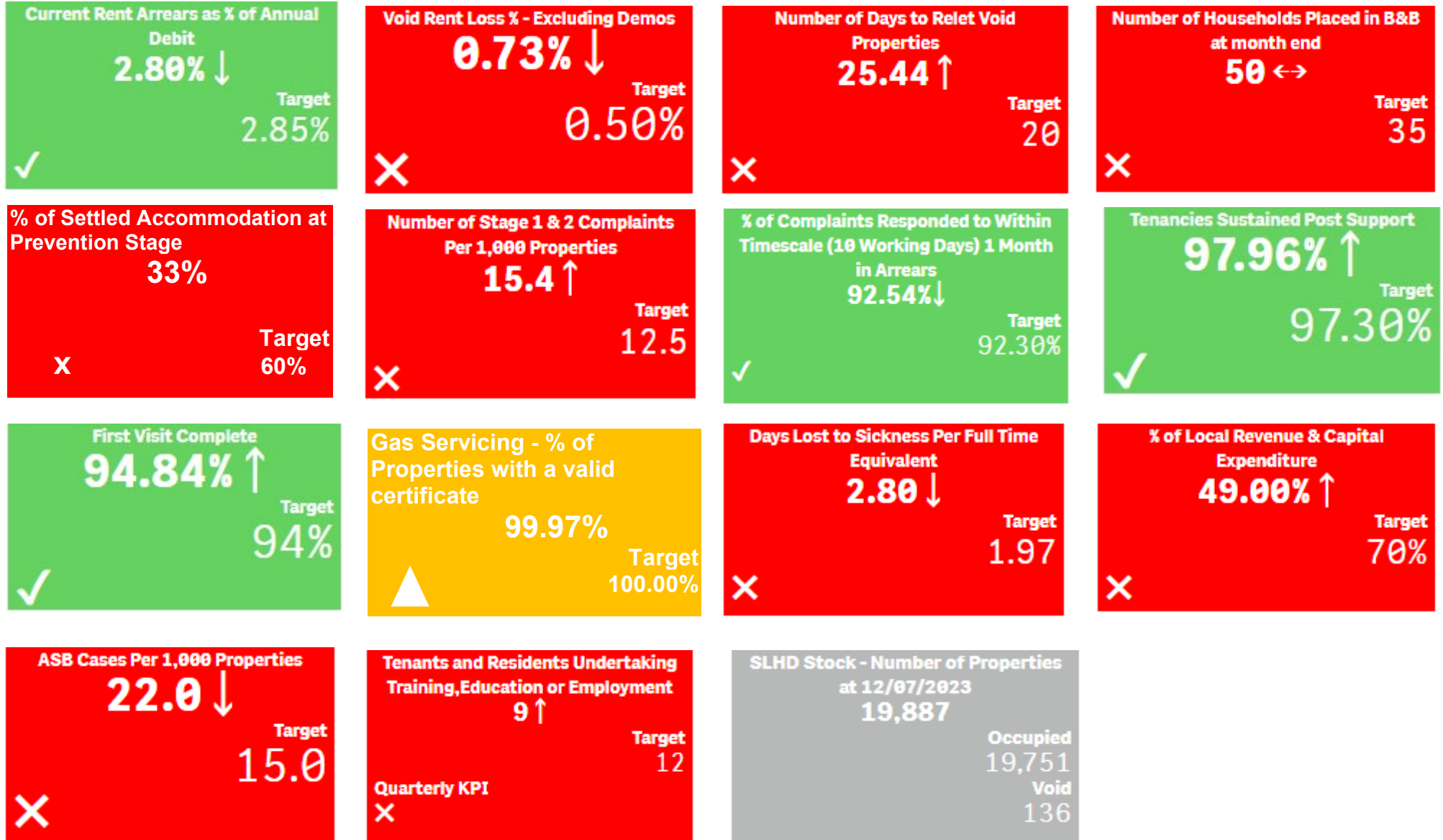
No World of Work “Support and Learn” Courses run at Doncaster College, and this subsequently impacted on the Q1 figures. In previous years, at least 1 course had been run in this quarter and as such, the profiled target for Q1 was set higher. The profiling of the year 2023 / 24 has now been reviewed to better align with the anticipated courses. The focus of Q1 every year is Apprentice and Student Placement recruitment, which has been successful for September start dates with the participant figures reportable in Q2.

Further activity in Q2 will include a number of work experience participants who have joined us throughout July and a further two WOW cleaners who were delayed starting in Q1.

St Leger Homes of Doncaster Performance Dashboard June 2023

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

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



Benchmarking - Housemark monthly pulse survey results – May 23 and April 23

MAY 23 Housemark pulse survey benchmarking

		Peers			SLHD	quartile	Polarity
Measure		Q1	Median	Q3			
May-23	Average re-let time in days (standard re-lets)	27.2	62.9	73.3	25.9	Q1	Lower is Better
May-23	Current tenant arrears at the end of the month (%)	2.89%	3.75%	4.90%	2.81%	Q1	Lower is Better
May-23	& of stage 1 and 2 complaints resolved within timescale in month	89.5%	70.5%	72.5%	91.8%	Q1	Higher is Better
May-23	No. of dwellings vacant but available to let at m/end as % of units	0.66%	1.07%	1.80%	0.64%	Q1	Lower is Better
May-23	Responsive repairs in month per 1,000 units	202.9	234.6	294.3	205.0	Q2	Lower is Better
May-23	% of working days lost to sickness absence in month	3.77%	4.30%	5.15%	5.09%	Q3	Lower is Better
May-23	% voluntary staff turnover	0.33%	0.55%	0.67%	0.64%	Q3	Lower is Better
May-23	% of homes with a valid gas safety certificate	100.00%	99.98%	99.77%	99.89%	Q3	Higher is Better
May-23	Formal stage 1 and 2 complaints received per 1,000 units	2.71	4.63	5.39	4.90	Q3	Lower is Better
May-23	New ASB cases reported per 1000 units	3.31	5.50	7.33	7.60	Q4	Lower is Better
May-23	% of Responsive repairs within target timescale	97.64%	86.55%	75.79%	67.68%	Q4	Higher is Better

APRIL 23 Housemark pulse survey benchmarking

		Peers			SLHD	quartile	Polarity
Measure		Q1	Median	Q3			
Apr-23	Average re-let time in days (standard re-lets)	31.1	45.9	68.4	24.8	Q1	Lower is Better
Apr-23	Current tenant arrears at the end of the month (%)	2.23%	2.83%	3.49%	2.61%	Q2	Lower is Better
Apr-23	& of stage 1 and 2 complaints resolved within timescale	95.8%	84.3%	62.9%	91.9%	Q2	Higher is Better
Apr-23	Responsive repairs in month per 1,000 units	198.9	236.0	284.8	207.0	Q2	Lower is Better
Apr-23	No. of dwellings vacant but available to let at m/end as % of units	0.31%	0.60%	0.95%	0.71%	Q3	Lower is Better
Apr-23	% voluntary staff turnover	0.0%	0.6%	1.4%	1.1%	Q3	Lower is Better
Apr-23	% of homes with a valid gas safety certificate	100.00%	99.96%	99.82%	99.90%	Q3	Higher is Better
Apr-23	Formal stage 1 and 2 complaints received per 1,000 units	1.84	3.10	5.39	5.40	Q4	Lower is Better
Apr-23	New ASB cases reported per 1000 units	1.31	2.42	4.71	5.20	Q4	Lower is Better
Apr-23	% of working days lost to sickness absence in month	2.70%	3.60%	4.70%	5.62%	Q4	Lower is Better
Apr-23	% of Responsive repairs within target timescale	93.70%	83.90%	72.40%	65.70%	Q4	Higher is Better

ST LEGER HOMES OF DONCASTER

Board Meeting Briefing Note

Title:	Housing Diversity Network (HDN) Peer Assessment
Action Required:	Board are asked to note content
Item:	14
Prepared by:	Sarah Moore, Head of HR and OD
Date:	03 August 2023

1. Summary

- 1.1 As an action in the Equality Diversity and Inclusion (EDI) Strategy 2022 – 26 a peer assessment was initiated, undertaken by HDN. For St Leger the aim of the assessment was to review existing practises and make recommendations for future improvements in practises and ways of working through the EDI lens. In addition to assessment there was potential for St Leger to achieve accreditation.
- 1.2 The assessment took place between February and April 2023 and involved an in depth document review, in person meetings with Colleagues and Customers in a focus group setting and online meetings with EMT and the Chair of the Board.
- 1.3 In May 2023 St Leger received the outcome of peer assessment in the form of a detailed report which can be found in Appendix 1. This outcome included:
 - Confirmation that St Leger has met the standard for HDN Accreditation
 - 8 areas of distinction
 - 20 recommendations for areas for improvements
- 1.4 This paper provides board with sight of the areas of distinction and a proposed action plan setting out which of the 20 recommendations will be taken forward and how (Appendix 2). All proposed recommendations are intended to complete within this financial year and no later than March 2024. An update against the actions will be provided to board alongside the annual EDI strategy update in late 2023.

2. Areas of Distinction

- 2.1 HDN identified 8 areas of distinction, these were:

Your Leadership and Strategic Focus on ED&I

1. Rather than simply presenting uncontextualised statistics, the EDI Dashboard includes reasoned analysis and explanation of the reported data and the organisation's actions.

2. The Board Member EDI Handbook provides a comprehensive breakdown of EDI's relevance and importance to the role of a Board member.
3. Written guidance on Equality Analysis is thorough and comprehensive, inviting conductors of EIAs to consider a multitude of factors impacting on equality outcomes.
4. Employing a dedicated EDI lead at Manager level and embedding EDI into other organisational strategies.
5. Publishing EDI targets and performance against these to tenants is good practice - this transparency is important in terms of promoting trust and accountability.

Workforce

6. The EDI Calendar with real-life stories published around the events, celebrating the diversity of people in SLHD.

Customer Impact

7. SLHD fire safety improvements have considered access for customers whose first language may not be English. They include the provision of a QR code notice on each floor in high rise blocks. Customers can point their phone at the QR code and receive evacuation and other fire safety information in a range of languages.

Community Impact

8. Partnership working across agencies in Doncaster is excellent, and engagement is from Board (Chair) as well as Executive, demonstrating serious commitment to tackling issues of inequality and promoting social cohesion

3. Recommendations

- 3.1 Appendix 2 sets out each of the 20 HDN recommendations. Having considered these recommendations 15 of the recommendations will be taken forward and action to do this are set out in the plan. 3 of the recommendations will not be actioned and these are set out below for ease as well as in the body of the action plan. 2 of the recommendations require further discussion at EMT and board.

3.2 Rejected Recommendations

4. Create a dedicated EDI Policy (which deals more readily with the 'diversity and inclusion' as well as equality) to ensure a more robust procedural approach to matters relating to EDI. Perhaps consider implementing or drawing from HDN's own EDI Policy Template.
SLHD Response - Fairness statement, Dignity at work, Equality Strategy and Housing management policy already exist and have dedicated sections covering EDI procedures in them such as Vulnerable persons, protected characteristics and support mechanisms contained within them.

7. We recommend proactively responding to wider significant national (or international) issues of inequality which will affect minority groups within their communities and employees.

SLHD Response - None - We already respond to national and international issues to both support and educate our communities. We are open to and actively encourage community members and colleagues to tell us what issues are important to them in order for us to better support colleagues and service users.

14. We recommend reviewing the process for the provision of disabled adaptations to existing homes – seeking to improve the timescales and relationships between the council, SLHD, and the Quality of sub-contractors who undertake the works.

SLHD Response - The Adaptations process is owned entirely by DMBC and is not within the gift of SLHD to change this. We will continue to advise customers of the correct process to raise any concerns that they do have with that process directly.

3.3 Recommendations requiring further EMT / Board discussion

1. We recommend you review the value described as ‘local’ in the next iteration of the Corporate Strategy, to find a better description for the sentiments and values intended.

SLHD Response - Subject to consultation and agreement with Board the SLHD values are proposed to change and ‘Local’ is no longer a proposed value

2. We recommend sponsoring a couple of potential future Board members through HDN’s Board Trainee Programme to increase diversity on the Board, and also exploring HDN’s Board Excellence programme for new Board members.

SLHD Response – EMT have considered this further and it is proposed that it is explored with HDN the possibility of working directly with our tenants to ensure that we have future successors for tenant board vacancies in place. An update will be provided to EMT for further consideration in the coming weeks.

Appendix 1 – St Leger DNA Report 2023

Appendix 2 – HDN Action 2023



St Leger Homes of Doncaster
Diversity Network Accreditation – Assessment and Findings
May 2023





Table of Contents

- Acknowledgements..... 3**
- About DNA..... 3**
 - Overview..... 3**
- Assessment process 3**
- Summary – Award Decision and Distinctions..... 5**
 - Areas for action / improvement..... 5**
 - Distinctions..... 8**
- Context – About St Leger Homes 10**
- Findings..... 11**
 - Your Leadership and Strategic Focus on ED&I 11**
 - Workforce..... 22**
 - Customer Impact..... 30**
 - Community Impact..... 36**
- Appendix 1: Documents Reviewed..... 42**
- Appendix 2: Interviews and Focus Groups 44**

Acknowledgements

HDN would like to thank St Leger Homes of Doncaster (SLHD) for participating in this DNA Assessment.

Particular thanks go to those staff, customers and Board members who gave their time to express their views in a focus group or interview, and to Daniel Debenham and colleagues, for acting as key contacts and coordinating the provision of information to our team.

About DNA

Overview

In 2012, on the 10th Anniversary of the Housing Diversity Network, we decided to develop an accreditation model to recognise the good work of housing organisations on diversity issues. This accreditation was updated and revised in 2021.

The DNA assessment process focusses on the outcomes achieved by an organisation under four key strands:

- Your Leadership and Strategic Focus on ED&I
- The Workforce Impact
- The Customer Impact
- The Community Impact

The accreditation model is assessed by HDN Associates and moderated by a subgroup of HDN, consisting of practitioners in housing and employment and members of the HDN Board and staff.

The assessment comprises a desktop review and interviews with the organisation's leaders and staff and customers. The review encompasses the requirements of the Equality Act 2010, Human Rights Guidance and also considers the opportunity to address new inequalities, new vulnerable groups and more holistic thinking to complement community needs and business strategies.

HDN will publish the report from the assessment directly to the organisation, along with any recommendations for action. HDN will also draw out any distinctions of good practice which will be displayed on our website, for all to learn from.

The DNA symbol will be awarded to everyone who meets the standard.

Those not meeting the award criteria will be provided with an action plan to identify how they could meet the required standard to achieve the accreditation. HDN will return in 6-12 months, to discuss action plan progress and review the outcomes from those actions, to see if the required standard has then been met.

Assessment process

Under each of the four key strands of the assessment, a set of themes are explored to assess the organisation's performance, understand where there may be scope for improvement and identify good practice.

St Leger Homes provided a range of equality, diversity, and inclusion (EDI) documents with a summary indication of how they



are used and the difference they make within the organisation for staff, customers, and the wider community. HDN also used publicly available information from the company website.

The documents reviewed as part of this DNA accreditation are referenced at Appendix 1.

To supplement the document review, the assessment lead from HDN met with a sample of staff, board members and customers, to collect further evidence, validate findings and understand how EDI works in practice within the organisation. A list of participants is provided at Appendix 2.

Summary – Award Decision and Distinctions

As a result of the assessment process carried out to date, the decision has been taken to grant St Leger Homes Diversity Network Accreditation.

Whilst St Leger Homes has some distance to go in order to be truly reflective of the wider Doncaster community that it serves, it has good EDI policies and practices in place to help it manage and monitor that journey, and the data suggests that this is resulting in improvements. In addition, tenants, Board, Executive, and employees have a good understanding of EDI and articulate positive intent by St Leger Homes in this area. For these reasons, the accreditation has been awarded, but with the caveat that there is still more work to do.

There are therefore **20** areas for improvement identified.

There are also **8** areas which we have highlighted as distinctions in St Leger Homes' approach to EDI and these are also summarised below.

Recommendations

Your Leadership and Strategic Focus on ED&I

1. We recommend you review the value described as 'local' in the next iteration of the Corporate Strategy, to find a better description for the sentiments and values intended.
2. We recommend sponsoring a couple of potential future Board members through HDN's Board Trainee Programme to increase diversity on the Board, and also exploring HDN's Board Excellence programme for new Board members.
3. We recommend the Board have an annual strategy session on EDI (in line with emerging good practice amongst other Boards) to ensure it remains a strong focus and keeps pace with rapid change in this area.
4. Create a dedicated EDI Policy (which deals more readily with the 'diversity and inclusion' as well as equality) to ensure a more robust procedural approach to matters relating to EDI. Perhaps consider implementing or drawing from HDN's own EDI Policy Template.

5. Provide staff with specific training on how to carry out Equality Impact Assessments alongside the current written guidance- this will help to ensure the process remains robust and consistent.
6. We recommend improving the format of EIAs by making explicit reference to each protected characteristic and requiring clarification of positive/negative impacts for each; this will help ensure no groups are unintentionally overlooked.
7. We recommend proactively responding to wider significant national (or international) issues of inequality which will affect minority groups within their communities and employees.
8. Pre-empt accessibility issues for online communications by making large print versions of documents readily available to download as standard.

Workforce

9. Establish specific, achievable and measurable targets to accompany the general objective of improving workforce diversity.
10. We recommend providing additional training modules to supplement core EDI training which cover specific aspects of equality, diversity and inclusion or protected characteristics in further detail (such as LGBTQ+ inclusion, race equality etc.).
11. Obtain feedback on training to ensure it is of high quality, relevant, and fit for purpose.
12. Introduce a formal method to improve key organisational communication, such as monthly team briefs, which would ensure that all staff receive the key information regardless of their line manager.

Customer Impact

13. We recommended that the website is reviewed from the perspective of good practice in communication, particularly for the visually impaired, and that existing accessibility features such as the read-aloud facility are better signposted for users.

14. We recommend reviewing the process for the provision of disabled adaptations to existing homes - seeking to improve the timescales and relationships between the council, SLHD, and the quality of sub-contractors who undertake the works.
15. We recommend investigating why there may be a current disparity between the level of ethnic diversity in the customer base compared to the wider population.
16. We recommend a review of the forms used to undertake the annual diversity survey of tenants, to ensure it reflects the latest EDI good practice, and using the census categories to gather information.
17. We recommend more EDI training for staff who undertake the diversity surveys and guidance on completing the form with customers.
18. We recommend the collection of diversity data during the complaints process, as this will allow analysis by protected characteristic and ensure that no particular group is having a disproportionately negative experience.

Community Impact

19. We recommend the EDI Annual report to more clearly report on SLHD's data from a comparison position of customers, workforce and wider population, to ensure the organisation is representative of the community it serves.
20. Continuation of the work around how best to support Gypsy, Roma and Traveller communities.

We have identified the following areas of distinction in St Leger Homes' current approach to EDI:

Distinctions

Your Leadership and Strategic Focus on ED&I

1. Rather than simply presenting uncontextualized statistics, the EDI Dashboard includes reasoned analysis and explanation of the reported data and the organisations actions.
2. The Board Member EDI Handbook provides a comprehensive breakdown of EDI's relevance and importance to the role of a Board member.
3. Written guidance on Equality Analysis is thorough and comprehensive, inviting conductors of EIAs to consider a multitude of factors impacting on equality outcomes.
4. Employing a dedicated EDI lead at Manager level and embedding EDI into other organisational strategies.
5. Publishing EDI targets and performance against these to tenants is good practice - this transparency is important in terms of promoting trust and accountability.

Workforce

6. The EDI Calendar with real-life stories published around the events, celebrating the diversity of people in SLHD.

Customer Impact

7. SLHD fire safety improvements have considered access for customers whose first language may not be English. They include the provision of a QR code notice on each floor in high rise blocks. Customers can point their phone at the QR code and receive evacuation and other fire safety information in a range of languages.

Community Impact

8. Partnership working across agencies in Doncaster is excellent, and engagement is from Board (Chair) as well as Executive, demonstrating serious commitment to tackling issues of inequality and promoting social cohesion.

Context – About St Leger Homes of Doncaster

St Leger Homes is Doncaster council's Arms Length Management Organisation (ALMO) established in 2005 to manage approximately 20,000 homes, shops, community facilities, garages, Gypsy and Traveller sites and other residential sites. In addition, it delivers the council's statutory homelessness function.

Within the current Corporate Strategy (2019-2024) St Leger Homes Aim is 'To provide homes in neighbourhoods that people are proud to live in.' There are four strategic objectives within the plan:

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

This is underpinned by a set of corporate values and behaviours:

- Fairness
- Empowerment
- Excellence
- Local

St Leger Homes employs 826 people and has diversity data on 475 employees. (See workforce section for comments on efforts to increase this).

St Leger Homes also gathers diversity data on its customers and of 19,819 tenants, it has 84.75% customer profiles which include diversity data.

This information, along with any changes, is monitored annually through the EDI Annual Report (latest EDI Report 2021/22).

Findings

Your Leadership and Strategic Focus on ED&I

The Leadership and Strategic Focus on ED&I strand of DNA explores a number of ways in which St Leger Homes addresses equality and diversity in leadership, governance, strategy and policy, and in response to wider social issues. This section sets out the results of the DNA assessment against the following themes:

- Your overarching purpose and strategy
- Your Board
- Specific ED&I Strategy and Policies
- Assessing impact
- Delivery of the ED&I Strategy
- Responding to specific issues locally
- Responding to specific issues nationally
- Communication and visibility

Your overarching purpose and strategy
<p>Overview</p> <p>St Leger Homes’ Corporate Plan 2019-2024, outlining the organisation’s purpose and strategic objectives, makes direct references to concepts relating to Equality, Diversity and Inclusion. This includes the values of “Fairness”, which speaks to treating people fairly and with respect, “Empowerment” which speaks to listening and encouraging others to share their views, as well as in the objectives of “Our tenants live successful and fulfilling lives” which references increasing engagement with diverse communities of Doncaster, and “We will be a nationally recognised provider of housing services” which references improving the extent to which the workforce reflects the local population. The included 5-year action plan also includes specific actions which show due attention is being given to matters of EDI to fulfil</p>

business objectives- namely developing work relating to Gypsy, Roma and Traveller communities and reviewing the Fairness and Equality Strategy.

The fourth value in the Corporate Plan is described as 'Local'. This stands out as different to the other three values as it doesn't describe a value or belief. As an ALMO SLHD will be local by dint of its make-up and structure (managing the council owned homes of Doncaster Council) so this doesn't describe an approach which is a choice. Looking at the bullet points used to describe this approach, they reflect a positive desire for SLHD to want to be inclusive – portraying a professional and positive image, collaborating well with others, inspiring others to share in their success, sharing knowledge, and putting customers first. It is therefore recommended that at the next review of the Corporate Strategy, this heading is reviewed, ideally with tenants and staff, to find a better description for the sentiments and values intended here.

Distinctions	Recommendations
	<ul style="list-style-type: none"> We recommend you review the value described as 'local' in the next iteration of the Corporate Strategy, to find a better description for the sentiments and values intended.

Your Board
<p>Overview</p>
<p>As Doncaster Council's Arm's Length Management Organisation (ALMO), St Leger Homes Doncaster (SLHD) therefore has a formal relationship with Doncaster Council, which owns the homes that it manages.</p> <p>This impacts on its Board structure and make-up:</p> <ul style="list-style-type: none"> The 3 council nominations are elected councillors who are generally older, white, and male. There are 3 independent members on the Board and there is a desire to target people from more diverse backgrounds for these moving forward.

- There are 3 tenant members.
- The Chair is a political appointment by the Mayor.
- The CEO also sits on the Board.

Only 2 of the current Board members are female.

The **House Proud** tenants' newsletter has been used to advertise tenant Board vacancies and particularly 'encourage applicants from people of all ages and backgrounds, and we're particularly keen to see more women join.'

Increasing the diversity of the Board is an area that the Chair is very keen to improve, particularly from a gender, ethnicity and disability perspective, and would welcome support with this.

SLHD's Board and Executive Team track the progress of EDI quarterly using an EDI Dashboard. This provides data (on both Employees and Tenants) covering percentage changes since the last quarter of people from minority ethnic backgrounds, with a disability, who identify as LGBTQ+, have communication needs (tenants only), have mental health issues (tenants only). This is followed up by a summary of analysis which explains the significance of the numerical data and what action the organisation is taking.

The Board are also presented with an **Equality, Diversity and Inclusion Annual Report** which breaks down the profile of the local population, the customer base, the tenant waiting list and the workforce, and provides a summary of EDI related achievements over the year along with future plans for improvement.

Specific EDI Training (last delivered July 2020) along with a guiding **Board Member EDI Handbook** is provided to the Board- this outlines the definition of each strand of EDI, provides an overview of the Equality Act 2010 and Public Sector Equality Duty, and clarifies the Boards' role in:

- EDI in Mission, Strategy and Culture
- Ensuring compliance with equality law
- Equality outcomes
- Mainstreaming equality

- Equality Impact Assessments,

It outlines the importance of legal assurance and how Board members can fulfil their assurance role by:

- Improving their knowledge and understanding of equality
- Working effectively with equality committee or equivalent groups
- Using assurance mechanisms,

It also offers guidance on how to increase the diversity of the Board.

The Board’s annual **Self-assessment against the NHF Code of Governance 2020** evidences that it is compliant with the sections of the code relating to EDI. The Chair was able to quote the relevant sections of the Code and evidence how SLHD is compliant.

It was clear from the meeting with the Chair that he has a good understanding of and commitment to EDI and knows where the areas of good practice and weaknesses are within the organisation. Shortly after this meeting he attended the HDN Board Diversity Conference, another sign of commitment in this area. Whilst the current Chair is clearly committed and driving much of the improvement in this area, it is important to ensure this is fully embedded so that when the current Chair moves on, the improvements are maintained. EDI should be part of the succession planning process to ensure it remains alive within the leadership of the organisation.

Distinctions	Recommendations
<ul style="list-style-type: none"> • Rather than simply presenting uncontextualized statistics, the EDI Dashboard includes reasoned analysis and explanation of the reported data and the organisations actions. • The Board Member EDI Handbook provides a comprehensive breakdown of EDI’s relevance and importance to the role of a Board member. 	<ul style="list-style-type: none"> • We recommend sponsoring a couple of potential future Board members through HDN’s Board Trainee Programme to increase diversity on the Board, and also exploring HDN’s Board Excellence programme for new Board members. • We recommend the Board have an annual strategy session on EDI (in line with emerging good practice amongst other Boards) to

ensure it remains a strong focus and keeps pace with rapid change in this area.

Specific Equality, Diversity and Inclusion Strategy and Policies

Overview

SLHD have a **Fairness and Equality Statement** which expresses their commitment to EDI as underpinned by the five objectives in their **Equality, Diversity and Inclusion Strategy (2022-2026)**. These are:

- To understand customers and support their needs;
- To ensure the organisation is a leader in inclusion and fairness;
- To engage customers effectively, foster good relations and advance equality in local communities;
- To fulfil safeguarding responsibilities to the highest standards;
- To develop a progressive and diverse workforce, in a workplace free from discrimination and harassment.

Each objective is accompanied in the strategy by a basic action plan which outlines each action to be undertaken along with its intended outcome. This includes activity around:

- reviewing customer data collection practices (including methods of collection, analysis, and communication around data),
- campaigns to raise awareness of EDI issues and cultural events, improving the diversity of workforce and leadership,
- improving communication and engagement (both formal and general) with tenants from diverse backgrounds,
- improving awareness and responses to hate incidents and tenant mental health,
- joining HDN and utilising membership benefits, reviewing EDI training, assuring the inclusivity of recruitment processes and internal development routes, establishing employee diversity networks, and benchmarking EDI performance against external organisations

Several measurements for success are also referenced in the strategy. For instance, progress against the actions outlined is reported to the Employment and People Committee every 6 months, reports on the metrics found on the EDI Dashboard are generated quarterly, and

other metrics such as survey feedback, percentages of complaints and workforce demographic changes are also evaluated. Heads of Service are responsible for updating actions on which they are taking a lead role, and while precise timescales and responsibilities are not presented in the strategy document, these are clarified in a separate yearly action plan.

The organisation’s **Dignity at Work Policy** functionally serves as an EDI policy (though it applies to both those with a protected characteristic and those without), outlining the concepts of bullying, harassment, victimisation, and discrimination as referenced in the Equality Act 2010, and detailing the informal and formal procedures of addressing unacceptable behaviour through the grievance process, whistleblowing etc.

Distinctions	Recommendations
	<ul style="list-style-type: none"> • Create a dedicated EDI Policy (which deals more readily with the ‘diversity and inclusion’ as well as equality) to ensure a more robust procedural approach to matters relating to EDI. Perhaps consider implementing or drawing from HDN’s own EDI Policy Template.

Assessing Impact
<p>Overview</p> <p>Alongside the metrics outlined in SLHD’s EDI Strategy, the potential impact of policies, strategies and services is assessed through Equality Impact Assessments. Submitted EIA forms require:</p> <ul style="list-style-type: none"> - a list of the evidence and data utilised in the assessment, - details and findings of any consultations with relevant staff/customers/stakeholders/partners etc., - any identified positive/negative impacts upon “individuals, communities or particular groups”. <p>An extensive guidance document is provided to staff to filling out Equality Impact Assessments which:</p>

- Explains the benefits of Equality Analysis, legislation under the Equality Act, and implications under the Human Rights Act
- Highlights when Equality Analysis must be carried out (i.e. in various decision making scenarios, during service or policy development/review, and when enforcement action is being taken against tenants), who must be involved (i.e. a minimum of 2 people, one being the project lead), and who makes the ultimate decision to proceed with Equality Analysis (i.e. the relevant Head of Service).
- Provides step-by-step instructions on each section of the EIA including how each exploratory question should be addressed, where potential evidence may be sourced from and how it should be analysed, the summarisation of impacts, developing (alternative) actions, and how best to monitor the progress and impact of resultant actions.
- Includes an appendix which offers further advice, clarifications and information on specific protected characteristics or groups (including Race, Gender, Transgender people, LGB people, older and younger people, Religion or Belief, Carers, other socio-economic groups, and the social model of Disability).

Distinctions

- Written guidance on Equality Analysis is thorough and comprehensive, inviting conductors of EIAs to consider a multitude of factors impacting on equality outcomes.

Recommendations

- Provide staff with specific training on how to carry out Equality Impact Assessments alongside the current written guidance- this will help to ensure the process remains robust and consistent.
- We recommend improving the format of EIAs by making explicit reference to each protected characteristic and requiring clarification of positive/negative impacts for each; this will help ensure no groups are unintentionally overlooked.

Delivery of the Equality, Diversity and Inclusion Strategy	
Overview	
<p>SLHD has invested in developing EDI through the employment of an EDI Manager to coordinate its approach both internally (for staff) and externally (for customers, partner organisations, and the wider community).</p> <p>The EDI Strategy and action plan are in place and embedded in other service plans, therefore engraining EDI in how services are delivered. It is particularly linked to the Communication Strategy which helps to embed EDI into the culture of the organisation.</p>	
Distinctions	Recommendations
<ul style="list-style-type: none"> Employing a dedicated EDI lead at Manager level and embedding EDI into other organisational strategies. 	

Responding to specific issues locally
Overview
<p>SLHD have indicated that they make use of customer data and community profiles to better understand the issues which may potentially affect the local population, and that this feeds directly into policy and strategy and decisions (See also <i>Access to Services</i>).</p>

Distinctions	Recommendations

Responding to specific issues nationally
<p>Overview</p> <p>SLHD have responded well to some national issues. For example, providing guidance to both colleagues and tenants on the COVID-19 pandemic and cost of living crisis. In addressing the latter, key elements have included providing extensive and accessible financial advice, and signposting further support from external organisations such as Citizens Advice. Alongside this, the organisation also supports local food banks.</p> <p>Other key issues acknowledged by St Leger include campaigns against domestic abuse and wider violence against women and girls, which was a key feature in the April 2022 Issue of the Staff Focus newsletter.</p> <p>'Myth Busting' documents around Refugees/Asylum Seekers, and Gypsy, Roma and Traveller communities which dispel falsehoods and raise awareness of the issues faced by these groups have also been produced by SLHD to counteract potential prejudice directed toward these communities.</p> <p>No evidence has been provided to indicate particular engagement with racial issues such as the murder of George Floyd and subsequent Black Lives Matter movement. Such incidents of racial trauma and violence reported in the media can impact the lives of employees and tenants, therefore the organisation needs to respond accordingly.</p>

Distinctions	Recommendations
	<ul style="list-style-type: none"> We recommend proactively responding to wider significant national (or international) issues of inequality which will affect minority groups within their communities and employees.

Communication and Visibility
<p>Overview</p> <p>Communications on issues of EDI and SLHD’s visible commitment around the matter is delivered both internally and externally via:</p> <ul style="list-style-type: none"> - their website, - in Staff Focus newsletters and the House Proud tenant magazine, - on their social media, - to staff via the intranet and email communications. <p>This includes for instance campaigns around national EDI awareness events, such as Black History Month and Pride, and cultural celebrations such as Ramadan and Passover. However, it remains important to link these campaigns to real issues and challenges facing minority staff and tenants, and responding to these in a timely manner as in the recommendation above.</p> <p>The EDI Strategy and Fairness and Equality Statement are also publicly available on the website, with the Annual Fairness Report on the organisation's performance available for download by tenants.</p> <p>In terms of the accessibility of communications in general, the website also utilises ReachDeck accessibility features- including font size adjustment, page simplification, a picture dictionary and translation and read aloud tools. SLHD have also indicated that teams have been reminded that it is important to adhere to customers communication requirements and preferences (i.e. providing alternative formats or coloured paper versions for dyslexic customers). Further work could however be done in terms of accessibility for the visually impaired (see <i>Access to Services</i>).</p>

Distinctions	Recommendations
<ul style="list-style-type: none"> Publishing EDI targets and performance against these to tenants is good practice - this transparency is important in terms of promoting trust and accountability. 	<ul style="list-style-type: none"> Pre-empt accessibility issues for online communications by making large print versions of documents readily available to download as standard.

Workforce

The Workforce strand of the DNA explores ways in which St Leger Homes Doncaster (SLHD) collects and utilises staff diversity information, recruitment and retention, training and development, and staff wellbeing. This section sets out the results of the DNA assessment against the following themes:

- The diversity of your workforce
- Recruitment, retention and performance management
- Pay Gap
- Positive Action
- Training
- Inclusive Culture
- Wellbeing

The diversity of your workforce
<p>Overview</p> <p>Workforce data is collected for all protected characteristics except marriage and civil partnership/pregnancy and maternity, and this is reported in the EDI Annual Report and quarterly EDI Dashboards.</p> <p>Both the Chief Executive and Board Chair identified the need to develop the workforce to become more reflective of the wider Doncaster community. There are still some legacy issues for SLHD as a result of its relationship with Doncaster Council:</p> <ul style="list-style-type: none"> • The workforce transferred from the Council; as the Council is a major employer in Doncaster, there is relatively low turnover. E.g. a large number of staff have 30 to 40 years' service. • 55% of the workforce are over 50 years of age. <p>The 2022 EDI Annual Report indicates that according to 2011 Census data and the latest Team Doncaster 'State of the Borough' assessment carried out by Doncaster Council, around 4.8% of the Doncaster community are from Black, Asian or minority ethnic (BAME) backgrounds, and around 20% have a disability. Comparing this to the more recent data provided from the Q3 2022/23 EDI</p>

Dashboard, only 2.78% of SLHD’s workforce is from a minority ethnic group, and only 2.5% have a disability- compared with 9.01% and 25.95% of tenants respectively. The 2022 Gender Pay Gap report also indicates men are overrepresented and women underrepresented, making up 58% and 42% of the workforce respectively.

The EDI Annual Report makes good use of graphics to provide a visual interpretation of the data summarised here.

The staff focus group articulated the importance of EDI and having a diverse workforce reflective of the wider community – stating that it will help SLHD to grow and remain modern and relevant. SLHD recognise this as an issue which requires attention, having put in extensive effort to regularly record and evaluate workforce (and customer) diversity, and are clearly committed to making improvements (see *Recruitment, retention and performance management*).

Distinctions	Recommendations

Recruitment, retention, and performance management
<p>Overview</p>
<p>The Recruitment and Selection Policy in its current form reiterates SLHD’s objective of recruiting a diverse and reflective workforce, achieved by potential positive action such as targeted recruitment (i.e. advertising in specific media, engaging with community groups), work experience placements for under-represented groups, and Job Preparation Training. SLHD are also working with the Minorities Partnership Board (MPB) to increase the number of ethnic minority employees and to link this to upskilling local communities.</p> <p>Recruitment is currently being reviewed to address the fact that the current staff make-up is not reflective of the wider Doncaster community, particularly in relation to those from ethnic minority backgrounds. The review is exploring why people from these backgrounds</p>

are not applying for jobs at SLHD. Adverts are being placed in more diverse locations e.g. the Turkish shop in town, mosques etc. and attention is being given to ensuring that interview panels themselves are diverse.

While SLHD has developed inclusive strategies and policies to support greater diversity, this has not yet resulted in a more diverse workforce reflective of the wider Doncaster community. Agile working and family friendly policies are in place and designed to help recruit and retain younger people. There is careers work taking place in local schools and colleges to encourage people to consider a career with SLHD.

The Executive team 'walk the walk' through shadowing of front-line staff to understand the issues they are dealing with.

SLHD are also making use of HDN's Staff Mentoring Programme (SMP) with the aim of positively impacting upon colleague career development (particularly those from an ethnic minority background). One mentor and two mentees are taking part in the current cohort.

Distinctions	Recommendations

Pay Gap
Overview
<p>SLHD publicly report their Gender Pay Gap annually. The most recent report (2022) indicated that the Mean Pay Gap Difference was 6.14%, and the Median 4.36% in favour of men. Though the Mean gap has increased from 2021, both have dropped significantly since 2020. The existing gaps are owed to a slight overrepresentation of women in the lower and lower middle pay quartiles, and significant underrepresentation in middle upper and upper pay quartiles. Actions listed to help address the Gender Pay Gap include the provision of flexible/agile working opportunities, enhanced family friendly leave, work with Women in Construction (WiC – see more in next section),</p>

attracting more women to senior positions (including enabling development through HDN’s SMP), and work toward improving professional development opportunities for women.

SLHD indicated that owing to the currently low sample sizes in the workforce, Ethnicity and Disability Pay Gap reporting were not currently feasible endeavours.

Distinctions	Recommendations

Positive Action

Overview

SLHD are members of Women into Construction and have been particularly successful in recruiting more women into construction jobs, having run a targeted campaigns and holding events such as a recent women-only Apprenticeship Webinars in February 2023.

Efforts have also been made to make improvements around the significant underrepresentation of disabled employees, with the organisation having attained Level 2 Disability Confident Employer status.

No formal targets however have been set in terms of improvements to diversity.

Distinctions	Recommendations
	<ul style="list-style-type: none"> Establish specific, achievable and measurable targets to accompany the general objective of improving workforce diversity.

Training	
Overview	
<p>Training around EDI is delivered to employees both online and in person, with specific training available for managers, and is refreshed every two years. Examples of the online training provided include scenario-based elements on how colleagues and/or managers should approach various issues, including: workplace behaviour, recruitment, reasonable adjustment, direct discrimination, flexible working, and pregnancy and maternity.</p>	
Distinctions	Recommendations
	<ul style="list-style-type: none"> We recommend providing additional training modules to supplement core EDI training which cover specific aspects of equality, diversity and inclusion or protected characteristics in further detail (such as LGBTQ+ inclusion, race equality etc.). Obtain feedback on training to ensure it is of high quality, relevant, and fit for purpose.

Inclusive Culture

Overview

EDI within the organisation was restructured recently to come under the Head of HR and this has played a helpful role in further embedding it in organisational culture.

SLHD organises staff groups on race, religion, LGBTQ, and disability to enable staff to discuss issues around these topics and ensure that any needs are being met from an employer perspective. Feedback from these groups is fed into the EDI Report to Executive and Board.

An EDI Calendar is in place to reflect what different people in the organisation (staff and customers) have said is important to them. The organisation is good at telling stories around these events, which broadens understanding and tolerance and celebrates the diversity of people involved with SLHD. A recent example is the messages sent out about Ramadan, followed up by an article on how a colleague celebrated Ramadan.

A pronouns campaign is currently running with messages on email, Facebook, LinkedIn, staff newsletter etc explaining why it is useful to set out your pronouns.

Both the Chair and Executive team talked about their role in gaining assurance that staff *really do* treat people with dignity and respect. Examples of this include Board and Executive attendance at the Staff Conference and other staff celebration events, hosting open Q&A sessions, being a visible presence in the offices, and ensuring they are approachable. Staff survey feedback is also reported to Board.

Communication was raised as an issue – it was generally felt to be good but there was a sense that it depends on which team you are in and who your line manager is. There are some amazing stories to tell within the organisation but these aren't consistently shared – the intent is there but the execution is not consistent. An example was the new specialist team dealing with damp and mould issues. This was seen as a positive approach but not well communicated or understood, there is confusion about their role and who to follow up these issues with.

Distinctions	Recommendations
<ul style="list-style-type: none"> The EDI Calendar with real-life stories published around the events, celebrating the diversity of people in SLHD. 	<ul style="list-style-type: none"> Introduce a formal method to improve key organisational communication, such as monthly team briefs, which would ensure that all staff receive the key information regardless of their line manager.

Wellbeing
Overview
<p>The staff focus group referred to the efforts that SLHD goes to in order to support the wellbeing of its employees. They reported 'loving' working at SLHD and were able to provide examples of the events and activities to support staff with issues like stress and menopause, the Medicash scheme for optical, dental and counselling support etc.</p> <p>The SLHD staff intranet has a dedicated wellbeing section with pages providing resources and signposting further help around Mental, Physical and Financial Wellbeing, Covid-19 support, staying active, and Occupational Health. There is also a system of mental health first aid (named Wellbeing First Contact Officers) available for colleagues to contact for support and guidance.</p> <p>There was a sense that the Terms and Conditions of employment at SLHD are good, although there is a current dispute over pay in relation to the current cost of living rise. Staff continue to have the freedom to work flexibly from home following the COVID-19 pandemic, but they also felt this was impacting on communication in some teams. A welcome day for new starters has been introduced, involving existing staff too, so that new starters are welcomed and feel part of the team when they first start work.</p>



Distinctions	Recommendations

Customer Impact

The Customer Impact strand of DNA explores ways in which St Leger Homes collects customer insight information, achieves outcomes for service users, involves customers and plans for future challenges for vulnerable groups. This section sets out the results of the DNA assessment against the following themes:

- Access to services
- Take-up of services
- Meaningful engagement with diverse customers
- Complaints

Access to services
<p>Overview</p> <p>The Tenants Voice Strategy sets out how tenants can become involved in the work of SLHD, and recognises the various forms of tenant involvement and how they are supported, including financially. The various involvement forums are listed under 'meaningful engagement'.</p> <p>Housing services are influenced and shaped by tenant involvement in its various forms (formal groups, tenant surveys, task and finish groups etc.).</p> <p>SLHD monitors the demographics and other data of their tenants (and potential tenants in the wider Doncaster area) to ensure services which are delivered meet diverse customer needs.</p> <p>Equality Impact Assessments are used to ensure access to services is equitable and not exclusionary.</p>

Distinctions	Recommendations
<ul style="list-style-type: none"> SLHD fire safety improvements have considered access for customers whose first language may not be English. They include the provision of a QR code notice on each floor in high rise blocks. Customers can point their phone at the QR code and receive evacuation and other fire safety information in a range of languages. 	<ul style="list-style-type: none"> We recommended that the website is reviewed from the perspective of good practice in communication, particularly for the visually impaired, and that existing accessibility features such as the read-aloud facility are better signposted for users.

Take-up of services
<p>Overview</p> <p>SLHD collects diversity data from all its customers on sign-up, and this is monitored and reported on quarterly through the EDI Dashboard. SLHD also undertakes a regular refresh of the diversity survey which enables them to maintain an up-to-date profile of their customers.</p> <p>During the tenant focus group there was a complaint that the forms used need to be updated e.g. to include an option for customers to identify as non-binary; and also that the staff conducting the surveys need more training as they have been known to make assumptions in the completion of the survey based on a customer’s appearance.</p> <p>Allocations data provided to HDN indicates that around 4.1% of allocations in 2022 were made to ethnic minority tenants, and for 2023 (up to March) this was 5.2%- reflective of the fact that these communities are currently underserved when contextualised by the ethnic makeup of Doncaster’s population (see also <i>Advancing Equality of Opportunity</i>).</p> <p>SLHD has a number of adapted homes but there is a feeling that they aren’t sufficient to meet the needs of all disabled customers. The process for applying for adaptations to an existing SLHD home is not a smooth one, with tenants reporting that they get stuck in funding arguments between the council and SLHD resulting in long delays. The quality of the sub-contractors who then deliver the adaptation works was reported as poor.</p>

However, tenants generally spoke about enjoying a good quality of life in a SLHD home, with good amenities close by, and a responsive repairs service, although the quality of the workmanship of sub-contractors was raised as an issue.

Distinctions	Recommendations
	<ul style="list-style-type: none"> • We recommend reviewing the process for the provision of disabled adaptations to existing homes - seeking to improve the timescales and relationships between the council, SLHD, and the quality of sub-contractors who undertake the works. • We recommend investigating why there may be a current disparity between the level of ethnic diversity in the customer base compared to the wider population.

Meaningful engagement with diverse customers

Overview

The Customer Involvement Team has recently been restructured to support even greater involvement from tenants and residents in shaping the services provided by SLHD. There are a number of ways in which tenants can become involved:

- Tenants Voice – an umbrella group for the various tenant involvement channels
- TRIP – tenants and residents involvement panel, can also attend Board meetings as observers
- Tenant scrutiny panel
- Complaints appeals panel
- Estate walkabouts (stopped some time ago) about to be reinstated
- One-off task and finish groups like the 'empty properties working group' looking at relet standards; and the 'housing application working group' looking at the housing waiting list.

SLHD are TPAS accredited and have a wide range of engagement mechanisms aimed at promoting the tenant voice.

The **Tenant Voice Strategy** provides the mechanisms for the customers views to be fed into the Board, and the Chair articulated the importance and expectations around this as a result of the White Paper.

A recent call for more involved tenants resulted in 35 prospective new tenant members so there is good take up of involvement opportunities. Likewise, over 700 responses were received to a recent review of the allocations policy. This level of take up suggests a high level of trust amongst tenants that their voice will be heard and acted upon.

This was evidenced by customers who reported that the opportunities for getting involved are really good, and they feel that their views are really valued, they are listened to, and their comments are acted upon. This has improved under the new executive team.

The strategy also makes note of the demographic makeup of SLHD's customer base and alongside the related Action Plan commits to

- Providing accessible opportunities for engagement, and removing potential barriers
- Better understanding the barriers faced by diverse customers by directly engaging with these groups

This is the responsibility of SLHD's dedicated Customer Involvement Team.

There is an intention to extend the internal (staff) groups on race, religion, LGBTQ, and disability to tenants in the future to ensure the customer voice is heard around these issues.

The customer newsletter 'House Proud' has a specific section on EDI which highlights relevant issues and tells real life stories of customers and/or staff.

Residents provided an example of feeling listened to and their views being acted on: where changes to the allocation of bungalows which were previously for over 50's, are now open to younger residents with mobility needs.

Annual homes visits were suspended during covid, but these are about to be reinstated to ensure that at least annual contact is made with 'harder to reach' and 'lesser heard' customers.

Distinctions	Recommendations
	<ul style="list-style-type: none"> • We recommend a review of the forms used to undertake the annual diversity survey of tenants, to ensure it reflects the latest EDI good practice, and using the census categories to gather information. • We recommend more EDI training for staff who undertake the diversity surveys and guidance on completing the form with customers.

Complaints
<p>Overview</p>
<p>The Compliments, Comments and Complaints Policy (2019) clarifies SLHD's commitment to ensuring the complaints process 'accessible, fair and inclusive'. Avenues for a customer making a complaint include by letter, telephone, email, web form, social media or face to face to any staff member, referred to as the 'Receiving Officer'- they can also be received via a Local Authority Councillor, Board Member, MP, Mayor's office or a 3rd party acting on behalf of a customer. Complaint data is also analysed to monitor for potential trends, though it does not appear diversity information is collected during the process so analysis by protected characteristic is not currently conducted.</p> <p>Customer complaints are dealt with internally in the first instance, and the Executive are not afraid to get involved in particularly difficult cases, and in talking directly to customers where required.</p>

Where a complaint is not resolved to the complainant's satisfaction the appeals process involves a customer appeal panel reviewing SLHD's approach, and either upholding the outcome, or recommending a different resolution.

In addition to the required annual STAR survey of all customers, regular 'pulse' surveys are undertaken to gather feedback from residents on the services provided and their experience. The results of these are scrutinised by the Performance and Improvement Committee and also fed into Board. Transactional surveys on specific areas of service (repairs, and improvements etc) are also undertaken and used to review services provided. Mystery shoppers also provide feedback.

Distinctions	Recommendations
	<ul style="list-style-type: none"> We recommend the collection of diversity data during the complaints process, as this will allow analysis by protected characteristic and ensure that no particular group is having a disproportionately negative experience.

Community Impact

The Community Impact strand of DNA explores ways in which St Leger Homes supports marginalised groups (or those at risk of becoming marginalised) and provides training and employment opportunities, directly or in partnership with other organisations. This strand also considers if the outcomes of the organisation’s work are intended to have an impact beyond its own customer base. This section sets out the results of the DNA assessment against the following themes:

- Advancing equality of opportunity
- Providing support
- Influence

Advancing equality of opportunity

Overview

The Chair articulated the importance of the role SLHD plays in advancing equality of opportunity in the wider Doncaster area. He evidenced the communications issued, the language and imagery used, and how this plays an important role in sending a message that diversity is welcomed and celebrated.

Anti-social behaviour (ASB) including race crime remains an issue in the wider Doncaster area. As a result, SLHD has restructured its approach to ASB and now has a dedicated team, working closely with other agencies to both bring perpetrators to account and to support victims. This work is linked into the Council’s localities framework so intelligence is shared across the wider community.

SLHD monitors the wider Doncaster population statistics, not just those of its own customer base, and sees the importance of modelling an inclusive organisation by ensuring a more representative Board and workforce. Work is also underway with the Minorities Partnership Board (MPB) to increase the number of ethnic minority employees, and to link this to upskilling local communities.

Social class is a particular issue in Doncaster and whilst it isn’t a protected characteristic, it can result in issues of inequality. SLHD has responded to this with a significant programme aimed at helping local people to upskill and gain employment. The ‘world of work’ programme aims to train tenants (and recently other residents) to gain employment, and offers paid placements in the organisation in a range of roles.

In addition SLHD has a large award winning apprenticeship programme with an intake of around 17 a year and a total of about 45 people currently employed. They also provide a range of graduate placements, although whilst targeted at Doncaster residents, this isn't always achieved.

As well as employment related initiatives, SLHD uses its procurement influence to keep the Doncaster pound local, with approximately 74% of all expenditure last year being in Doncaster. This helps to promote the local and circular economy – creating jobs for local people and local businesses.

In the last EDI Annual Report 2021/22 approximately 85% of its 19,819 customers profiles had been obtained showing the following customer and workforce analysis against the wider Doncaster population:

Customers (19,819 customers)	Workforce (846 employees)_	Doncaster (310,542 population)
<ul style="list-style-type: none"> • 196 identified LGBTQ+ • 12,531 females (63.22%) • 4,212 with a disability (21.2%) • 789 BAME (3.98%) • 15,003 follow a religion of belief • 10,667 requested contact via specific methods. 	<ul style="list-style-type: none"> • 10 identified as LGBTQ+ • 354 females (41.8%) • 17 (2.06%) with a disability • 18 (2.18%) BAME • 606 follow a religion of belief 	<ul style="list-style-type: none"> • 20% disabled • 8.2% BAME

There is clearly more work to be done to encourage more women, those from BAME backgrounds, and disabled people, to apply for jobs and homes with SLHD if the organisation is to become truly representative of the tenant base and wider Doncaster community. In addition, whilst the tenant base is reflective of the wider Doncaster community in terms of disability, it has only half the proportion of BAME customers in comparison to the wider Doncaster population. However, the data to March 2023 does indicate an improving position, with allocations to BAME applicants up to 5.2%. The work being done around EDI is therefore essential to address these imbalances, and latest evidence suggests this is having a positive impact.

Distinctions	Recommendations
	<ul style="list-style-type: none"> We recommend the EDI Annual report to more clearly report on SLHD's data from a comparison position of customers, workforce and wider population, to ensure the organisation is representative of the community it serves.

Providing support
<p>Overview</p> <p>As part of the range of initiatives tackling inequalities of social class, SLHD has a number of practical measures in place. They have a large sustainability team which supports people with poverty related issues, plus support for the credit union, charities and foodbanks etc. For example, last year they recognised that many of their older tenants are less likely to claim all of their eligible benefits, despite often being disproportionately affected by cost-of-living changes. A project to identify those tenants who may be eligible for Pension Credit was established and they were contacted to offer support to make a claim. This not only provides them with additional income but even the smallest Pension Credit award gives them access to fee optician and dental costs, GP prescriptions, TV licence and Council Tax Support as well as automatic entitlement to Government support payments. To date they have achieved financial gains for older tenants of over £168,000.</p> <p>SLHD's Financial inclusion Team offer advice on things like the cost-of-living crisis.</p> <p>SLHD supports various community cohesion through its general community support and development work, with circa 20 community centres and around 200 groups supported. A number of these have positive EDI focus – e.g. Bangladeshi women's sewing group; Wellness centre which supports people with learning disabilities and poor mental health; etc.</p> <p>SLHD's CEO has a career history in social care and as a result has championed a couple of specific projects:</p> <ul style="list-style-type: none"> to support women and children fleeing domestic abuse (SLHD have also gained accreditation from the Domestic Abuse Housing Alliance (DAHA)),

- and to house and support young care leavers. A shared tenancy officer supports young care leavers, (aged 16 - 18), some of whom are unaccompanied asylum seekers, to take on their own tenancy and receive more intensive support (through furniture packs, financial management of electricity, wifi, gas services etc) whilst they become established and develop the necessary life skills to maintain a full tenancy of their own.

Distinctions	Recommendations

Influence
<p>Overview</p> <p>SLHD is heavily involved in partnership work with the Police, NHS, Local Authority, faith leaders. This involves being represented at a senior level on the Boards of various Doncaster issue groups:</p> <ul style="list-style-type: none"> • Asylum seekers • Ethic Culture Fusion Network • Minority partnership (led by Public Health) • Fairness excellence framework • Multi-agency Chairs meeting on EDI issues (attended by SLHD’s Board Chair) <p>A gap in the provision of support and services to the Gypsy and Travelling community has recently been identified and contact made with York Travellers Trust to explore options for extension into Doncaster or support to establish something similar.</p> <p>As part of Doncaster’s wider Borough strategy and partnership, SLHD contributes to several strands that tackle inequalities:</p>

- The CEO chairs the Sustainable Homes Poverty Group, which has looked at a range of things including information, advice and guidance. Through this, they have worked in partnership with CAB, Live Inclusive, Public Health and AgeUK to set up the Doncaster Advice network (DAN) to ensure charities, partner organisations and local groups have access to timely, accurate and reliable advice and information on the issues that matter most to Doncaster residents. The first public meeting of DAN is being held on **17th May 23**.
- The Sustainable Homes Poverty Group has also looked at ways to address furniture poverty, and as a result introduced a furnished tenancy offer.
- The most recent issue relates to private renters and the impact of the freeze on the LHA leading to a lack of affordable housing for benefit dependant private renters. The CEO has written a report on this in conjunction with Northern Housing Consortium, Crisis, CAB, Doncaster Council and the local DWP which they will be using to influence politicians and others to raise the problem.

Social cohesion is also encouraged, supported and invested in through a number of initiatives: Last year SLHD introduced an 'environmental pride programme'. It has grown and now has active involvement from the council and a range of private sector companies, the college and chamber. Its support in cash and kind (organisational CSR type activity) to help small community groups or neighbours to tackle issues in the area with an environmental theme. It was set up to facilitate cohesion and pride in neighbourhoods. It is still growing but has supported in the region of 16 community led projects in the last year. Common support is for things like neighbourhood gardens, allotments, 'men in sheds', mental health activity groups that have an environmental component. Etc.

The Friday Men`s Club have also linked in with the Community Pay Back Team with support from SLHD to provide much needed assistance on their allotment project. This is being celebrated and showcased as part of the Community Pay Back 50th Year Anniversary.

In addition, SLHD works with 'Right Up Our Street' who have secured funding for 3 years to deliver community projects on Balby Bridge, the most deprived area in Doncaster. The funding will bring the community together by delivering a photography and arts project which will in turn improve the appearance of the area and help residents understand it`s history.

When community cohesion falls apart, this can lead to a rise in anti-social behaviour and crime. SLHD provided a couple of good examples of how they are tackling this in their area:

- A piece of work is currently underway in Edlington with partners around engaging with the community, helping them to share their information so we can further tackle the issues of ASB and crime in and around the estate. Part of this work is also looking at youth provision and preventative works to give young people alternatives to participating in ASB and crime, while the enforcement work looks to disrupt and dismantle the organised crime groups operating in the area.
- SLHD also provided evidence to SYP in their pursuit of securing Gang Injunctions against several main protagonists in an organised crime group (OCG) in the borough. These Injunctions were granted and significantly impacted and disrupted the activity of the OCG members they were served on.

Both these actions have increased community confidence in SLHD and partner agencies that they are working with to tackle the issues residents experience, and has increased community confidence in reporting.

Distinctions	Recommendations
<ul style="list-style-type: none"> • Partnership working across agencies in Doncaster is excellent, and engagement is from Board (Chair) as well as Executive, demonstrating serious commitment to tackling issues of inequality and promoting social cohesion. 	<ul style="list-style-type: none"> • Continuation of the work around how best to support Gypsy, Roma and Traveller communities.

Appendix 1: Documents Reviewed

SLHD Corporate Plan 2019-2024

EDI Strategy 2022-2026 and Action Plan

Annual EDI Report 2021-2022

Fairness and Equality Statement

EDI Board Training Handbook

Gender Pay Gap Report 2022

6 Monthly EDI Strategy Update- November 2022

Agile Working Guidance 2022

Agile Working Principles

Allocation Data- up to March 2023

Asylum Seekers Myths - Busted

Compliments Comments and Complaints Policy

Consultation Questions and Answers Updated 25.11.21

Cost of Living - St Leger Colleagues

Dignity at Work Policy 2021

Disability Involvement Group Minutes 91222

Disability Involvement Group- Responsibilities

EDI Dashboard_Q3 Jan 23

EDI Impact Assessment Form (Electronic)

EDI Training (Screenshots)

Equality Analysis Guide

Ethnic Minority Involvement Group- Responsibilities

Flexible Working Policy 2018

Gypsy & Traveller Myths - Busted

House Proud July 2022

House Proud Oct 2020

House Proud Oct 2022

Learning and Development Policy 2020

LGBTQ Involvement Group- Responsibilities

Medicash Information

Mental Health Navigator Presentation 2023

NHF Code of Governance Compliance check.xlsx

Pulse Survey Results October 2022

Pulse Survey Slides March 2022

Recruitment and Selection Policy

Religion Involvement Group Information

SLHD Communications Strategy

SLHD Social Statement 2020/2021



Staff Focus - June 2020

Staff Focus - April 2022

Staff Focus - July 2022

Staff Focus - May 2022

Staff Focus - April 2020

Staff Focus - May 2020

Tenant Voice Strategy

Wellbeing Intranet page

Women In Construction St Leger Homes Presentation

Women In Construction Action Planning

Women into Construction Action Plan



Appendix 2: Interviews and Focus Groups

Customer Focus Group - in-person meeting

Staff Focus Group – in-person meeting

Executive Team - online Teams meeting

Chair of the Board – online Teams meeting

HDN Peer Review Recommendations & Actions – June 2023

Recommendation	Agreed	Planned Action	Owner	Timeline
<p>1. We recommend you review the value described as 'local' in the next iteration of the Corporate Strategy, to find a better description for the sentiments and values intended.</p>	YES	<p>Subject to consultation and agreement with Board the SLHD values are proposed to change and 'Local' is no longer a proposed value</p>	Dave Richmond	<p>Complete – Subject to wider consultation on Corporate Plan</p>
<p>2. We recommend sponsoring a couple of potential future Board members through HDN's Board Trainee Programme to increase diversity on the Board, and also exploring HDN's Board Excellence programme for new Board members.</p>	TBC	<p>St Leger will explore with HDN the possibility of sponsorship of a future tenant board member.</p>	Dan Debenham	<p>November 2023</p>
<p>3. We recommend the Board have an annual strategy session on EDI (in line with emerging good practice amongst other Boards) to ensure it remains a strong focus and keeps pace with rapid change in this area.</p>	YES	<p>Board will continue to discuss the progress of the EDI strategy and now the HDN action plan on an annual basis.</p> <p>In December 2023 SM and DD have been invited to deliver a short session at board around EDI which will include recent updates, best practise as well as updates to date against the action plan –</p>	Dan Debenham / Sarah Moore	<p>December 2023</p>

		consideration I'll be given to any wider strategic focus of this session.		
4. Create a dedicated EDI Policy (which deals more readily with the 'diversity and inclusion' as well as equality) to ensure a more robust procedural approach to matters relating to EDI. Perhaps consider implementing or drawing from HDN's own EDI Policy Template.	NO	Fairness statement, Dignity at work, Equality Strategy and Housing management policy already exist and have dedicated sections covering EDI procedures in them such as Vulnerable persons, protected characteristics and support mechanisms contained within them.	N/A	N/A
5. Provide staff with specific training on how to carry out Equality Impact Assessments alongside the current written guidance- this will help to ensure the process remains robust and consistent.	YES	Develop a short face to face course with quick reference sheet for managers in-house to upskill EIA completion. Link into Business Governance to be further aware of what policy / strategy is being produced or updated in the rolling 12 months and proactively prompt for the EIA to be filled in with support from the EDI Manager.	Dan Debenham	Aug 2023
6. We recommend improving the format of EIAs by making explicit reference to each protected characteristic and requiring clarification of positive/negative impacts for each; this will help ensure no groups are unintentionally overlooked.	YES	This task is already underway - Adding in the protected characteristics that are relevant along with local figure examples will prompt users to consider the impact further. Additionally we are reviewing the EIA process and guidance available to users.	Dan Debenham	August 2023
7. We recommend proactively responding to wider significant national (or international) issues of inequality which will	NO	None - We already respond to national and international issues to both support and educate our communities. We are open to and actively encourage community members and colleagues to		

affect minority groups within their communities and employees.		tell us what issues are important to them in order for us to better support colleagues and service users.	N/A	N/A
8. Pre-empt accessibility issues for online communications by making large print versions of documents readily available to download as standard.	YES	Monitor - Documents that are downloaded can already be made large print via software that the viewer needs in order to initially read them (Adobe Acrobat / MS Word) – further cost in producing specific documents is not needed. We will regularly consult with customers to establish what level of support they require and adjust our support offer accordingly.	N/A	N/A
9. Establish specific, achievable and measurable targets to accompany the general objective of improving workforce diversity.	YES	Alongside the Q1 EDI dashboard, introduce a set of proposed targets for each of the measures, where benchmark data is available for the local area. This will include: <ul style="list-style-type: none"> 1. Diversity of the workforce compared to local population 2. Diversity of customers compared to the local population 3. Applications and conversion to employment 	Dan Debenham / Claire Tattersall	Measures 1 and 2 July 2023 Measure 3 October 2023
10. We recommend providing additional training modules to supplement core EDI training which cover specific aspects of equality, diversity and inclusion or protected characteristics in further detail (such as LGBTQ+ inclusion, race equality etc.).	YES	In considering the implementation of the Annual Diversity Calendar we will consider alongside our campaigns and with the support of our involvement groups delivery of specific EDI training on key topics. During 2023/24 consideration will be given to training which aligns to the following campaigns to both raise awareness and education as well as	Dan Debenham	From Oct 2023

		<p>to enable colleagues to best deliver the SLHD services:</p> <p>Black History Month – October Islamophobia Awareness Month – October World Cancer Day – February 2024 LGBTQ+ History Month – February 2024 Women’s History Month – February 2024</p>		
11. Obtain feedback on training to ensure it is of high quality, relevant, and fit for purpose	YES	<p>Feedback is already obtained (the last being May 2023) and Training is adjusted to reflect it along with regular updates to ensure it keeps pace with any changes and is of a high quality.</p>	Dan Debenham / Rhian Slaney	Ongoing
12. Introduce a formal method to improve key organisational communication, such as monthly team briefs, which would ensure that all staff receive the key information regardless of their line manager.	YES	<p>Formal briefings through Staff Focus and EMT Key Messages already take place, however, it is recognised that not all colleagues engage with these or in fact receive them –</p> <p>The upcoming revisions to the intranet will enable us to implement revised communication methods.</p> <p>We will include the involvement groups in how we can improve communication and for hard to reach groups such as our trade based colleagues we will engage with team leaders and the management team to explore face to face options for communication</p>	Comms	Q4 2023/24
13. We recommended that the website is reviewed from the perspective of good		<p>Whilst the website does include an accessibility page that advises customers of the various tools</p>		

practice in communication, particularly for the visually impaired, and that existing accessibility features such as the read-aloud facility are better signposted for users.	YES	available we don't tell then how. In the short term this can be made clearer on the website with further signposting in hard copy publications. In the review of the internet in the coming months this will be further reviewed to make navigation as clear as possible.	Dan Debenham / Comms	September 2023
14. We recommend reviewing the process for the provision of disabled adaptations to existing homes – seeking to improve the timescales and relationships between the council, SLHD, and the Quality of sub-contractors who undertake the works.	NO	The Adaptations process is owned entirely by DMBC and is not within the gift of SLHD to change this. We will continue to advise customers of the correct process to raise any concerns that they do have with that process directly through DMBC.	NA	NA
15. We recommend investigating why there may be a current disparity between the level of ethnic diversity in the customer base compared to the wider population.	YES	Investigate the number of Minority community applicants vs. property offers and report on the potential barriers to being offered a home and possible resolutions.	Dan Debenham / HomeChoice	March 2024
16. We recommend a review of the forms used to undertake the annual diversity survey of tenants, to ensure it reflects the latest EDI good practice, and using the census categories to gather information.	YES	Annual Diversity surveys do not take place for customers however our regular data monitoring forms will be updated to use the latest NHF Diversity Questions – including Socio-economic angle.	Dan Debenham	September 2023
17. We recommend more EDI training for staff who undertake the diversity surveys		An internal training programme will be devised to upskill colleagues in the importance of completing the forms correctly, why they are completed and		

and guidance on completing the form with customers.	YES	overcoming service users desire not to answer questions.	Dan Debenham	September 2023
18. We recommend the collection of diversity data during the complaints process, as this will allow analysis by protected characteristic and ensure that no particular group is having a disproportionately negative experience.	YES	This information should already be available within Open Housing where it has been provided by the tenant, this will allow a master query to be run providing diversity data for complaints. Complaints can be logged but anyone with access to Open Housing and therefore this may require a changing contact manager to ensure that the information is requested whenever a complaint is logged where there is a gap in data.	Dan Debenham / Louise Williams / Janet Walters	Nov 2023
19. We recommend the EDI Annual report to more clearly report on SLHD's data from a comparison position of customers, workforce and wider population, to ensure the organisation is representative of the community it serves.	YES	Add in percentage breakdowns for local borough communities to allow for comparison of borough vs. SLH position.	Dan Debenham	Nov 2023
20. Continuation of the work around how best to support Gypsy, Roma and Traveller communities.	YES	Connect with local G&T Charities to further support options, consult G&T community leaders on views of services and where best to adjust them. Role out digital information to bring G&T services to same access level as other communities.	Dan Debenham / Helen Jolly	End 2023

Governance Summary Communications Template

Report from:	Building Safety & Compliance Committee	
Date of meeting:	17 May 2023	
Report author:	Dave Wilkinson	
Summary of key items discussed at the meeting, (if possible, keep these to the top three):	Decisions made and actions agreed (if possible, keep these to the top three):	
<p><u>1. British Safety Council 5* Audit</u></p> <p>Members noted SLH has been awarded the maximum five star safety audit rating, which is the twelfth successive year it has achieved this rating.</p> <p><u>2. Fire Safety Legislation Changes</u></p> <p>The report was written to assist committee with a simple summary of legislative changes affecting housing providers and those with responsibilities for the management of social housing following the introduction of the Fire Safety Regulations 2022 which came into effect from January 23rd 2023.</p> <p><u>3. Fire Management Plan</u></p> <p>The report set out how SLHs will meet the legal and moral obligations around fire safety, and more specifically the commitments made and objectives outlined in the Fire Safety Policy.</p>		
Additional notes for communication to governance:		
None.		

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

Wednesday 17 May 2023 at 10am

Present

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

In Attendance

Chris Margrave (CM) - Director of Property Services, Danny Boardman (DB) - Head of Building Safety, Anthony Brown – Specialist Independent Advisor, Maxine Johnson (MJ) - Executive Support Officer.

ACTION

1. Apologies and Quorum

1.1 No apologies were received and the meeting was quorate.

2. Declarations of Interest by Board Members

2.1 There were no declarations made.

3. Minutes of the meeting held on 25 January 2023 and matters arising

3.1 The minutes of the meeting held on 25 January 2023 were approved.

4. Safety & Compliance Activity report – April 2023

4.1 DB presented the report that provided an update on all areas of compliance, occupational and building safety health and compliance performance.

4.2 Gas Servicing

DB commented he was proud of the compliance team who continued to forensically validate each LGSR (Landlord Gas Safety Record). Of the 18,875 properties on the Internal Service Provider (ISP) gas servicing programme only 5 remained outstanding. He drew members attention to point 4 of the report which gave the reasons and actions to address the remaining 5.

4.3 Electrical Safety

Electrical Installation Condition Reports (EICR) Programme

CM advised that an options report is being submitted to EMT shortly for consideration in relation to how best to move the programme forward.

He went onto explain that historically St Leger Homes has performed electrical condition testing in all properties on a 10-year cycle in line with statutory requirements. In April 2018 the programme began to move properties to 5 year testing in line with good practice. The impact of Covid where EICRs were not carried out for a year and recruitment and retention issues of electricians has affected the compliance of the programme. He added without contractor intervention SLH will not be able to meet its statutory obligations, however there are clearly budget implications to using contractors.

He went onto explain the report sets out four options for consideration: revert to a 10 year testing cycle, maintain a 5 year cycle, deliver the maximum number of EICRs using existing budgets or deliver the programme through a hybrid approach.

4.4 DW commented as a committee we would be in favour of finding the additional budget and utilising contractors.

AB added many other organisations have also fallen behind programme due to the pandemic, however the expectation is to move to a 5 year programme; in line with best practice and from a legislative position.

4.5 SL asked, how long would it take to train a member of staff to be a qualified Electrician?

It was noted approximately 4 years.

4.6 Building Safety External Façade update

SL asked, have there been any issues raised by tenants, especially considering the cold and very wet weather we have had, or about noise/vibration?

DB advised that SLH hadn't received any formal complaints. A resident letter drop was carried out two weeks ago - the organisation was awaiting a revised programme from Wates, and SLH communication will be issued once it has confidence in the information it is providing.

CM added that some of the delays are down to contractor issues, what was initially a EWI replacement programme, has uncovered additional works identified after the EWI has been taken off. He commented the 18 month programme was very ambitious.

4.7 Fire Suppression System

DB advised that the fire barrier option was no longer the preferred option. The planning application for the fire barriers is still with DC awaiting a decision, SLH were now in receipt of the costs for the plan B suppression system. CM and DB along with DC colleagues plan to meet to brief Ros Jones and Glyn Jones on the options going forward.

4.8 Asbestos

SL asked, are properties that are not on the re-inspection programme but are inspected by The Testing Lab prior to a repair included in these figures? (referring to point 5.1 – table 10 of the report)

Also, do the properties that have had pre-repair tests still need to be included in the re-inspection programme?

DB advised, the figures are specifically related to Communal areas. Our Asbestos Survey strategy is ensuring that we will have asbestos information for all of our properties within 2 years and additional resources have been provided into the team by senior management from SLH.

4.9 Lift and Lifting Equipment (LOLER) Management Programme

Referring to 7.8 and 7.9 of the report, AB asked if the description of the risk that was being managed could be strengthened – explain how the organisation was going to mitigate the risk.

DB

4.10 Damp, Mould and Condensation (DMC)

SL asked, could you expand on the triage procedure, please. What are the criteria for priority appointments?

Currently there is no formal triaging system in place which prioritises specific cases, although this is something that is included in our DMC action plan to be addressed over the summer. The triaging system, when developed, will likely prioritise cases where there are young children, older people or individuals with certain disabilities or vulnerabilities. The location and extent of the problem will also be factored into our assessment.

4.11 Referring to point 10.2 of the report, AB raised that DMC inspection lead times were currently being appointed in approximately 2 months time.

CM advised that SLH had seen a reduction in response times however, it was taking a robust approach to all DMC inspections with photographic evidence and inspections resulting in follow on repairs. Recruitment to the DMC team continued, as well as putting plans in place ready for Autumn.

4.12 DW asked, have we tied in with all of our partnership bodies – have they been briefed on what to do in a DMC case? He commented Sheffield or Huddersfield have given tool box talks.

CM advised we link in with Rupert Suckling, Public Health and have engaged with a small number of consultants and GPs. Toolbox talks are something we can consider for all staff who access a property as part of their work role. This is something our gas engineers are good at, identifying issues such as this in homes.

CM

4.13 Members noted the Safety & Compliance report.

5. Subject Matter Expert – Water Hygiene & Lift

5.1 Item deferred to the next meeting.

6. Water Hygiene Management Policy

6.1 Item deferred to the next meeting.

7. Lift Management Policy

7.1 Item deferred to the next meeting.

8. Electricity Safety Policy revised

8.1 DB presented the report advising SLH is required under Health & Safety legislation to have a policy in place for managing Electrical Installations.

The report sets out our general approach to safe working and responsibilities within the organisation. It explains how SLH, as an employer will manage the electrical installations, roles and responsibilities within the business.

Members noted that there were no fundamental changes to the policy.

8.2 Referring to the policy at point 4. 'Responsibilities' - SL enquired, shouldn't this include the Board's responsibility to approve this policy and delegating responsibility for implementation and monitoring?

DB advised, all the compliance policies are introduced under the Health & Safety (H&S) policy similar to Health & Safety law – the H&S policy is considered the enabler and Boards responsibilities are covered in that policy.

DW asked from a governance point of view, that the BSC terms of reference are checked.

8.3 SL commented, this may be considered to be out of scope for this policy as it refers to electrical items owned by tenants, but could the electrical subject matter expert prepare articles for Houseproud, website and social media concerning electrical safety in the home?

It could also include reminders of what tenants are not permitted do to the electrical installation.

DB advised the Electrical SME (subject matter expert) is looking at doing a related newsletter to be included on the intranet for residents to access with specific compliance related topics.

8.4 Committee noted the report.

9. By passing of meters

9.1 DB presented the briefing note produced by Housing Services colleagues and requested by BSC at its meeting on 25 January, to advise of the enforcement options available in the event of meter bypassing and

MJ

tampering.

- 9.2 The briefing note informed members that meter bypassing is not a tenancy breach commonly identified by Housing Officers and it is more usual that it comes to light once a tenant has left the property or when an electrical test is being conducted.

Additionally, any breach of the Tenancy Agreement can be enforced through legal means, however if this was an isolated incident i.e. not part of wider tenancy breaches, it would be unlikely that the courts would consider granting possession of the property as a proportionate sanction, particularly in the current housing and economic crisis.

Referring to point 3.4 TM commented, the question arises - how we bridge the gap between reprimanding tenants and eviction.

CM stated that this area of expertise fell within the remit of the Director of Housing and Customer Services and suggested a discussion at Board.

- 9.3 Committee noted the briefing note.

10. BSC & ISO45001 Audit – Action Plan

- 10.1 DB advised that SLH have been externally assessed by the British Safety Council (BSC) in an annual Five Star Occupational Health and Safety Audit. This has resulted in the organisation being awarded the maximum five star safety audit rating, which is the twelfth successive year SLH has achieved this rating.

Members noted that this year the audit was carried out in person by a new auditor.

- 10.2 Committee noted the briefing note.

11. Fire Safety Legislation Changes BN

- 11.1 DB explained the number of recent changes in the law affecting social housing is unprecedented. The report was written to assist the Building Safety & Compliance (BS&C) Committee with a simple summary of those affecting housing providers and those with responsibilities for the management of social housing following the introduction of the Fire Safety Regulations 2022 which came into effect from January 23rd 2023.

- 11.2 AB asked, where do we currently stand in terms of timescales and compliance with legislation?

DB – confirmed that the new regulations require all flat entrance doors to be inspected using best endeavours on an annual basis so we would have 12 months in order to make the entrance door requirements. For common areas doors in buildings greater than 18M these need to be inspected every three months and we are on track to achieve this using the QR code system and C365.

11.3 Committee noted the briefing note.

12. Fire Safety Improvements - 10yr Programme

12.1 DB presented the report that outlined the purpose and content of the 10 year Fire Safety improvement programme.

He said the programme which is risk based has given due consideration to current and future projects, with an anticipated investment in excess of £20m. Members noted that the programme had also been presented and endorsed at Building Safety Group.

12.2 AB raised that the programme not only covered fire safety improvement works, but also in addition approximately 2,501 FRA actions. He said from a committee point of view it's important we understand the programme and are offered assurance the organisation is managing the risk, and using dynamic risk assessments.

DB explained that the programme was closely monitored at Building Safety Group, in addition to weekly/quarterly/annual health & safety risk assessments.

12.3 AB asked, how will you give committee assurance in future updates?

DB explained that SLH and Clarion Housing will be the first organisations to use RiskHub to monitor the frequency of the programme.

12.4 CM also explained we have carried out a significant piece of work with Building Safety Group to offer a rationale as to how the works have been prioritised.

12.5 Committee noted the report.

13. Fire Management Plan

13.1 DB presented the report that sets out how SLHs will meet the legal and moral obligations around fire safety, and more specifically the commitments made and objectives outlined in the Fire Safety Policy.

13.2 AB commented that the plan was very comprehensive.

13.3 Committee noted the briefing note.

14. Adverse Incident – Ref 10617

14.1 DM presented the report to provide committee with assurance of the actions taken by SLH following receipt of a complaint on the 15 February 2023, where the tenant had sustained an injury as a result of falling down the communal staircase at the property.

14.2 It was noted that lessons had been learnt from the incident.

14.3 Members queried whether DC were made aware of the incident, they were

advised that Building Safety Group had also received the report for discussion.

14.4 Members noted the contents of the report.

15. Building Safety & Compliance (BSC) Committee Annual Report

15.1 CM presented the report that provided an annual overview of the activities undertaken by the BSC committee and to give assurance to Board that the Committee has fulfilled its terms of reference.

15.2 DW asked that the report is revised due to the water hygiene management policy and lift management policy being deferred.

AB asked that risk management is strengthened in the report to further demonstrate the level of scrutiny and oversight given by committee.

15.3 Committee approved the report subject to the above actions.

16. Joint Safety Committee Minutes 18 January 2023

16.1 CM commented we are looking to try and strengthen the agenda.

17. High Rise Engagement Group Minutes - Balby Bridge (23.02.23) and Intake (23.02.23)

17.1 DB commented we need to rejuvenate the group, tenants and residents usually attend with individual issues they wish to be resolved.

CM added that the Director of Housing & Customer Service and Head of Customer Services are doing a piece of work to try and encourage attendance. With the EWI replacement programme being on the agenda, thoughts were that the groups would be popular – however this is not the case; an indication that they are already well informed.

18. AOB

18.1 DW expressed his sincere thanks to AB, commenting his input and support to Committee had helped achieve a very strong position in terms of Health, Safety & Compliance.

AB thanked Committee, and wished them future success in what was a very challenging arena.

19. Date and Time of Next Meeting

Thursday, 21 September 2023.

MJ

Matters Arising from the previous minutes

NO	Month	Ref	Action	Progress	Completed Y/N	Owner
1.	Sep-22	3.2	<p>Safety & Compliance Activity Report</p> <p><u>No Access - Court Costs</u> Review court costs so they are passed onto tenants and not picked up by SLH.</p>	<p><u>Update 17.05.23</u> Currently being reviewed by Housing Management teams.</p>	In progress	MME/DB
2.	Sep-22	7.4	<p><u>Tenant Awareness</u></p> <ul style="list-style-type: none"> • Social Media • Tenant sign-up information pack – guidance sheet <p>Further detail in the minutes.</p>	CO detector leaflet to be circulated to BS&C members by Head of Building Safety.	N	DB
3.	May-23	4.9	<p>Safety & Compliance Activity Report - <u>Lift and Lifting Equipment (LOLER) Management Programme</u></p> <p>Referring to 7.8 and 7.9 of the report, AB asked if the description of the risk that was being managed could be strengthened – explain how the organisation was going to mitigate the risk.</p>	In progress	N	DB
4.	May-23	4.12	<p>Safety & Compliance Activity Report - <u>DMC</u></p> <p>Consider toolbox talks for teams wider than the gas engineers.</p>	In progress	N	CM
5.	May-23	8.2	<p>Electrical Safety Policy</p> <p>DW asked from a governance point of view, that the BSC terms of reference are checked – to clarify if it was Boards responsibility to approve the policy.</p>	In progress	N	MJ

6.	May-23	15.2	Building Safety & Compliance (BSC) Committee Annual Report Revise: <ul style="list-style-type: none"> • Water hygiene mgt and lift mgt policy are deferred. • Risk mgt is strengthened. 	In progress	N	MJ
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DRAFT

Governance Summary Communications Template

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

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

18 May 2023

Present

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

In Attendance

Mark McEgan (MMc) Director of Housing and Customer Services, Chris Margrave, Director of Property Services, (CM), Jane Davies (JD), Head of Housing Services, Jackie Linacre (JL), Head of Customer Services, Anne Tighe (minutes)

In Attendance for Item 4

Rodger Haldenby (RH), Brenda Lennon (BL), Henry Wood (HW)

- | | ACTION |
|--|---------------|
| 1. Apologies and Quorum | |
| 1.1 Apologies were received from Sam Bartle (SBa), and the meeting noted as quorate. | |
| 2. Declarations of Interest by Committee Members | |
| 2.1 No declarations of interest were received. | |
| 3. Minutes of the meeting held on 23rd February 2023 and matters arising | |
| 3.1 The minutes of the meeting held on 23 rd February 2023 were agreed as an accurate reflection of discussions held. | |
| 3.2 Item 4.3 – Q3 Performance Information
MMc advised that the KPI's have already been set and signed off through the Officer Liaison Board (OLD) therefore the organisation was unable to change the them. | |
| 3.3 Item 9 – Journey to Excellence Homelessness
It was noted that members had received examples of 'lived experience' of homelessness. | |
| 3.4 Item 9.14 – Journey to Excellence Homelessness
PC apologised he had not noted his action, however would do so in time for the next meeting. <i>PC was asked by the Chair if, in his opinion, Council members had noticed any difference on the ground. PC responded that city centre elected members may be good to ask as they experience rough sleeping issues more than others. Following a brief discussion he agreed to ask his colleagues for their perceptions of homelessness.</i> | PC |

- 4. Tenant and Residents Involvement Panel (TRIP) Review - MetroClean**
- 4.1 RH, BL and HW attended to present their findings around the MetroClean service. They explained that their aim was to gain good governance and a fit for purpose service for tenants and residents in high and low rises, however they did not wish to get involved in the fine detail of new contracts.
- 4.2 The following issues were highlighted:
- Tenants were critical of the service and advised they cleaned the block themselves
 - Tenants suspected no-one checked nor supervised work so sometimes blocks weren't cleaned at all
 - Tenants in low rises were unhappy that they weren't provided with the same level of service as high rises
 - In a meeting with Cleaning Manager in CDC he advised he has 4 managers, operatives x 2 each vehicle – TRIP thought this was an insufficient number of staff to carry out Service Level Agreement (SLA)
 - Cleaning Manager, when pressed about staff sickness and holidays, admitted savings were used to deal with long term sickness of other staff
 - Cleaning Manager was swift to say SLHD should be monitoring the work during walk-downs and further suggested that staff be TUPEd over to SLHD for them to manage
- 4.3 TRIP concluded their presentation by drawing member's attention to the extensive list of recommendations, and noted their thanks to SLHD staff for assisting in the review.
- 4.4 The Chair thanked TRIP for their presentation of the review, and commented that the work that had gone into the review was extremely detailed and commended the time and effort it had taken.
- 4.5 MMc agreed the report was comprehensive. He referred to Appendix A to the covering report, which detailed management responses to 14 recommendations. He advised that the Executive Management Team (EMT) had agreed with 10 of the recommendations and would carry out a piece of work to action, however there were 4 recommendations that EMT couldn't address, for example the TUPE of cleaning staff.
- 4.6 He also acknowledged the need to manage the service more, the supervision and rota's; this could require a working group to do that, which would then commit to a lot of work to turn the service around and have a quality service going forward. In response to the Fire Risk Assessments (FRAs), the FRAs would be picking up certain issues and CM would then progress these.

- 4.7 CM confirmed medium and low rise buildings would go in to scope eventually. When multiple properties go to a sharea access/stairs, he had a dedicated safety team and any specific concerns needed to be fed into the team. CM referred to TRIPs finding and asked why cleaners were not allowed to use steps to reach high places such as windows. BL clarified cleaners were only allowed to reach to body height and couldn't use steps unless they had a colleague with them.
- 4.8 PC commented the report made hard reading; there was an awful lot of anecdotal first hand evidence that builds up a pattern showing that the service wasn't being delivered and should be addressed. He asked if it would be feasible to bring the service back in house. JD explained that it would still be the same staff if the organisation brought the service back in house.
- 4.9 Members expressed concern around the level of service, and in particular the lack of supervision by MetroClean supervisors. They pointed out that we shouldn't be reliant on TRIP to report on these types of issues, and stated that CDC/SLHD officers should do a type of mystery shopping on the day or periodically. Both organisations should be discussing the report as sub-standard services were frustrating and annoying.
- 4.10 SL commented that the emotive language in the report reflected the feelings of tenants and TRIP members; he asked what were the members main 'take away' from the review. RH stated that members were unhappy with Mr Taylor, the Cleaning Manager, as he didn't have any answers to the questions that were being asked and continually put the onus on the cleaning supervisors or SLHD. He continued to say that it was clear that SLHD Housing Officers weren't doing their jobs either, as there seemed to be some complacency.
- 4.11 The Chair agreed that the organisation did have a role as a client and they should be ensuring that MetroClean were doing what they were employed to do. MMc concurred, and advised it should be an output bases specification to ensure MetroClean were doing what they were being paid for and management should be reviewing SLAs. He referred back to the management response to the TRIP suggestions and pointed out that there were no timelines to the actions. What he would like to suggest was that the report would be reviewed, following officers scrutiny and opportunity to provide a framework to address, with Value for Monday (VfM) being addressed initially. The TRIP members would be invited back in approximately 6 months to look at the action plan and ensure that management had carried out their agreed actions.
- 4.12 Members agreed that TRIP would be invited to the 16 November 2023 Performance and Improvement Committee, however

JD

requested that they be provided with a brief verbal update at the 14 September 2023 meeting.

4.13 The Chair thanked the TRIP members for their attendance and presentation and they left the meeting.

5. Customer Focus Update – including briefing around complaints review

5.1 Members received and noted the Customer Focus Update.

5.2 JL led on the presentation on the complaints review and highlighted the following:

- Complaints have increased, however our service is improving but we want to sustain that improvement
- Plan included 46 actions to deliver sustained improvements
- We have achieved 4 core objectives
- Set out at the end of March 2023 a rapid response improvement plan
- A number of actions were around policies and procedures/cross cutting improvement plan and colleagues were being very supportive
- JL was really pleased with progress and seeing improvement across the whole business; we were now in the higher quartile achieving a 93% response rate

5.3 Members were pleased to note the improvement in performance following the roll out of the action plan. They requested an update at the next Performance and Improvement Committee with a summary of actions, how many had been completed and how many have made a difference to working practice.

JL

6. Service Standards

6.1 JL provided an update on Quarter 4 of the Service Standards. Once again the most important thing to focus on was that performance was improving around complaints and contact into the Customer Access Team. It was noted that Repairs Excellence was making a positive impact on reduction of complaints.

6.2 JD reported that plans were being put in place to address the rising Anti-Social Behaviour (ASB) in Doncaster as managers were aware of the need to combat and resolve issues as quickly as possible. The review of structure of the Housing Management Team included a dedicated ASB Manager, Team Leader and Team.

6.3 The Chair reiterated his concerns about the calls element as he was of the opinion the target was unachievable. JL advised she had discussed this with TRIP members and the Getting Involved

Group (GIG) and had proposed to ask if the call was felt to be answered 'in a reasonable amount of time'. Members were pleased to note this as they had noted the Council struggled to answer their calls within their 90 second target.

7. Quarterly Involvement Monitoring

- 7.1 JL presented the Tenant Voice Outcomes briefing note and highlighted the great work the One Voice Forum was carrying out. The Community Involvement Team had recruited more representatives for the group and a number of Policies had already been reviewed by the group. JL had discussed with the Engagement and Communications Service Manager a proposal to slightly amend the report to show outcomes going forward, and evidencing the difference tenant involvement made to the organisation.
- 7.2 Members were pleased to note the outcomes that have been achieved during Quarter 4, and the key actions that have been achieved from the Tenant Voice Strategy Action Plan.

8. Tenancy Sustainability Update

- 8.1 JD led on this item and highlighted the following:
- 7, 366 tenants were now in receipt of Universal Credit (UC) payments which was over 1,000 increase from previous year
 - We have estimated that 7,500 of our tenants would be eligible for UC and this should be reaching a plateau
 - There were now 40% of tenants in receipt of UC on APA (direct rent payment)
 - Total overall arrears were still well within target and JD was really pleased with her team's performance
 - The financial gains for tenants had increased to £1,605,857
 - Mental health navigators were in post and had lots of cases coming through making a difference to our tenants lives
- 8.2 Members were particularly pleased to note performance around arrears and asked if the organisation was bucking the trend. MMc confirmed we were in the top quartile, however were awaiting final written confirmation from Housemark.
- 8.3 In response to a question about future risks, JD explained the main one was the cost of living crisis, however the job itself was becoming really hard.
- 8.4 Members observed that staff should be celebrating that they're managing to keep arrears under control; we should have civic pride in our tenants and congratulate staff. What was most impactful for tenants was the tenancy sustainability process to get

a good financial assessments for tenants, and obtaining further entitlements due that they would otherwise not have. In a CAB cost of living survey they recorded that 46% of people they dealt with were meeting day to day living costs using credit cards which wasn't sustainable.

9. Q4 Performance Information

9.1 CM and MMc provided an update on Q4 Performance Information and highlighted:

- KPI 1 - % of Current Rent Arrears against Annual Debit – excellent results as discussed earlier in the meeting
- KPI 2 and 3 – Void Rent Loss and Number of Days to Relet continues to see improvement and teams were working well together towards really difficult targets
- KPI 4 – Number of Households Placed in B&B Accommodation – finished at 16 for year end after rising to 70 in February 2022. It was noted that the Mayor appreciated the Journey to Excellence (J2E) that had been implemented
- KPI 7 – Number of Complaints Upheld as a % of all Interactions – members had noted increased performance following action plan
- KPI 9 – first visit complete figures remaining steady and was dependant on repair
- KPI 11 – Days Lost to Sickness Perf Full Time Equivalent – a refreshed Sickness Absence Policy with triggers had sharpened procedures for managers to deal with any issues

9.2 Members queried when exactly the Sickness Absence Policy had changed, and when would the Committee see positive results, as the organisation needed to consider VFM and ensure there was not a culture that staff taking time off when they don't need to. It was explained that it had already rolled out, however the exact date would be clarified.

CM

10. ASB Update

10.1 JD led on the ASB presentation and advised members that ASB in general has increased from last year, with Central and South West having the majority of complaints of noise and verbal abuse. There were hot spots where we continued to work with partners particularly around more serious behaviours, for example in Edlington and Mexborough.

10.2 Members commented that SLHD could be extremely challenging for the organisation as in a number of cases our tenants were blamed for issues, however there were a lot of private tenants in what previously were council houses.

10.3 JD agreed that in hot spots had a low number of SLHD tenants. However the planned restructure into ASB teams was to group our officers to be able to focus on the right areas. Staff that weren't in the ASB team would be better able to focus on low level ASB such as cleaning/gardens and so on.

11. Any Other Business

11.1 No other business was raised.

12. Date and time of next meeting

12.1 *14th September at 3:00pm*

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Governance Summary Communications Template

Report from:	Audit & Risk Committee	
Date of meeting:	26 June 2023	
Report author:	Trevor Mason	
Summary of key items discussed at the meeting, (if possible, keep these to the top three):	Decisions made and actions agreed (if possible, keep these to the top three):	
<p><u>Procurement Update</u></p> <p>The Chair requested further information around the emergency accommodation contract.</p> <p>The Head of Procurement reported that this was currently out to market and hopefully out to contract in July. It was a complex area and limited to Doncaster. A vast amount of work had been undertaken with Hoteliers to get them familiarised with processes etc as this was not usually in their remit. As new hotels opened these could be added to the list of approved suppliers.</p> <p><u>Financial Statements including Management Letter</u></p> <p>The committee noted the current position of the financial statements and noted the necessary changes that were required to account for the pension fund.</p> <p><u>Warehouse Report (Full 2022/23 Financial Year Summary)</u></p> <p>The Committee were once again disappointed to see an increasing number of van checks that had not been completed during the year.</p>	<p>It was agreed that an update be provided at the next meeting.</p> <p>It was agreed that a report would be compiled which compared employees who were regularly missing these checks. Appropriate management action was recommended.</p>	
Additional notes for communication to governance:		
None.		

St. Leger Homes of Doncaster Limited

AUDIT & RISK COMMITTEE MEETING

26th June 2023

Present

Trevor Mason (Chair), Cllr R A Jones and Milcah Walusimbi

In Attendance

Julie Crook - Director of Corporate Services (JCr), Nigel Feirn - Head of Finance and Business Assurance (NF), Nicci Frost-Wilson - Doncaster Council's Internal Audit Manager (NFW), Holly Wilson (HW) – Doncaster Council's Head of Procurement, Jason Burgess (Beever & Struthers) and Shauna Brady (SB) – Executive Support Officer (minutes).

	<u>Apologies and Quorum</u>	ACTION
1.		
1.1	None. It was noted that there were no matters that Board Members wanted to raise with either External or Internal audit whilst officers weren't present in the meeting.	
2.	<u>Declarations of Interest by Board Members</u>	
2.1	There were no declarations of interest.	
3.	<u>Previous Minutes and Matters Arising – 6 March 2023</u>	
3.1	The minutes of the meeting held on 6 March 2022 were agreed.	
3.2	<i>From Agenda Item:- 5.4 – External Audit Strategy</i> – Complete.	
3.3	<i>From Agenda Item:- 6.6 – Monitoring of the Internal Audit Programme and Outstanding Audit Actions</i> – The Head of Finance and Business Assurance reported that this had been completed. It was noted that one remaining medium risk action was from the Voids audit which was due for completion by 30 June 2023, so not yet overdue and 2 other low impact risks were also on track for completion.	
3.4	<i>From Agenda Item:- 6.12 – Monitoring of the Internal Audit Programme and Outstanding Audit Actions</i> - The Head of Finance and Business Assurance reported that the Americanised data had been revised.	

- 3.5 **From Agenda Item:- 9.6 – Update from Data Protection Officer**
– It was noted that this was an item on the Agenda.
- 3.5 **From Agenda Item:- 13.2 – Forward Plan** – It was noted that this was an item on the agenda.
4. **Procurement Update**
- 4.1 The Head of Procurement reported that the purpose of the report was to provide Committee with an overview on procurement governance compliance and activity for the financial year (April 2022 – March 2023).
- 4.2 It was noted that during the 22/23 financial year, St. Leger Homes (SLHD) had awarded 72 contracts (56 in 21/22) contracts above £5k and have a further 48 (70 in 21/22) projects on the Procurement Plan. As of the 31st March 2023, St. Leger Homes have 134 live contracts.
- 4.3 The Head of Procurement reported that there had been 5 new procurement breaches during 2022/23, 3 were resolved within the year leaving 2 unresolved breaches. This equated to 8 in total taking into account historical breaches from previous years. The full details of which featured in Appendix A.
- 4.4 42 staff have received Contract Standing Orders and Procurement Training in 2022/23 and this would be on an ongoing programme.
- 4.5 The Chair requested further information around the emergency accommodation contract.
The Head of Procurement reported that this was currently out to market and hopefully out to contract in July. It was a complex area and limited to Doncaster. A vast amount of work had been undertaken with Hoteliers to get them familiarised with processes etc as this was not usually in their remit. As new hotels opened these could be added to the list of approved suppliers.
It was agreed that an update be provided at the next meeting.
- 4.6 The Chair queried was the split of 80% contracted spend/20% off contract spend reasonable?
The Head of Procurement responded that this was around right and was a healthy number as a lot of the off contract spend was around emergency accommodation and once contracts were in place this figure would drop.
- 4.7 The Chair queried how the Doncaster spend was being accommodated as this was part of our KPIs.
The Head of Procurement reported that there were 2 main ways to ensure this. Within the contract standing orders wherever possible, we must approach one Doncaster Company, and the 2nd point is that we have made it mandatory that 10% of the value was around meeting the social value, and a lot of this was around employment

and apprenticeship schemes.

- 4.8 The Head of Procurement reported that we also work really closely with the Doncaster Chamber and we are taking a bit of a different approach in that we are going out for multi-contract contracts. Unfortunately, it was impossible to avoid the use of outside contractors and we have also attended an event at the College and met with Contractors who were keen to work with SLHD.
- 4.9 A member sought clarification with regards to the information contained at 5.2.1 of the report and requested that this figure be made clearer for future reports.
The Head of Procurement clarified the detail within the paragraphs, that 13.5% of off contract spend was on purchase card transactions totalling £612,833. It was noted that there was a purchasing card policy in place.
- 4.10 The Head of Finance and Business Assurance. clarified that card holders have different spend and approval limits and expenditure was monitored closely and analysed in detail of every month.
The Director of Corporate Services reported that any spend over £250.00 was also approved by the Budget Holder.
- 4.11 The Chair concluded that good progress had been made overall which was pleasing.

4.12 **The Committee noted the report.**

5. Financial Statements including Management Letter

- 5.1 The Director of Corporate Services reported that the purpose of this report was for the Committee to undertake a full and detailed review of the financial statements of the Company for the year ended 31 March 2023 and to recommend to Board for approval.
- 5.2 It was noted that the report was more draft in format than in previous years due to updates being made after the papers had had been circulated.
- 5.3 The Director of Corporate Services reported that in previous years we have seen a deficit on our balance sheet due to the position of the pension fund. For 2022/23 the pension fund has moved into a surplus position. The financial statements presented at this meeting had not recognised the pension surplus and were showing a zero position on the balance sheet. Following discussions with the Council and requesting further information from the pension fund and actuaries the balance sheet would be changed to show an “asset ceiling” surplus figure. This would be consistent with the way that CDC had prepared their financial statements and was acceptable to our External Auditors.

- 5.4 The Director of Corporate Services reported that we are still hoping that clear guidance on how to account for the pensions issue would be provided by Grant Thornton (the Council's external auditors) and/or CIPFA (the public sector accountancy body).
- 5.5 The Chair asked what were the timescales for further guidance? The Director of Corporate Services reported that this was unclear, but that she had agreed the basis on which the Board would approve the financial statements with the Council.
- 5.6 The Chair queried what would be shown when we changed to the asset ceiling approach? The Director of Corporate Services reported that it would show as a surplus figure on our balance sheet. The notes to the accounts would give an explanation of the figures.
- 5.7 Jason Burgess reported that this was an unprecedented position this year across a large number of organisations and some of the swings were eye watering, moving from £40 million deficit last year to a £30 million in surplus this year.
- 5.8 Jason Burgess reported said he had completed some pre-work to deal with every possible scenario and hopefully we should be in a position to sign off soon.
- 5.9 The Draft Management Letter was discussed and consideration was given to the eight items outstanding on Page 11 of the report that Audit required to complete their work.
- 5.10 It was noted that it was expected that all of these items with the exception of going concern would be resolved prior to the financial statements being approved by Board.
- 5.11 It was noted that with regards to Page 14 (Accounting and Internal Control Systems) a minor finding had been identified which once investigated further it had become apparent that the finance team did carry out this work, but currently there was no evidence of this. Therefore, this was required to be documented in order to evidence that this work had taken place.
- 5.12 Jason Burgess reported that their work was almost complete and that he would continue to liaise with the Director of Corporate Services and the Head of Finance and Business Assurance.
- 5.13 The Chair thanked Jason Burgess for his comprehensive report and the key message was that it was a clean audit.
- 5.14 **The Audit and Risk Committee recommended the Annual Financial Statements for approval by the Board.**

NF

6. Internal Audit Reports

- 6.1 **Creditor Financial Processes Report 2022/23**
- 6.2 The Internal Audit Manager provided an overview of the results of an audit of the creditor processes within St Leger Homes.
- 6.3 It was pleasing to note that the opinion was substantial assurance and that Creditor payments and associated processes were robust, accurate and correct.
- 6.4 The committee were pleased to see the outcome of this report which covered large amounts of expenditure within the business.
- 6.5 **The Committee noted the contents of the report.**
7. **Internal Audit Annual Report 2022/23**
- 7.1 The Internal Audit Manager provided an update on her Annual Report of Internal Audit for 2022/23 and she was happy to report that good levels of internal control were found to be in place during 2022/23 based on the work undertaken during the financial year.
- 7.2 It was noted that at the time of the report further works were required around Voids Management (Partial Assurance) and Fuel Cards (Limited Assurance).
- 7.3 A member raised concerns that the report on Fuel Card usage was still showing as limited assurance.
There was a discussion around the issues and findings that had been highlighted at the time of that audit and that the annual report reports the position at the time that the audit took place. Since then, all of the audit actions have been completed and the evidence has been submitted and accepted by Internal Audit.
- 7.4 The Audit Manager commented that it was likely that if that audit was carried out again now that the findings would be improved.
The Director of Corporate Services reminded the Committee that the Internal Audit plan is put together each year on a risk basis and on that basis it is likely that the process for fuel cards will be reviewed again in three to four years.
- 7.5 A member suggested considering future vehicle use and possibility of electric vehicles.
The Director of Corporate Services reminded the Committee that this had been discussed at the last Board meeting and had been added as a discussion topic for a future Board meeting.
- 7.6 **The Chair conveyed his thanks to all involved with these reports and pleasing findings and the Committee noted the contents of the report.**
8. **Supplies & Logistics Update**

- 8.1 The Director of Corporate Services provided an overview of the stockholding and associated risks for the 2022/23 financial year.
- 8.2 It was noted that there was a low level of stock adjustments and the External Auditors had been present at the Annual stock check and had not identified any issues.
- 8.3 Further investigations were ongoing as to the value of stock and the number of van checks completed due to it being low. The committee asked that we also looked at correlations between staff who had not had a stock check last year and this year.

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

9. **Regulatory Standards**

- 9.1 The Director of Corporate Services presented an update on the Regulatory Standards position statement. It was noted that the plan was to await the outcome of the forthcoming review of Consumer Standards by the Regulator before updating our position statement.
- 9.2 A further report would be presented to Committee in November and annually thereafter.
- 9.3 The Director of Corporate Services reported that we were in the process of procuring a company to act as a “critical friend” to enable us and the Council to be ready for inspection. She also reported that it is likely that they would want to observe either a Board meeting or a Committee meeting.
- 9.4 It was important to note that the regulations apply to the Landlord (CDC), although CDC delegate many functions to ourselves.
- 9.5 The Chair asked a Member for their view and opinion as a tenant Member regarding the recently established Tenant Satisfaction Measures (TSMs)
A member responded that she had very limited knowledge around the satisfaction measures and this would be common for the majority of tenants.
- 9.6 The Director of Corporate Services reported that a number of the TSMs are judged on how many complaints the organisation received and how quickly they are resolved. It was noted that we are seeking views and increasing contact with “silent tenants” and the aim was the provision of excellent services for all.
- 9.7 A member asked was there the opportunity for Audit to review this? The Director of Corporate Services reported that this could be built into the Audit plan for future years. The Head of Finance and Business Assurance reported that we have already added the validation of KPIs and TSMs (tenant satisfaction measures) to this year’s audit plan.

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

10. Update from Data Protection Officer (DPO)

10.1 The Head of Finance and Business Assurance reported that this report would now be considered by this Committee and not the Performance and Improvement Committee.

10.2 Consideration was given to the Summary Table, where it was noted that generally there was an increase in FOI enquiries and a drop in response times. This tied into the next agenda item where the team involved had reviewed their processes and had identified learning points in order to meet timescales.

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

11. Data Protection (DP) and Freedom of Information (FOI) requests

11.1 The Director of Corporate Services presented a report to Committee, as requested at the last meeting, detailing improvements made and the action plan for further improvements, to enable DP and FOI requests to be responded to in a more timely manner.

11.2 The Head of Finance and Business Assurance reported that a lot of enquiries were of a complex nature and related to damp and mould, cost of living and homelessness and issues in the media.

11.3 The Director of Corporate Services reported that generally FOI requests were from the press and if the information requested was readily available the link to the information was forwarded to the customer streamlining the process.

11.4 A member commented that he was concerned as poor performance seemed to be blamed on a variety of issues with excuses given and this wasn't acceptable.

11.5 The Chair confirmed that measures had been taken to improve performance so this would be monitored closely moving forward.

11.6 **The Committee noted the contents of the report and actions taken.**

12. Exit Payments, Pension Discretion Policy Decision and Flexible Retirements 2022/23

12.1 The Director of Corporate Services presented a report to Committee regarding Exit Payments, Pension Discretion Policy Decisions and Ill health Retirements 2022-23 which was previously considered by the Employment and People Committee.

- 12.2 It was noted that the report was for information and the company welcomed and encouraged flexible retirements as long as it was in keeping with the needs of the Business.
- 12.3 **The Committee noted the contents of the report.**
- 13. Gifts & Hospitality Register - Annual Report**
- 13.1 The Director of Corporate Services presented a report to Committee of the gifts & hospitality, which had been accepted and declined in the 2022/23 financial year, depicted in Appendix A of the report.
- 13.2 It was noted that most offers are related to the annual Housing Conference. Staff are reminded regularly and in the lead up to Christmas of the need to declare any gifts or hospitality, whether accepted or declined.
- 13.3 **The Committee noted the contents of the report.**
- 14. Fraud register & Related Activities**
- 14.1 The Director of Corporate Services reported that the briefing note provided an update on the potential cases of fraud, which are currently ongoing within the organisation, and any other relevant updates.
- 14.2 It was noted that Right to Buy levels were back to pre-covid levels and a small number of applications are very time consuming as there are robust money laundering checks to be undertaken.
- 14.3 The Director of Corporate Services reported that in terms of the two disciplinary cases where the employees had been dismissed, these employees had had previous warnings in respect of their behaviour.
- 14.4 **The Committee noted the contents of the report.**
- 15. Committee Annual Report**
- 15.1 The Director of Corporate Services presented the draft report which provided an annual overview of the activities undertaken by the Committee and would provide assurance to Board that the Committee had fulfilled its Terms of Reference.
- 15.2 Apologies were given as Appendix A was missing from the circulated documents and the terms of reference had been amended to add items that had previously been considered by Employment & People Committee.
- 15.3 It was noted that the final report would be presented at the first Board meeting following the AGM.
- 15.4 **The Committee noted the contents of the report.**

16. Forward Plan

16.1 The Director of Corporate Services advised members that the forward plan contained regular reports and annual reports.

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

17. Date and Time of Next meeting
Monday 30th October 2023 – 2pm

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