


SOLIHULL COMMUNITY HOUSING
BOARD MEETING

Monday 20 November 2023 at 6.15 pm
 Endeavour House - Meriden Drive, Kingshurst

AGENDA

Ref	Item	Purpose	Lead	Report Type	Report Classification
1	Chair's Welcome and Introduction	Information	Richard Hyde	Verbal	Open
2	Apologies for Absence	Information	Richard Hyde	Verbal	Open
3	Declarations of Interest	Information	Richard Hyde	Verbal	Open
4	Minutes of the Meeting held on 4 September 2023	Information	Richard Hyde	Written	Open
5	Action Log	Information	Richard Hyde	Written	Open
Strategic Topic					
6	Quarter 2 2023/24 Health and Safety Report	Assurance	Mark Wills	Written	Open
7	Quarter 2 2023/24 Financial Monitoring	Approval	Sam Gilbert	Written	Open
8	Draft Delivery Plan 2024/25	Assurance	Martyn Sargeant	Written	Open
9	Annual Review of Compliance against NHF Code of Guidance	Assurance	Martyn Sargeant	Written	Open
Confidential Items					
10	Chief Executive Update	Information	Fiona Hughes	Written	Confidential
11	Medium Term Financial Strategy Update	Approval	Sam Gilbert	Written	Confidential
12	OneSCH Update	Approval	Martyn Sargeant	Written	Confidential
Confidential Committee Reports					
13	Chair's Report from Housing Operations Committee held on 18 September and 6 November 2023	Information	Phil Hardy	Written	Confidential

14	Chair's Report from Audit & Risk Committee held on 25 September 2023	Information	Mark Thrasher	Written	Confidential
15	Chair's Report from Building Safety Committee held on 9 October 2023	Assurance	Richard Hyde	Written	Confidential
16	Chair's Report from Extraordinary Building Safety Committee held on 2 November 2023	Assurance	Richard Hyde	Written	Confidential
17	Chair's Report from HR, Equalities and Remuneration Committee held on 15 October 2023	Information	Richard Hyde	Written	Confidential
Items below this line are for receipt and/or approval, without discussion					
18	Quarter 2 2023/24 Performance Exception Report	Assurance	Becci Youlden	Written	Confidential
19	Forward Plan	Information	Richard Hyde	Written	Open
20	Any Other Business	Information	All	Verbal	Open
21	Review of Meeting	Information	All	Verbal	Open

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MINUTES

Present: Richard Hyde (Chair), Bernie Donnelly, April Halpin, Phil Hardy, Dave Pinwell, Gail Sleigh, Mark Thrasher, Louise Tubbs

Officers: Fiona Hughes – Chief Executive
Mary Morrissey – Director for Economy and Infrastructure
Darren Baggs – Executive Director of Operations
Martyn Sargeant – Executive Director of Customer Service, Transformation and Business Support
Becci Youlden – Head of Customer Experience
Carol Trappett – Head of Housing and Neighbourhoods
Karen Cranley – Finance Manager
Mark Wills – Health, Safety and Risk Manager
Sarah Brookes – Business Support Manager

1. CHAIR'S WELCOME AND INTRODUCTION

Richard Hyde, Chair, welcomed Councillor Mark Parker to his first Board meeting with SCH.

The Board thanked report authors for responses to the Board's pre-submitted questions.

2. APOLOGIES FOR ABSENCE

Apologies were received from Sam Gilbert and Nigel Page. Karen Cranley attended as a representative for Sam Gilbert.

3. DECLARATIONS OF INTEREST

There were no new declarations of interest.

4. MINUTES OF THE MEETING HELD ON 22 MAY 2023

The minutes of the previous meeting were approved as a true and accurate record.

5. ACTION LOG

The action log was reviewed and approved.

6. CHIEF EXECUTIVE UPDATE

Fiona Hughes, Chief Executive, presented the Chief Executive's update report. She particularly noted:

- The financial challenges will be a priority for the coming months, addressing pressures and stabilising the financial position. Mary Morrissey and Fiona are reviewing the HRA budget elements to identify opportunities for savings.
- She confirmed that we benchmark well against the services that we provide however to make additional revenue savings we would need to consider reducing service provisions, for example the Money Advice Service. This was previously discussed during the last meeting. The wider review of the housing delivery model may offer opportunities for greater collaboration/improvement and these will be considered during the review.
- A review of the savings plans and scoping of additional options to deliver savings over the medium term financial strategy period will be considered during the away day in October. **20230904-BOARD-001**
- Preparation for the introduction of the new social housing regulation framework continues and item 16 on the agenda sets out additional detail and the work in progress.

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- Work is being undertaken on gathering the TSMs to the correct methodology and assessment. Darren Baggs, Executive Director of Operations, provided an update about the water safety risk assessments to individual properties. We previously reported performance related to high risk, large scale, shared water situations (high rise with one tank supplying multiple properties) and hadn't included domestic situations. A review of our methodology/processes brought domestic water systems into scope. We are now adopting a risk based approach where domestic properties without stored hot water (i.e. those with combination boilers) would be deemed a lower risk than those with stored water in cylinders or header tanks. This will also be followed up with communication to our customers for good water management in their homes.
- Following the departure of the Head of Asset Management, we are experiencing some capacity issues in Asset Management where other vacancies in this area are compounding the issue. We are in the process of recruiting a new Head of Asset Management.
- Unfortunately, SCH has received an unfavourable determination from the Housing Ombudsman. We challenged the ruling on gas safety; however the Ombudsman has responded and we have accepted the findings. We are now reviewing the gas safety policy and are doing further work on our risk assessment processes. A detailed review will be undertaken by the Housing Operations Committee on 18 September 2023.
- Stage 1 of the structural survey project is complete and we are now undertaking intrusive investigations of each of the five different archetypes.
- A key priority is completion of the registrations for high-rise properties with the Building Safety regulator. This is resource intensive and impacting on the team however it is expected to be completed as required.
- SCH's Big Conversation is currently underway and this gives us the opportunity to understand our customers views and priorities for SCH. Learning from the Big Conversation will be shared with Board and used to help shape the next Delivery Plan. **20230904-BOARD-002**

Board raised questions about the findings from the Ombudsman and these were discussed. It was confirmed that the Ombudsman 'uphold rate' is increasing. Phil Hardy thought the Ombudsman considered 'fairness and reasonableness' of the events that occurred to be a higher priority than the context of legislation and the SCH policies and procedures. It is important that we learn from this decision and implement the areas for improvement to prevent any further maladministration decisions.

Fiona Hughes clarified the exceptional circumstances of this case and the significant health vulnerabilities of the tenant that led to the extremely challenging actions taken. The circumstances and collaborative working with multiple organisations/services contributed to the delay in dealing with the matter, resulting in the negative determination from the Ombudsman. The complaints policy has already been amended in accordance with the code of guidance and no further amendments were required.

The determination will be published on 13 September 2023 and we are in the process of preparing a media response. Martyn Sargeant, Executive Director of Customer Service, Transformation and Business Support, confirmed that he will be reviewing the response with the council. The Secretary of State has been writing to any council that receives a severe maladministration judgement.

The spandrel panel project has been put on hold following an issue with the current louvre design specification. Darren Baggs confirmed that we are working with the designer to ensure a more suitable panel is proposed and when this has been agreed, SCH will request building control approval.

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Board asked about the financial impact resulting from the work that has already been undertaken. It was confirmed that we are currently investigating the roles and responsibilities associated with this project. Board members will be updated about the outcomes, including financial impact and liability. 20230904-BOARD-003

DECISION

- (1) **NOTED:** the content of the report.

7. GOVERNANCE REVIEW

Martyn Sargeant presented a review on the governance elements of the Standing Orders. An additional amendment, under 11.3 of the Standing Order, was reviewed and agreed during the meeting. This completes an outstanding action for satisfying the requirements of the NHF Code of Governance. Following approval the Standing Orders, appendix one, will be amended to include the additional commentary.

Two typing amendments within the Governance review report were confirmed by Martyn Sargeant; the recommendations for the Board remained the same:

- 4.2 the health and safety champion is Phil Hardy
- 4.5 the Board co-optees are Mani Roberts and Paul Robinson

Mark Thrasher confirmed the two candidates, which the Board are recommended to co-opt, would help to strengthen the Audit and Risk Committee given their specific experience in housing, finance and governance.

DECISION

- (1) **APPROVED:** amendments to the Standing Orders (appendix A) including an additional amendment under 11.3:
‘This would include where a member has concerns about SCH that he or she has been unable to resolve, in order that those concerns can be shared with the Board and formally accepted’.
- (2) **AGREED:** that the Building Safety task and finish group should become a permanent committee and approve the draft terms of reference (appendix B).
- (3) **CONFIRMED:** the committee membership, making any changes required.
- (4) **AGREED:** the co-option of Mani Roberts and Paul Robinson to the Audit and Risk Committee.
- (5) **AGREED:** the extension of Louise Tubbs’ tenure for a further period of 12 months beyond her completed two terms of office.
- (6) **NOTED:** the record of Board members’ meeting attendance, declarations of interest and expenses claimed for 2022/23 (appendix C).
- (7) **APPROVED:** the annual governance statement (appendix D).

8. HEALTH AND SAFETY REPORT: APRIL - JUNE 2023 (QUARTER 1)

Mark Wills, Health, Safety and Risk Manager, provided an update on the legislative changes and guidance in Appendix 1 and the accident/incident reporting analysis for quarter 1 2023/24. He particularly noted:

- The key areas of health and safety support provided to SCH.

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- Following a review of SCH service areas an audit schedule has been agreed, starting with the Out of Hours Service, Capital Projects and the Contact Centre.
- There has been a reduction in the overall number of incidents reported in quarter one. There is no significant reason for this and it may be due to under-reporting. We are trying to identify the barriers for near miss reporting and reminding managers and staff about the importance of reporting all incidents, accidents and near misses.

Board members confirmed the desire to see an increase in the near miss reporting and how the results of accident investigations are being used to influence prevention. Mark Wills acknowledged the comments from Board members and future reports will include information about what has been implemented following incident reporting. This will provide further assurance to the Board. **20230904-BOARD-004**

Phil Hardy asked for an update following a falling tree branch striking a person and whether any of our buildings have roofs, floors, cladding or walls made of Reinforced Autoclaved Aerated Concrete (RAAC).

Darren Baggs clarified all tree management stock on housing land is managed by SMBC and they have a corporate risk detailing the mitigating actions to be undertaken. Mark Wills confirmed that the forestry service responded to the incident reported to SCH and there were no H&S concerns.

Following the government announcement about the concerns associated with RAAC, we are working with the council, reviewing the archetypes of our building construction and identifying through stock databases if any further assessments need to be undertaken.

DECISION

- | | |
|-------------------|---|
| (1) NOTED: | the content of the report. |
| (2) NOTED: | Appendix 1 – Legislative Update |
| (3) NOTED: | Appendix 2 – HSRS Health and Safety Support Summary: Q1 2023/24 |

9. ANNUAL RISK MANAGEMENT REPORT

Mark Wills presented the annual update on SCH's corporate risk register and its risk management arrangements for the financial year 2022-23.

The Audit and Risk committee and the ELT review the risk reports each quarter (last reviewed on 3 July 2023 and 18 July respectively) and gain assurance that corporate risks and any high risks are being adequately managed.

It was confirmed that there were currently no corporate net red risks, the total number of corporate risks remains at 9 and one operational net amber 8 risk (insufficient temporary accommodation to meet specific needs). These are being closely monitored by the ELT.

Mark Thrasher identified that financial risk does not appear in the top five and believes this should be elevated. Fiona Hughes confirmed we are reviewing the SCH corporate risks and this will be incorporated into the review. This will be reported to the Audit and Risk (A&R) Committee.

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DECISION

- (1) NOTED:** the information produced regarding SCH's identified corporate risks and, if it felt appropriate comment on any additional risks or mitigating factors that should be reflected in the corporate risk register.
- (2) NOTED:** the information regarding SCH's risk management arrangements and if it is felt appropriate comment on any additional steps that should be taken to make the approach more robust.

10. STATUTORY ACCOUNTS 2022/23

Mark Thrasher confirmed the SCH auditors attended the last Audit and Risk (A&R) committee meeting on 3 July 2023 and presented their formal report. He reported the pleasing outcome of the audit: we have a 'clean bill of health' with some low level recommendations. A&R recommended the statutory accounts 2022/23 are approved by the Board.

Mark Thrasher would like to highlight the letter of representation and as a Board we need to note the content of the letter. The Board noted the excellent work undertaken by Finance and gave thanks for their hard work.

DECISION

- (1) RECEIVED:** the SCH 2022/23 statutory accounts.
- (2) NOTED:** the reconciliation between the statutory accounts and management accounts as requested by the Audit and Risk Committee at their meeting on 3 July 2023 (paragraph 4.6).
- (3) APPROVED:** the 2022/23 statutory accounts as recommended by the Audit & Risk Committee at their meeting on 3 July 2023.
- (4) APPROVED:** the letter of representation as recommended by the Audit & Risk Committee at their meeting on 3 July 2023.
- (5) AUTHORISED:** the Chair to sign the statutory accounts and letter of representation on behalf of the Board as recommended by the Audit & Risk Committee at their meeting on 3 July 2023.

11. FINANCIAL OUTTURN 2022/23

Karen Cranley, Finance Manager, updated the Board on the financial outturn for 2022/23 for capital and revenue within SCH and for the HRA.

A discussion took place following a query by Board about the 'Forecast Reserves Balance as at 31/3/2025'. Karen Cranley confirmed the £4,234m is the total value of all reserves held as at 25/26, whereas the £1.894m at the end of 22/23 related to uncommitted reserves only and excluded the £1.5m minimum working balance.

The overspend on the Private Sector Adaptations capital programme is funded from the Council's general fund and this does not impact on SCH budgets.

The Board expressed concern at the diminishing level of reserves and stressed the importance of due diligence before agreeing the use of reserves. Fiona Hughes confirmed this goes back to an earlier point that she raised about the strategic work that is underway to identify ways of collaborating with the Council to protect the housing service.

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DECISION

- (1) **NOTED:** the revenue and capital outturn for SCH for 2022/23.
- (2) **NOTED:** the age of outstanding Accounts Receivable Debt.
- (3) **NOTED:** the HRA outturn for 2022/23
- (4) **NOTED:** the end of year reserves position.
- (5) **NOTED:** the utilisation of £134,000, previously approved, use of the earmarked Restructure Reserve (paragraph 4.13).

12. FINANCIAL MONITORING AND FORECAST - JUNE 2023 (QUARTER 1)

Karen Cranley provided an update on the forecast financial performance as at 30 June (Quarter 2). She particularly noted:

- The forecast outturn for compliance as at July 2023 had improved by £61k to an overspend of £320k.
- The £658k overall overspend forecast at June 2023 increased to £774k overspend forecast at July 2023.

Mark Thrasher asked how we can generate more income and make savings by reducing non-statutory services. Fiona Hughes explained that we are not currently seeking to do this until we have completed the wider review of the housing delivery model and the actions already reported in her update under item 3.2 (agenda item 6).

Richard Hyde confirmed the away day on 3 October will be an opportunity to review, in detail, the financial position and what is within the Board's power to influence and control. The findings of the external review of the housing revenue account will be considered at the away day.

Phil Hardy, on behalf of the Board, requested some additional analysis of the overspend so that they can understand whether it is volume driven, cost driven or a combination of the two. Fiona Hughes explained that additional analysis is currently underway through Darren Baggs. Unfortunately, the resource issue in Asset Management has delayed this work however this is a primary focus and year end forecasts will be adjusted where there is an opportunity to do so. **20230904BOARD-005**

DECISION

- (1) **NOTED:** the revenue and capital forecast to the year end for the current financial year 2023/24.
- (2) **NOTED:** the current and forecast reserves position.
- (3) **NOTED:** the progress of savings delivery for the next three years.
- (4) **NOTED:** the age of outstanding Accounts Receivable and Rent D
- (5) **APPROVED:** the utilisation of £40,000 of the earmarked Restructure Reserve (paragraph 4.5).

13. BUDGET STRATEGY REVIEW 2024/25 TO 2026/27

The report detailed the draft HRA budgets for the four year period 2024/25 – 2026/27 including a timetable outlining the financial process over the coming year.

Karen Cranley confirmed a further report will be received by Board on 20 November 2023 detailing the 2024/25 operating budget and SCH rents.

An update was provided to Board members following a pre-submitted question by Mark Thrasher about the uncertainty of the CPI figure and if we can use a more stable

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assumption figure. Karen Cranley acknowledged the budget strategy, as reported, is based on CPI + 1%, which is below 7% for 2024/25. However, following conversations that the Chief Finance Officer has had with DLUHC, the budget strategy will be based on 7% thereby adding approximately £290k into the management fee from 2024/25.

Generally, the SCH budgeting is based on the same OBR inflation factors used by SMBC and we are in discussions with Council colleagues to consider different inflation factors for our next update of the budget.

The minimal increases to the management fee were noted and the Board agreed the current review of the financial position is critical to identify savings and offset the budget pressures.

DECISION

- (1) NOTED:** the outline HRA budgets for 2024/25 – 2026/27
- (2) NOTED:** the indicative SCH Management fees for 2024/25 of £22.241m, 2025/26 of £22.549m and 2026/27 of £22.578m
- (3) RECEIVED:** a further report for the detailed 2024/25 SCH operating budget on 20 November 2023 for approval.
- (4) NOTED:** the SCH reserves position.
- (5) NOTED:** the actions to be taken for the next SCH Board Budget report.

14. CHAIR'S REPORT FROM AUDIT AND RISK COMMITTEE MEETING - 3 JULY 2023

Mark Thrasher particularly mentioned the review undertaken during the meeting of the statutory accounts, letter of representation and the governance statement. The audit plan is on track and it was agreed that we need a succession plan, building on our own resources instead of relying on agency staff. Martyn Sargeant confirmed that a new Organisational Development Lead has started and this will be an action for her to consider.

DECISION

- (1) NOTED:** the matters considered by the Committee

15. CHAIR'S REPORT FROM BUILDING SAFETY TASK & FINISH GROUP MEETING - 10 JULY 2023

Richard Hyde confirmed the FRA remedial actions will be reviewed in detail during the next meeting on 9 October 2023.

DECISION

- (1) NOTED:** the matters considered by the Task and Finish group.

16. REGULATORY COMPLIANCE UPDATE

DECISION

- (1) NOTED:** the update on preparation for changes to regulation in the social housing sector.

17. QUARTER 1 PERFORMANCE REPORT 2023/24

DECISION

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- (1) NOTED:** those indicators and the associated narrative, where the target performance has not been achieved.

18. ANNUAL REVIEW AGAINST CODE OF GOVERNANCE FOR COMPLAINTS

DECISION

- (1)NOTED:** the outcome of the self-assessment against the Housing Ombudsman Code of Guidance and arrangements to ensure full compliance.

19. BOARD/COMMITTEE DATES FOR 2023/24

DECISION

- (1)NOTED:** the Board and Committee dates for 2024.

20. FORWARD PLAN

The forward plan was noted and the financial reporting was added.

21. ANY OTHER BUSINESS

There were no items raised.

22. REVIEW OF MEETING

Mark Thrasher offered his assistance to work with Fiona Hughes and Sam Gilbert to simplify the reporting of financial figures.

Mary Morrissey gave her assurance that she is working collaboratively with SCH regarding the HRA and general funds to stabilise the financial position.

DATE OF THE NEXT MEETING (AGM): 20 November 2023 at 6pm.

Signed by Chair: Date:

7.54 pm

Board Action Log

Green = completed and will be removed from next log and a record is kept by the Governance Team

Amber = in progress due to be completed by due date

Red = not completed or unlikely to be completed by due date

Items not yet due do not have a colour code

Actions outstanding / in progress / completed

Ref	Action	Responsible Person	Due Date	Comments	Status
20230904-BOARD-001	Update the Board following the review of savings plans and scoping of additional options to deliver savings over the medium term financial strategy period.	Fiona Hughes	20.10.23	Included in the finance report – Item 9 ‘Medium Term Financial Strategy Update’.	Green
20230904-BOARD-002	Feedback on the Big Conversation Findings	Becci Youlden	20.10.23	Included in the Chief Executives update.	Green
20230904-BOARD-003	Spandrel Panel project – provide an update to Board following the review of the roles and responsibilities associated with this project (including financial impact and liability).	Darren Baggs	20.10.23	Extraordinary meeting of the Building Safety Committee arranged for 2 November. Also included in the Chief Executives update.	Green
20230904-BOARD-004	Future Health and Safety reports to include information about what has been implemented following incident reporting.	Mark Wills	20.11.23	Noted and will be included in future reports.	Green
20230904-BOARD-005	Provide additional commentary regarding the financial overspend in Asset Management so that	Darren Baggs	20.11.23	Included in the finance report - Item 9 ‘Quarter 2 2023/24 Financial Monitoring’.	Green

	Board can understand whether it is volume driven, cost driven or a combination of the two.				
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13/11/23

Meeting of the Board



Report title: Health and Safety Quarterly Report: July - Sep 2023 (Quarter 2)

Meeting date: 20 November 2023

Report from: Mark Wills SMBC Health, Safety & Risk Manager

Report author/ Dan Dalton SMBC Senior Health and Safety Advisor

lead officer: 07467688389 dan.dalton@solihull.gov.uk

Report type: Open

Decision type: Assurance ~~Approval~~ Information

1. Report overview/purpose

- 1.1. The purpose of this report is to provide SCH Executive Leadership Team (ELT) and Board with an update on legislative changes and guidance, corporate health and safety activity, any areas of specific concern and recommendations for improvement.
- 1.2. The SCH Board, Chief Executive and ELT have overall accountability and responsibility for ensuring the effective management of health and safety within SCH. The success of the Health and Safety Management System in place relies on the commitment, engagement and support from all levels of managers and employees in the organisation.
- 1.3. The SMBC Health, Safety & Risk Service (HSRS) role is to provide health and safety competent assistance, advice and guidance to help the SCH Leadership Team to fulfil their health and safety responsibilities.

2. Recommendations

The Board is recommended to:

- (i) **NOTE the contents of this report.**
- (ii) **NOTE Appendix 1** - Legislative update.
- (iii) **NOTE Appendix 2** - HSRS Health and Safety Support Summary: Q2 2023/24.
- (iv) **NOTE Appendix 3** - Accident/Incident Reporting Analysis Q2 2023/24.

3. Background/context

The SCH Board holds ELT accountable for the effective management of health and safety. Quarterly health and safety performance reports assist with this by providing key information on how SCH are managing health and safety for employees, agency staff and contractors, and residents. Key areas for measuring health and safety performance include accident and incident reporting data, audits, inspections and levels of training and risk assessments completed.

4. Matters for consideration

- 4.1 **Regulatory Interventions:** There were no Health and Safety Executive (HSE) visits made to SCH at the time of writing this report or any regulatory interventions this quarter.
- 4.2 **Legislative/Guidance Updates:** A legislative update has been provided in Appendix 1.
- 4.3 **Building Safety Compliance:** A number of health and safety working groups and committees are in place to oversee building safety compliance in SCH. This includes the Building and Resident Safety Group and Capital Project Board (Officers) and the Building Safety Committee (Board Members). SMBC also have a separate Building Safety Assurance Board in place which is led by the Director of Economy and Infrastructure who fulfils the role requirements of the Principal Accountable Person role under the Building Safety Act (on behalf of the Council as the overall accountable body).
- 4.4 The Head of Building Safety in SCH produces a building safety performance and assurance report to provide an update on compliance actions and adherence to the Building Safety Act (including secondary legislation being introduced).
- 4.5 **Health, Safety & Risk Service (HSRS) – SMBC:** The SMBC Health, Safety and Risk Service continue to provide professional health and safety support to SCH. The two principal contacts are Mark Wills, Health, Safety and Risk Manager, and Dan Dalton, Senior Health and Safety Advisor. Operational support is also provided, where required, by Bruce Joubert and Sharon McDermott, Health and Safety Advisors.
- 4.6 The support provided by HSRS includes:
- Providing health and safety competent advice
 - Assisting with and reviewing risk assessments, policies and other documents.
 - Attending site meetings following identification of potential health and safety issues

- Face-to-face drop-in sessions and briefings
- Support with assigned health and safety actions arising from the occupational health and safety plan, audits, accident investigations or ad-hoc.
- Attending and contributing to health and safety related meetings at all levels, both internal and external.
- Monitoring incident and accident investigations
- Carrying out health and safety inspections and audits.
- Delivering training.

4.7 A more detailed summary of support is provided in Appendix 2.

4.8 **Occupational Health and Safety Management Audits:** The audit process began in Quarter 2, starting with Out of Hours Service, Capital Projects and the Contact Centre. At the early stages of the Out of Hours audit, it was discussed that there was little adherence to a health and safety management system or procedures and that SCH did not see a benefit in continuing with a full audit. As a result, the Audit Services review report on SCH Out of Hours operations dated 30th March 2023 (ref. 4913-22.23) has been used as a basis for information and a report is currently being drafted to identify actions that should be considered to improve health and safety compliance within the service area. The 3 reports are likely to be drafted by end of October. Early indications show the Out of Hours service has health and safety matters that require urgent attention, and Capital Projects and the Contact Centre are generally satisfactory, however, require improvement in some areas.

4.9 **Escalation process:** Issues and concerns raised from the relevant health and safety groups have a formal escalation process to the ELT Safety Leadership group.

4.10 **Accident/Incident Reporting Analysis Q2 2023/24:** The generic term incidents include all accidents, abuse, near misses, fire and any other health and safety related incident reported on the online reporting system, Assure.

4.11 Quarter 2 2023/24 saw a similar number of incidents reported as the previous quarter, 21 compared to 22 reported last quarter. The range of incident type was smaller regarding tenants, where all reported incidents were 'accidents' this quarter, with no reported abuse/violence incidents or fire incidents.

4.12 It was encouraging to see that there were no RIDDOR reported incidents this quarter.

4.13 Reported incidents involving staff/agency workers/contractors doubled compared to the previous quarter, however, the previous quarter statistics were low, so this quarter is more typical. 7 of the 8 incidents involved employees and the other was an agency worker. 5 of the 8 incidents were work-related and it was deemed that further preventative action could have been taken to help prevent these. For example, a near miss involved cutting through a live cable beneath floorboards, and following an

investigation, testing for live cables prior to works does not appear to have been included on the risk assessment. Out of the 8 incidents involving staff/agency workers/contractors, there were 5 accidents, 2 near misses and 1 report of verbal abuse. It was positive to see near miss incidents being reported following previous communications and this behaviour should be praised and encouraged by management. As per the previous quarter, it was noted that no verbal abuse incidents were reported by employees working from an office-based location in the quarter despite regular conversations and reminders being issued about the importance of reporting incidents. It is therefore advised that a further reminder is issued to staff and managers.

- 4.14 All tenant incidents reported to SCH are recorded on the online system. This can mean that not all incidents reported involved a fault or were in connection with SCH's work activities. Complex incidents often need investigating to establish the root cause or to determine if the incident occurred at all. Further information is included in the accompanying appendices.
- 4.15 There were 13 tenant reported incidents this quarter, a lower figure than the previous quarter, which is encouraging. These were all accidents.
- 4.16 Out of the total of 13 tenant incidents reported this quarter, 2 incidents were deemed to be work related, as the condition of the premises where the accident happened was a result of SCH activity.
- 4.17 11 of the 13 tenant incidents reported do not appear to be a direct result of SCH work activity, including 11 slips, trips and falls incidents and 1 tenant being struck by a falling cupboard door.
- 4.18 A full breakdown of incidents is attached in Appendix 3.

5. Supporting the SCH Delivery Plan

- 5.1 Improving health and safety compliance within SCH helps ensure staff and residents are safer and morale is improved, legal action is avoided and adverse financial implications are reduced. This enables individuals and SCH as an organisation to be more resilient and fulfil the goals of the Delivery Plan.

6. Consultation and engagement

- 6.1 This is an update report and therefore consultation is not appropriate with customers. Stakeholders are consulted regularly at scheduled SCH Health and Safety meetings at all levels and this helps shape the content and direction of this report.

7. Financial implications

- 7.1 Failure to comply with Health and Safety legislation can be costly. Direct costs include calculable costs arising from accidents or enforcement action e.g. sick pay, repairs, fines and legal fees, and indirect costs include lost time, distraction costs, reduction in productivity.

8. Legal implications

- 8.1 The Health and Safety at Work, etc. Act 1974 and regulations made under it ensure that organisations who are not compliant can face preventive, punitive and compensatory actions. This can be through criminal or civil courts, or both.

9. Risk implication

- 9.1 SCH have a risk management system which includes corporate and operational level risks, including health and safety risks. Action is taken where necessary, which along with current good practice will reduce risk in terms of safety, legal and financial.

10. Equalities implications

- 10.1 Equality and diversity are routinely considered by SCH when dealing with health and safety issues, for example when assessing suitable storage areas for mobility scooters.

11. List of appendices

Appendix 1 - Legislative/Guidance Updates

Appendix 2 - HSRS Health and Safety Support Summary: Quarter 2 (July – Sept 2023).

Appendix 3 - Incident/Accident/Near Miss Reporting Analysis Quarter 2 2023/24
July – Sept 2023

12. Background documents

N/A

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Legislative / Guidance Updates – October 2023

1. Building Safety Regulator (BSR) is now the Building Control Authority (BCA)

- 1.1. From 1st October 2023, the BSR became the Building Control Authority for higher-risk buildings and responsible persons must now submit their building control approval applications to the BSR. The BSR will have the authority to determine the requirements for those who procure, design, plan, manage and undertake building work. The Health and Safety Executive (HSE) have also introduced new enforcement powers for building control authorities.
- 1.2. The BSR will carry out its function as the BCA through multi-disciplinary teams (MDTs) that include a registered building inspector and any other specialists required to assess a submission.

2. Registration deadline for existing high-rise residential buildings in England has now passed

- 2.1. All existing high-rise residential buildings in England should have officially been registered by 1st October 2023. The registration service can still be used to register new in-scope buildings in line with current guidance.
- 2.2. Principal Accountable Persons (PAP) were given six months from April 2023 to register all high-rise residential buildings in England, that are 18 metres or higher or seven storeys or more with at least two residential units with the BSR.
- 2.3. Those responsible for registering buildings who have missed the deadline could now face significant sanctions, including prosecution.

3. BSR charging scheme 1 October 2023 published

- 3.1. The Building Safety (Regulators Charges) Regulations 2023 and the first BSR charging scheme came into force on 1st October 2023, enabling cost recovery, a key element of BSR's funding.
- 3.2. The Building Safety Act 2022 and Building Act 1984 give the powers for the BSR to make and recover charges in connection with the performance of a

relevant function. The charges and how they are to be calculated are as set out in the following link: [Charging scheme - Building safety - HSE](#)

4. BSR has approved the Building Control Competency Assessment (BCCA) scheme

- 4.1. The scheme has been provided by Total Training Development Ltd. Competence assessments are the first step in becoming a registered building inspector. Under the Building Safety Act, 2022 all building control professionals will need to be registered by April 2024 to continue working in the profession.

5. The Government publishes guidance on understanding and addressing the health risks of damp and mould in the home

- 5.1. The Secretary of State, Michael Gove, has written to all providers on damp and mould. The guidance can be found at: [Understanding and addressing the health risks of damp and mould in the home - GOV.UK \(www.gov.uk\)](#)

5.1. The Department for Levelling Up, Housing and Communities (DLUHC) publishes outcome of review

- 5.2. The DLUHC has published the outcome of the review and operation of the Housing Health and Safety Rating System (HHSRS). The review can be found at: [Summary report: outcomes and next steps for the review of the Housing Health and Safety Rating System \(HHSRS\) - GOV.UK \(www.gov.uk\)](#)

- 5.3. The key changes are:

- To make the assessment process more efficient for local authorities and more accessible to landlords and tenants, some hazards will be amalgamated, reducing the total number from 29 to 21, and produce a simpler means of banding the results of HHSRS assessments.
- To make it easier for landlords and tenants to understand the system, baselines will be published that can be used to make an initial assessment of whether a property contains serious hazards (e.g. 'stairs must be safe, secure, in sound condition, free of defects and projections, well maintained'). These do not replace the whole risk assessment but are easier to understand.

- To ensure assessments are consistent, quick and a solid base for effective enforcement, new statutory operating and enforcement guidance, a comprehensive set of new case studies, and specific tailored guidance for all stakeholders will be published. Suppliers also carried out analysis of digital assessment, setting out how this should be interlinked with existing databases, and reviewed training requirements and competency frameworks.
- To make sure the risk of fire in tall buildings can be assessed effectively (following the Grenfell tragedy), it is recommended that the 'Fire' hazard is amalgamated with 'Explosions in Dwellings'. The 'relevant matters affecting likelihood and harm outcome', as listed in the operating guidance, will then be updated with specific minimum standards which were field tested and found to mitigate 90% of significant fire hazards.

6. Building Safety Act: 1st October 2023 regulations

- 6.1. A further round of supporting regulations and provisions of the Building Safety Act 2022 came into force on 1st October 2023.
- 6.2. Building Assessment Certificate (Regulation 3): The BSR may now direct a PAP to apply for a Building Safety Certificate. The Certificate is intended to give residents an indication that the Building Safety Regulator has assessed that the APs have met the specified statutory requirements for managing any building safety risks and maintaining a safe building at the time of the assessment. The PAP must apply for the Certificate within 28 days, beginning with the day on which the direction was given.
- 6.3. Management of Building Safety Risk (Regulation 4): APs must take all reasonable steps to prevent a building safety risk from materialising (as soon as reasonably practicable after an HRB becomes occupied or they become an AP) and prevent a safety risk from materialising and reduce the severity of any incident should such a risk occur, by managing such risks. There is currently no clear guidance as to what the obligations are.
- 6.4. Safety Case Reports (Regulation 5): A PAP for an occupied HRB must prepare a safety case report containing an assessment of building safety risks and providing a brief description of any steps taken to manage such risks (section 85). PAPs are then under an obligation to notify the regulator of the safety case

report and provide a copy of the same to the regulator if requested (section 86). There is currently no set template for a safety case report, however, regulation 5 sets out the information a PAP must include in such a report. This includes:

- The possible building safety risks that have been identified, the likelihood of those risks materialising and the assessment of the likely consequences if they do materialise.
 - How the steps taken by each AP demonstrate compliance with their obligations (under section 84).
 - The system for managing the safety of the building.
 - The emergency plans which are in place for the building.
- 6.5. Mandatory reporting requirements (Regulation 6): Regulation 6 sets out the “prescribed information” APs must supply when an incident or situation concerning the structural integrity of an HRB or fire spread has occurred. The Act and regulations refer to such an incident as a “safety occurrence”. Reporting requirements include both a notice that the safety occurrence has taken place, followed by a report containing more detail. The responsibility for reporting safety occurrences rests with the AP. The DLUHC has admitted that sufficient guidance and information is not in place to enforce this yet for occupied HRBs, but this will be provided at some point ‘this Autumn’.
- 6.6. Enforcement (Regulations 13 and 14): Contravention and compliance notices are aimed at enforcing compliance with the various requirements for HRBs.
- Contravention notices are issued by the AP and are served on residents in breach of the residents' duties (set out in section 95 BSA).
 - Compliance notices are issued by the BSR where it is felt the recipient is failing to meet the “relevant requirements” imposed by the BSA and regulations.

Appendix 2 - HSRS Health and Safety Support Summary: Quarter 2 (Jul-Sept 2023).

The following is a summary of key areas of health and safety support provided by HSRS to SCH during Quarter 2 (July-September 2023).

- Support and was provided before and during remediation work following the discovery of structural issues in the biomass plant room at Bangor House, including identifying risks, monitoring contractors and reviewing contractor risk assessments and method statements.
- Creating and delivering 4 risk assessment workshop sessions, including a practical risk assessment exercise and Assure training.
- Providing in person DSE support and assistance on site to enable correct setup of workstations.
- Following a Work at Height Incident, support and assistance was provided and a Working at Height Procedure and Risk Assessment were produced for Responsive Repairs. eLearning Working at Height Training was also provided.
- To assist with the completion of the Occupation Health and Safety Plan Actions on Assure, the actions have been addressed individually, communications sent out on how to complete the action and support provided where requested.
- Audits were carried out of the capital projects team and the contact centre. These included site visits, face-to-face meetings and desk top studies.
- A health and safety induction session was delivered as part of a wider SCH induction.
- Support has been provided regarding interpretation of the legislation concerning the building registration process and inputting of Key Building Information following the Building Safety Act 2022.
- A checklist was produced to assist the Responsible Person in discharging their duties relating to the safety of high-rise buildings (HRBs) within the social housing stock.
- Support and advice was provided following the damage to defective spandrel panels in Keele House, including a face-to-face site visit to discuss immediate action.
- Assure training sessions have been delivered as requested to train managers in the use of the health and safety management software.

- A sharps toolbox talk was created, which was delivered at the Estates team meeting.



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Incident/Accident/Near Miss Reporting Statistics

Quarter 2 2023/24
July – September 2023

The following statistics include:

- Work related incidents to employees, agency staff and others.
- Resident safety - Incidents reported by residents.

Introduction

An incident is considered to be 'work-related' if any of the following played a significant role;

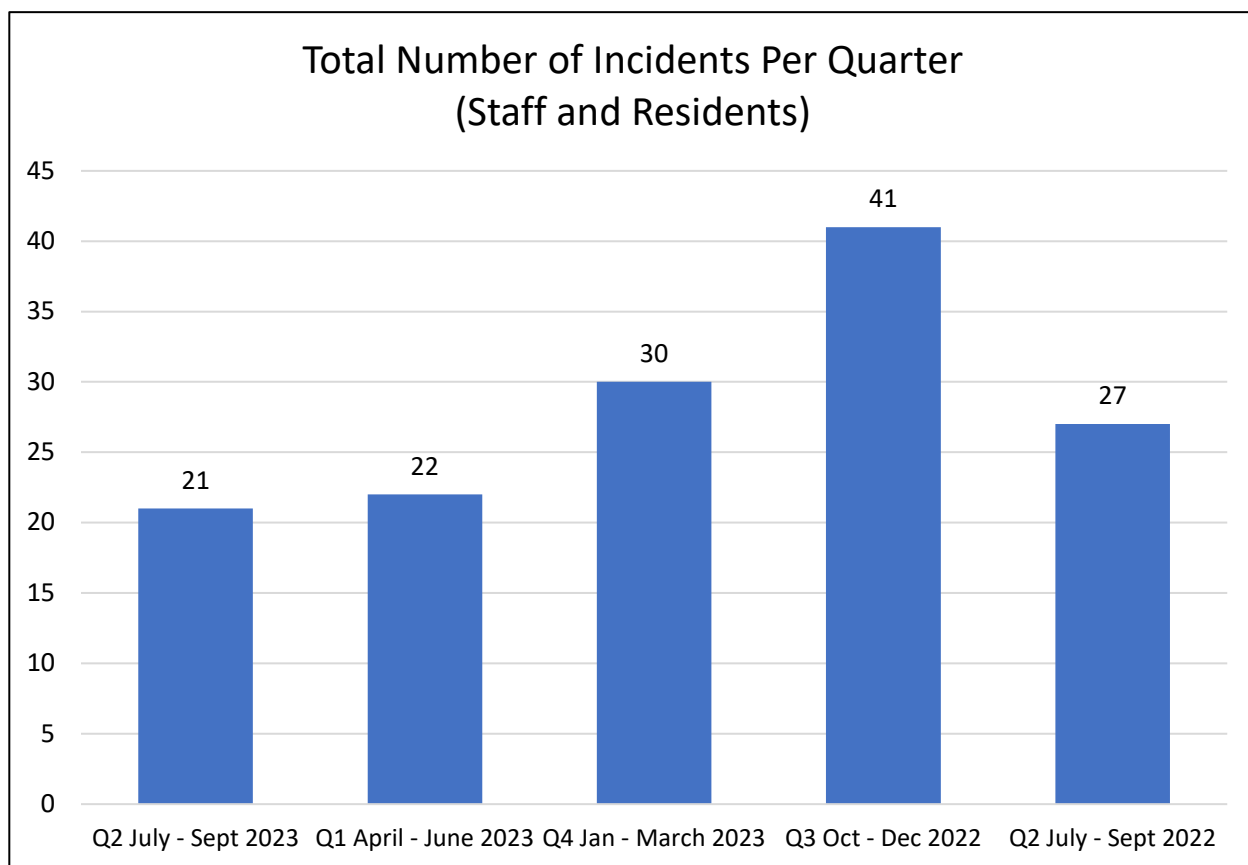
- the way the work was carried out;
- any machinery, plant, substances or equipment used for the work or
- the condition of the site or premises where the incident occurred.

Certain types of incident are reportable to the Health and Safety Executive (HSE) under the **Reporting of Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR)**.

Incidents is a collective term and are categorised into 6 categories, see table below:

Type of Incident Recorded	Definition of Incident
Accidents	<ul style="list-style-type: none">• Any unplanned event that results in injury or ill health to employees and tenants, where SCH has responsibility for cause of accident.
Near Miss Events	<ul style="list-style-type: none">• Any unplanned event that did not result in injury, illness or damage but had the potential to do so whether or not as a result of compensating action.
Violent / Abusive / Behavioural Incidents	<ul style="list-style-type: none">• Any incident in which a person is abused or threatened either physically, verbally or in writing or assaulted in circumstances relating to their work.• Any incident involving the behaviour of an adult or customer in a social housing or care setting where an employee is injured.
Diagnosed Occupational Diseases	<ul style="list-style-type: none">• Specified Diagnosed Occupational Diseases (Reportable under RIDDOR) contracted directly through work related activities.
Fire or Property Related Incidents	<ul style="list-style-type: none">• Any fire or property related incidents including security, vandalism, collapse or failure of building structure or equipment damage.• The exposure of hazardous substances / materials under COSHH (The Control of Substances Hazardous to Health Regulations) including asbestos or legionella.
Environmental Incidents	<ul style="list-style-type: none">• Any incident which solely impacts on the environment. This includes discharge, drainage or damage to flora or fauna and spillages.

Total number of Incidents Reported by Quarter



Headlines Q2 2023/24:

- There was a total of 21 incidents reported this quarter, a similar figure to the previous quarter.
- 8 incidents involved employees, agency staff and others.
 - 5 accidents
 - 1 Abuse/Threat/Violent Incidents
 - 2 Near misses
- 13 incidents were reported by tenants, lower than the previous quarter. All 13 were accidents.
- 2 of the 13 tenant related incidents were deemed to be work related and that further preventative action could have been taken to help prevent these.
- 5 of the employee/agency/other incidents were work related and it was deemed that SCH could have done more to prevent 3 of these.



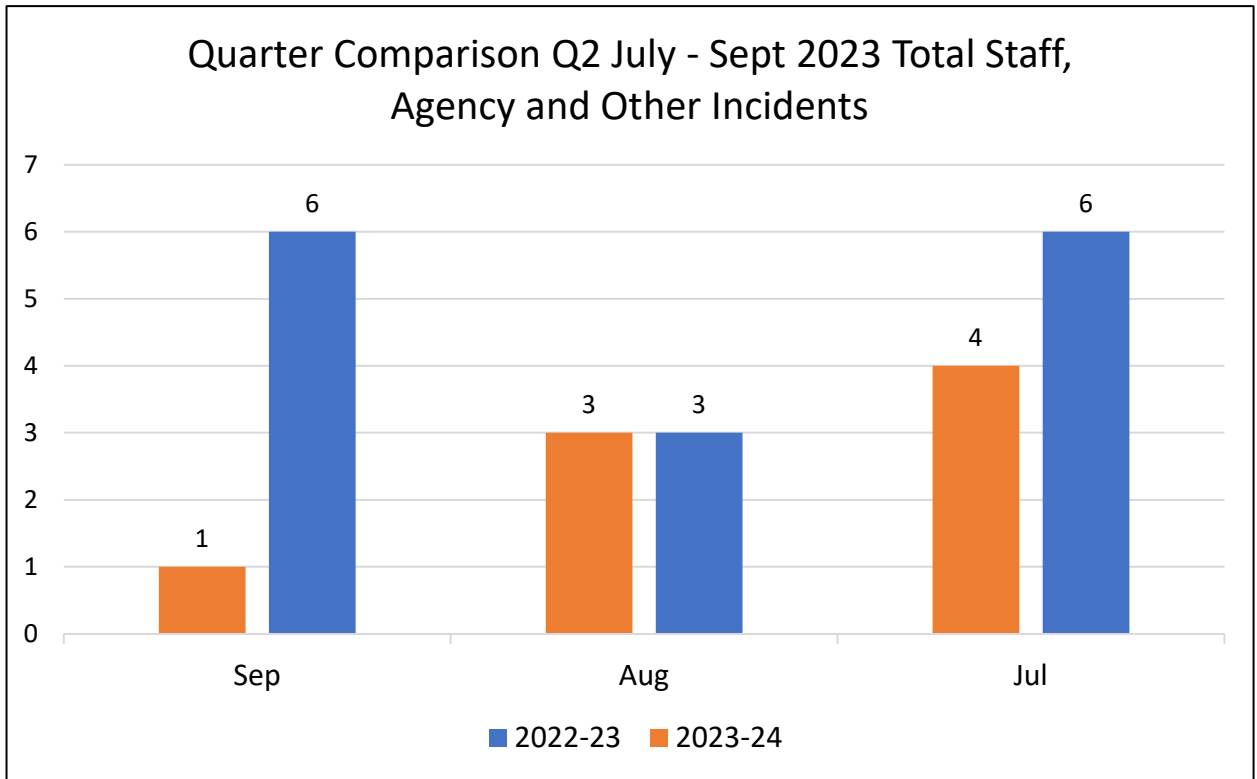
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Occupational Health and Safety

**Incident Statistics for Employees, Agency Staff and
Others**

Quarter 2
July – September 2023

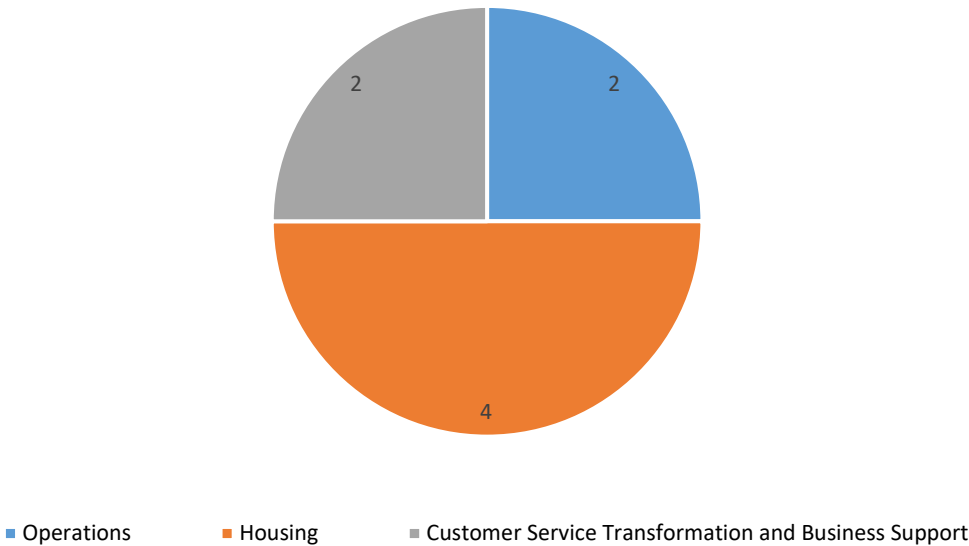
Rolling Total of Incidents



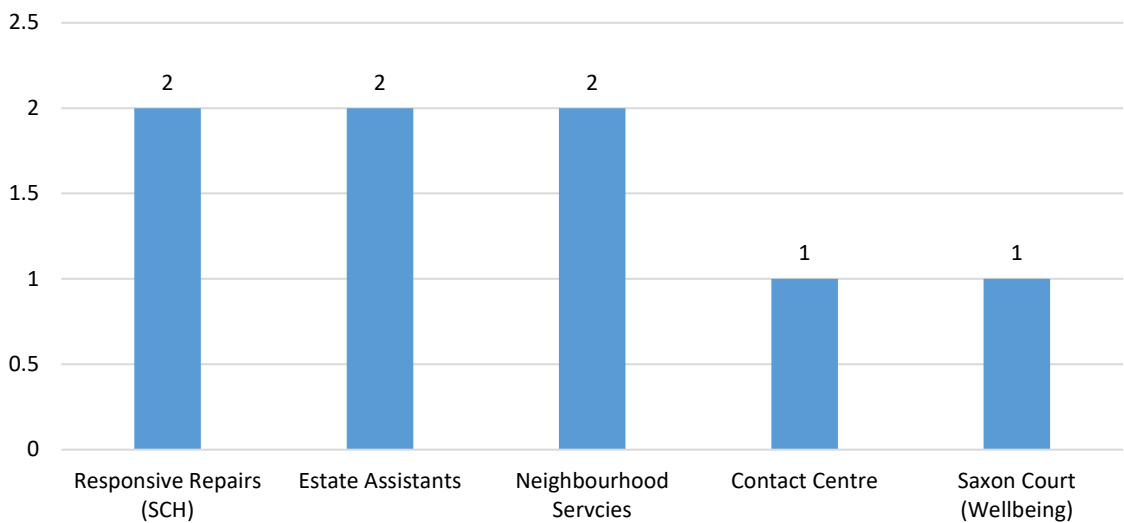
- The graph above compares this quarter with Q2 2022/2023

Employee/Agency and Other Incidents

Number of Incidents Per Service area



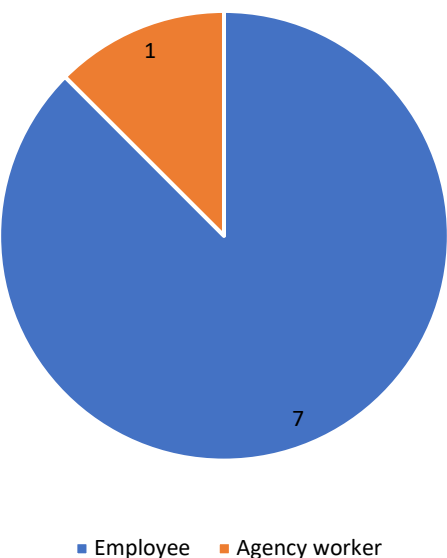
Q2 2023-24 Breakdown per Area



The above charts shows a breakdown of employee, agency staff and other incidents by Service Area/Team this Quarter. A total of 8.

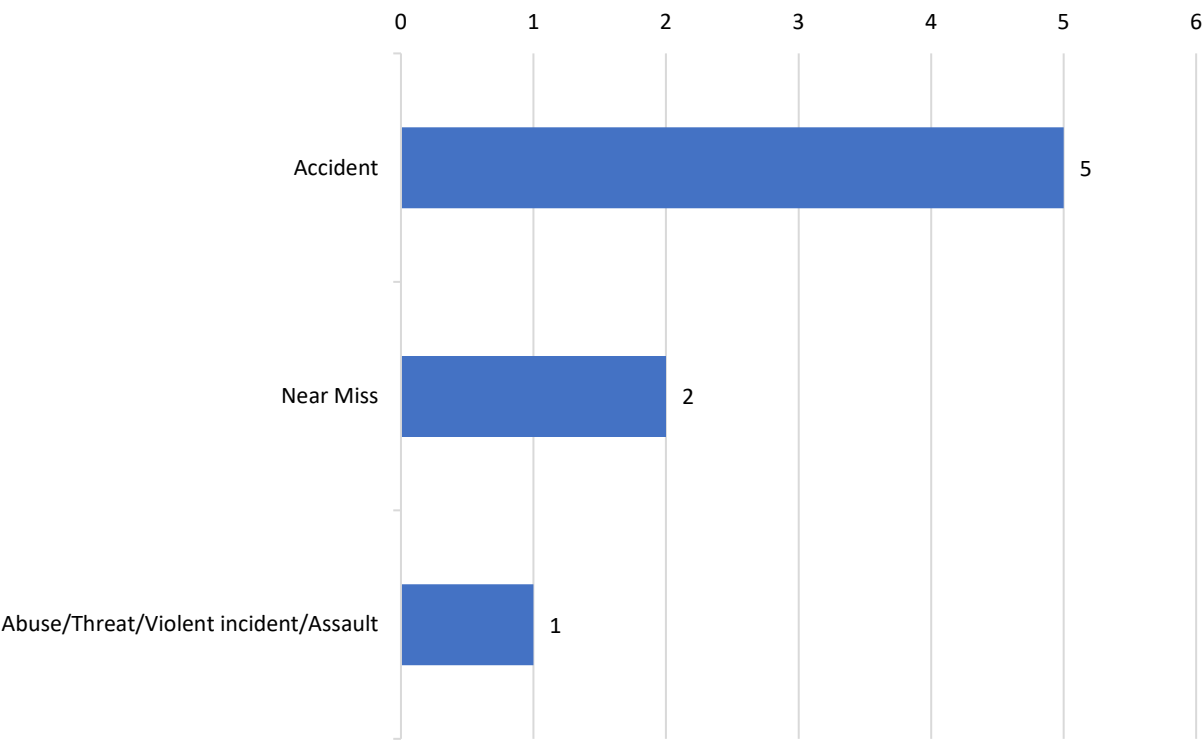
Person Involved and Type of Incident

Incidents per Person Involved

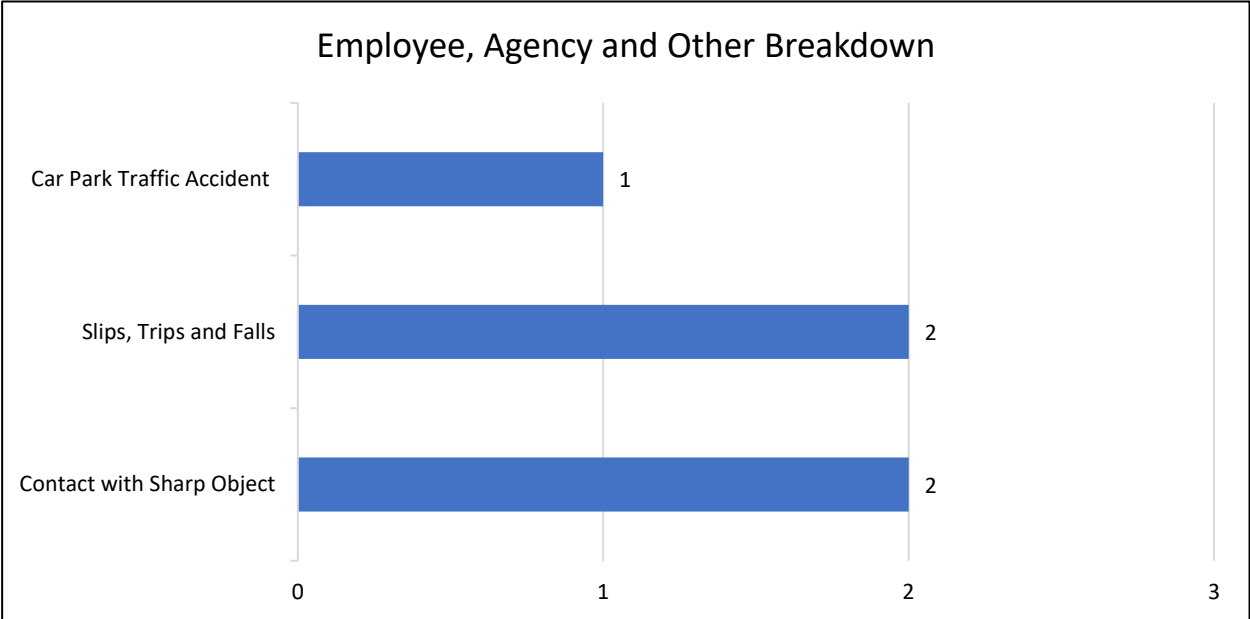


There were 8 incidents regarding employees, agency staff and contractors - 5 accidents, 1 abuse/threat/violent incident/assault and 1 near miss. None were RIDDOR reportable.

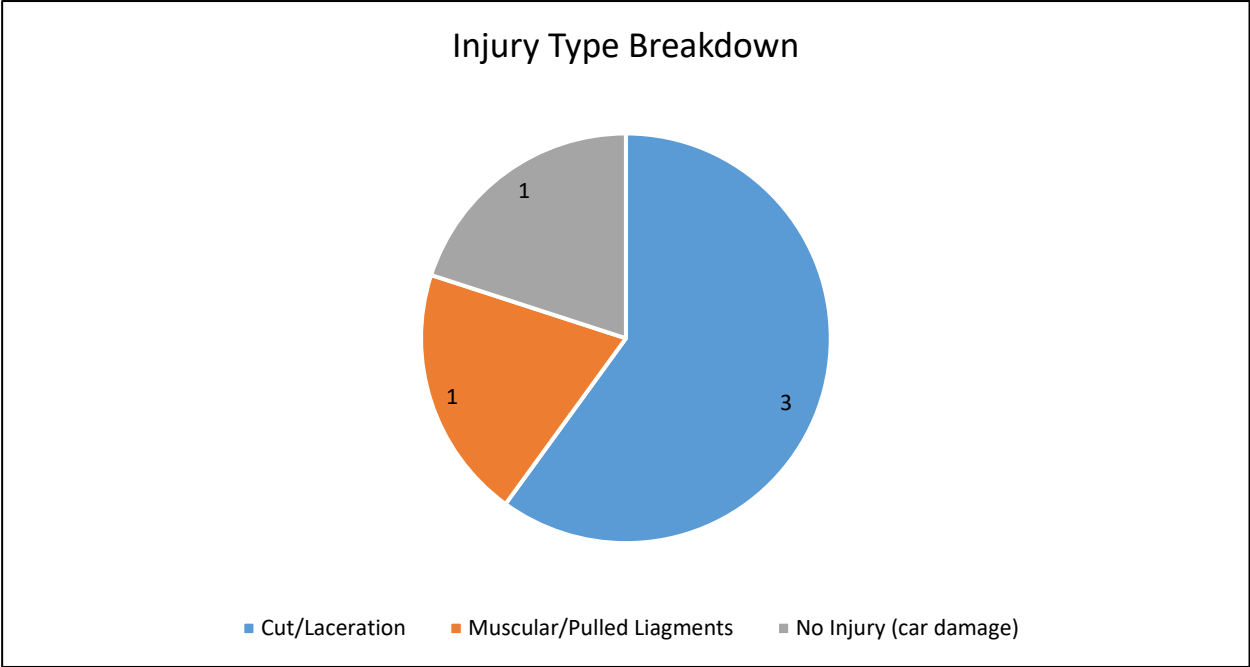
Reported Incident Type



Employee/Agency/Other Accident and Injury Breakdown

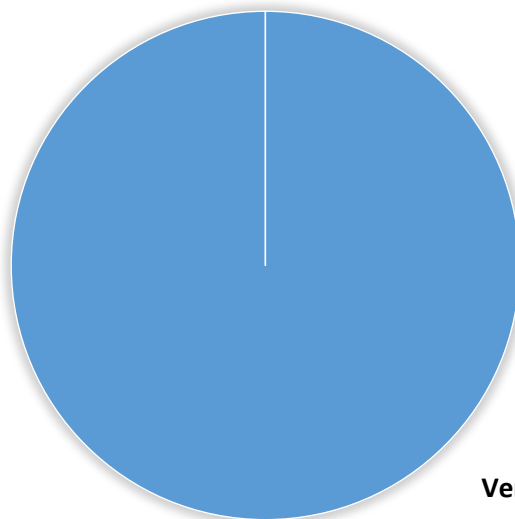


- The above chart shows a breakdown of employee/agency staff/contractor accidents by sub-category (a total of 5 accidents). Of the 5 accidents, 4 involved an employee and 1 involved an agency worker. The agency worker accident was contact with a sharp object.
- The chart below shows these broken down by injury type.



Employee/Agency Worker and Other Abuse/Threat/Violent Incident Breakdown

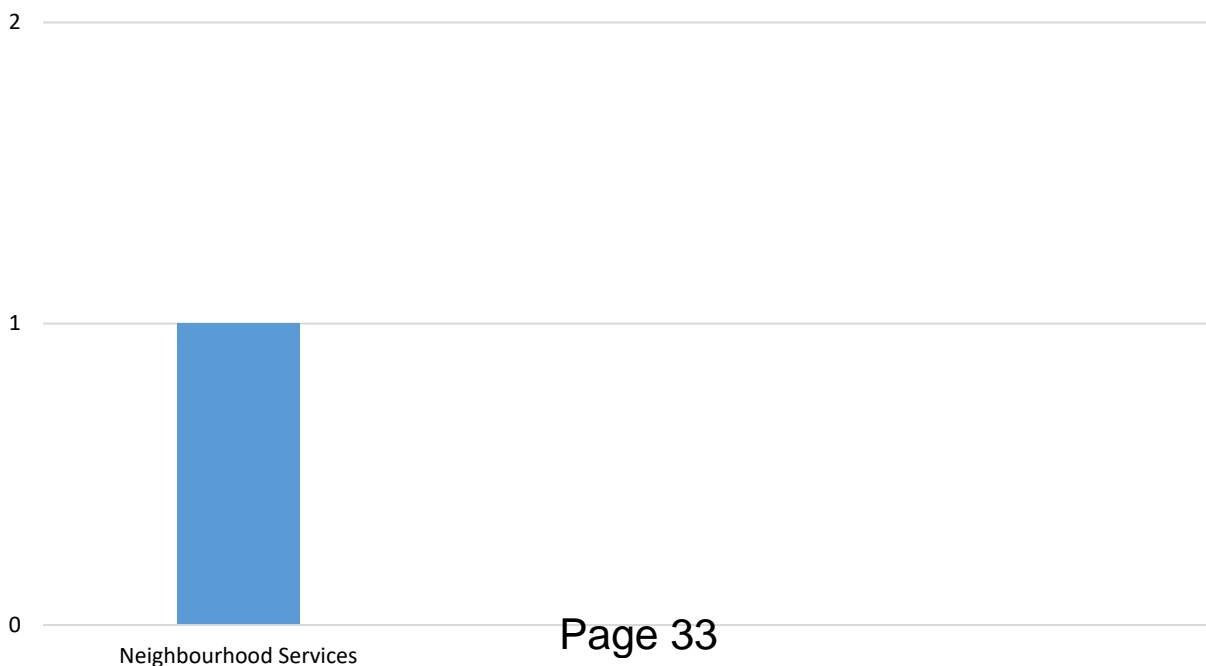
ABUSE/THREAT/VIOLENT INCIDENT BREAKDOWN



Verbal Abuse
1

- The above chart shows a breakdown of abuse/threat/violent incidents (a total of 1).
- The chart below shows these broken down by Area.

Abuse / Threat / Violent Incident per Org Unit Breakdown



Employee, Agency Staff and Other Summary

Near Miss Reports

There were 2 reported near misses this quarter.

This is a positive change following the previous quarter when it was advised that managers should encourage staff to report more near misses to help prevent accidents by removing a potential cause before it can lead to an accident.

Abusive Incidents

There was 1 reported incident of abusive behaviour this quarter to an employee, which was verbal abuse. This figure is low given the nature of SCH work activities, which indicates that managers need to encourage reporting of such incidents.

Accidents

There were 5 accidents reported this quarter. This is an expected level and shows that staff are reporting accidents, which is positive behaviour.

RIDDOR Reportable

There were no RIDDOR reportable incidents involving staff, agency workers or others (not including tenants).

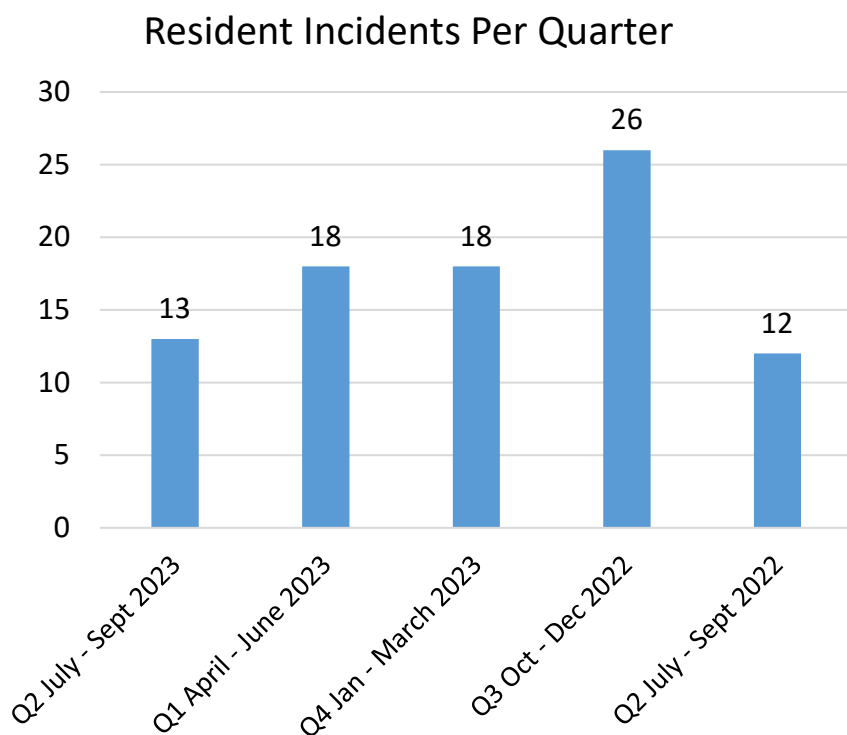
Building and Resident Safety

Incident Statistics Quarter 2 July – September 2023

This section details all incidents and near misses reported by tenants. Details are provided for all tenant reported incidents.

The data identifies incidents where a property defect or circumstance was the contributory factor to an injury or near miss and this was the landlords (SCH) responsibility to resolve and also if the incident was work-related in some way.

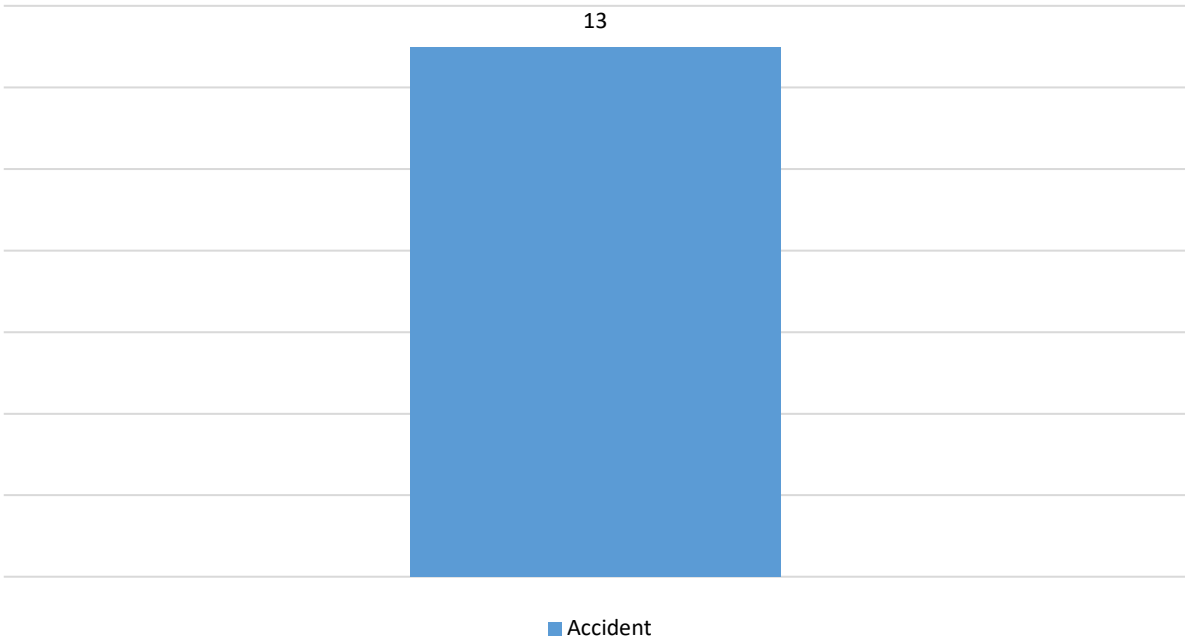
Resident Safety - Tenant Incidents



- Resident incidents reported per quarter.

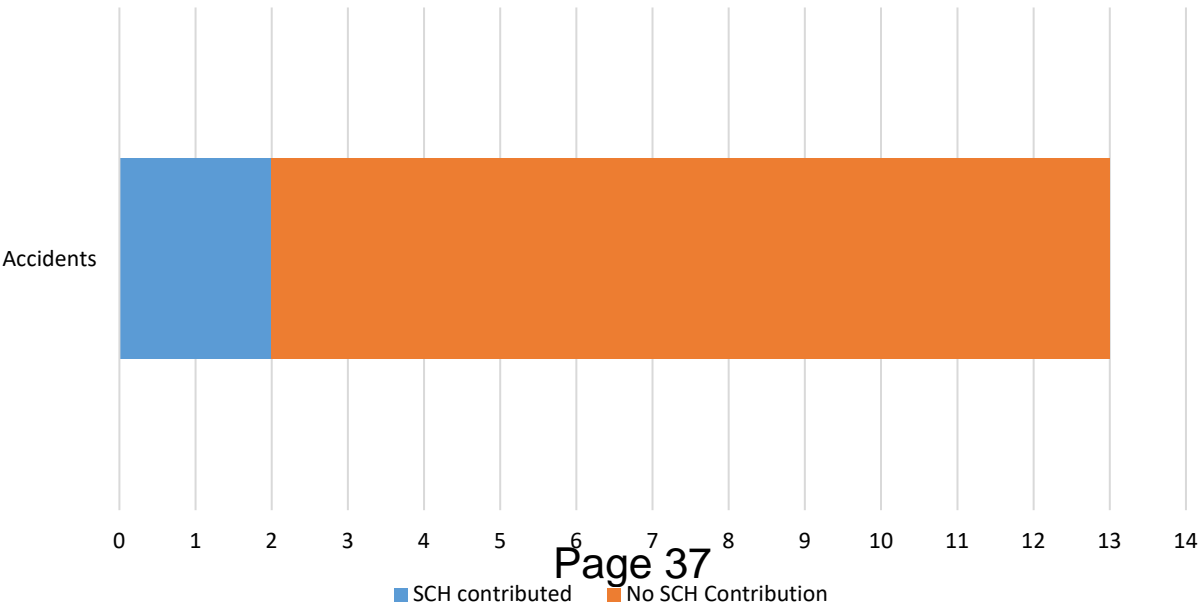
Resident Safety - Tenant Incidents

Resident Incident Breakdown By Type



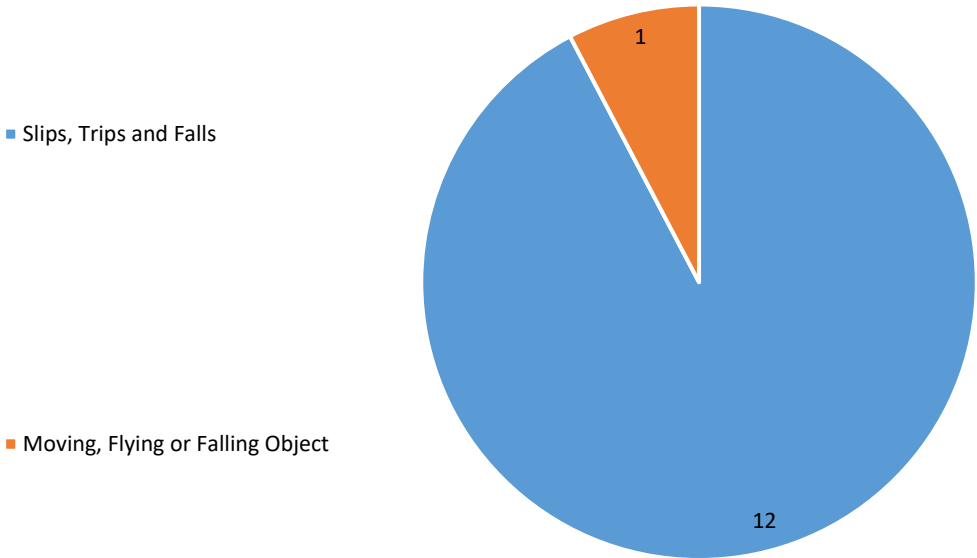
- There were 13 resident safety incidents this quarter, all of which were accidents.
- There were 0 RIDDOR reportable incidents this quarter.
- The graph below shows if the incident was caused in part by an SCH work activity.

Resident Incidents



Resident Safety - Tenant Incidents

Resident Accidents by Type



The graph above shows the accident cause, the vast majority being slips, trips and falls.

Resident Safety Summary Notes

Incidents where SCH work activity may have contributed to their cause

Out of the 13 tenant incidents reported in Quarter 2 2023/24, 2 accidents were deemed to be work related and that further preventative action could have been taken to help prevent these. 1 accident was due to tripping over loose edging stones, and 1 was due to unrepaired raised paving slabs.

Near Miss Reports

- There were no near miss incidents reported by tenants during Quarter 2 2023/24.
- Near miss reporting is to be encouraged to help prevent accidents by removing a potential cause before it can cause an accident.

Abusive Incidents

- There were no incidents of violence and abusive behaviour reported by tenants.

Tenant Accidents

Most tenant accidents this quarter continue to involve a slip, trip or fall of some description. 2 were the result of SCH work activity or failing to complete repairs. There were 3 slips, 5 trips and 4 falls.

RIDDOR Reportable

There were 0 incidents reported under RIDDOR this quarter.

Fire or Property Related Incidents

There were no reported fire related incidents reported.

Other incidents reported (not directly SCH work-related activity)

11 of the tenant incidents reported do not appear to involve a fault, or issue caused by SCH activity, including slips/trips/falls and being struck by a falling cupboard door.

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Meeting of the Board



Report title:	Financial Monitoring and Forecast – September 2023 (Quarter 2)		
Meeting date:	20 November 2023		
Report from:	Samantha Gilbert, Chief Finance Officer		
Report author/ lead officer:	Karen Cranley 0121 704 6421	Finance Manager kcranley@solihull.gov.uk	
Report type:	Confidential Open		
Decision type:	Assurance	Approval	Information

1. Report overview/purpose

- 1.1 To update the SCH Board on the forecast financial performance as at the 6 months to 30 September 2023 (Quarter 2).

2. Recommendations

- 2.1 The Board is asked to:
- (1) **NOTE** the revenue and capital forecast to the year end for the current financial year 2023/24.
 - (2) **NOTE** the current and forecast reserves position.
 - (3) **APPROVE** the transfer of previously earmarked sums to the Budget Strategy Reserve
 - (4) **NOTE** the progress of savings delivery for the next three years.
 - (5) **NOTE** the age of outstanding Accounts Receivable and Rent Debt.
 - (6) **APPROVE** the 12 month extension of the External Audit contract with RSM UK Audit LLP.

3. Background/context

- 3.1 This report summarises the Revenue and Capital forecast financial performance based on the six-month period to 30 September 2023. The Financial Dashboard is attached at Appendix A.
- 3.2 The Financial Dashboard also includes an update on rent collected and an update on the expected SCH and HRA Reserves outturn position.

- 3.3 The revenue position shows a forecast outturn position of a £521,000 overspend (2.1%).
- 3.4 The capital position shows a forecast outturn position of a (£3.961million) underspend (9.0%).
- 3.5 The forecast reserves position shows available balances of £3.038 million and £13.248 million of SCH and HRA balances respectively.
- 3.6 The savings tracker shows that £55,000 (14.4%) of the savings targets agreed for 2023/24 are currently rated Red.
- 3.7 Outstanding SCH Accounts Receivable debt features on the revised dashboard, there are no issues of concern to highlight as at Quarter 2.
- 3.8 The current External Audit contract with RSM UK Audit LLP is due to end on 31 December 2023 and approval is sought to extend by one year to 31 December 2024.

4. Matters for consideration

Commentary on Revenue Financial Performance 2023/24

- 4.1 The approved budget position of £893,000 includes approved use of reserves; namely £551,000 to fund the estimated additional costs of the 2023/24 pay award and employer's pension contributions, £200,000 funding for the OneSCH Project, £102,000 to address damp and mould works and £40,000 for Restructure costs.
- 4.2 At 30 September 2023, the Executive Directors are forecasting an overspend against this budget of +£521,000 by the end of the financial year.
- 4.3 Significant expected variances are set out in Appendix A; the most notable areas of overspend being +£311,000 within electrical and gas repairs and £254,000 materials costs. The increase relates to an 11% increase in works year-on-year alongside increasing labour and materials costs.
- 4.4 The Social Housing (Regulation) 2023 Act offers greater protection to social housing tenants against serious hazards in their homes, one of which is damp, mould and condensation. Costs attributed to responding to matters relating to damp, mould and condensation in the year to September 2023 were £230,000 and could reach approx. £550,000 by the end of the financial year if similar patterns continue.

Impact on SCH Medium Term Financial Strategy (MTFS)

- 4.5 The consequences of issues highlighted within this report will be considered as part of the preparation for the SCH MTFS, further details of which are contained within the Medium-Term Financial Strategy Update Report elsewhere on this agenda.

Commentary on Capital Financial Performance 2023/24

- 4.6 At the Full Cabinet meeting on 9 March 2023 the base housing capital budget of £41.057million was approved for 2023/24.
- 4.7 The capital budget was subsequently increased by £2.773 million rephasing of net underspends from the 2022/23 outturn position as approved by Cabinet on 15 June 2023 and £208,000 for demolition costs of Middlewood House as approved by Cabinet on 9 December 2021.
- 4.8 At 30 September 2023 the programme is expected to underspend by (£3.961million). Significant expected variances are set out in Appendix A; the most notable areas being delays to the new build scheme at Lakeside (£2.475 million) and the Low-Rise envelope and Cyclical Maintenance programmes (£2.020 million).

SCH and HRA Reserves Position

- 4.9 The total SCH Reserves as at 1 April 2023 were a net positive balance of £21.613 million, which includes the Pensions Reserve surplus balance of £13.856 million. This is not included on the Reserves schedule within the Financial Dashboard as it is not considered cashable in the foreseeable future.
- 4.10 The remaining positive reserves of £7.757 million, includes the Budget Strategy Reserve of £6.191 million, of which £539,000 is earmarked for restructure costs.
- 4.11 At its meeting on 3 May 2022 this Board approved the use of £1.392 million from SCH reserves to fund Structural Survey and associated costs. However, Full Cabinet will consider funding this from HRA reserves on 7 December 2023 and the SCH usable reserves have been increased to reflect the change.
- 4.12 The Board approved the use of a maximum of £700,000 from SCH Reserves on 21 June 2021 for the relocation of the Housing Options Office at Coppice Way. Following further reports to Board through 2022, an allocation of £335,000 was finalised for the move from Coppice Way to the Bluebell Centre. Final costs incurred were £207,000, the Board is asked to approve the return of the remaining amount of £128,000 to the Budget Strategy Reserve.
- 4.13 HRA Reserves are also shown within Appendix A for information; these are held by the Council and decisions on their use are made by the Cabinet Member for Housing. The HRA Reserves as at 1 April 2023 were £24.867 million made up of £9.645 million revenue reserves and £15.222 million capital reserves and also reflect the amendment of £1.392 million.

Savings Tracker

- 4.14 The savings tracker included within Appendix A shows the RAG rating for the savings approved for the period 2023/24 to 2025/26. Details are also given of targets rated as red in the current financial year, totalling £55,000. These are included within the overall net variance position.

Accounts Receivable Debt

- 4.15 The accounts receivable information provided within Appendix A show a total outstanding due debt of £266,000 at 30 September 2023, of which £224,000 (84%) is owed by the Council. There are no areas of concern to be highlighted at this time.

HRA Rent Collection and Debt Impairment (Information Items)

- 4.16 Rent collection and Debt Impairment tables are also included within the dashboard for information. Rental income is received directly into the Council's HRA account, albeit any change to rental income ultimately affects HRA funds available for future years' SCH management fees. The dashboard shows that for HRA owned properties the percentage of rent collected in relation to rent due is exceeding the 98% targeted, collection of SCH owned property debt is slightly below target at 97.68%
- 4.17 The Debt Impairment is what was previously known as the 'Bad Debts Provision'. The dashboard shows that for Quarter 2 we have a requirement to provide for an additional £112,000 of HRA debt impairment compared to an annual budget of £692,000.

External Audit

- 4.18 SCH entered into an agreement with RSM UK Audit LLP in December 2019 for the provision of external audit and corporation tax services for an initial period of three years with two possible one year extensions. In December 2022 this was extended to December 2023 with the intention of conducting an open tender exercise during 2023 to reprocure this contract. Unfortunately following an unsuccessful mini-competition exercise via the Crown Commercial Services Framework the Board are asked to approve the final one year extension available under the existing agreement with RSM UK Audit LLP. A report will be presented to Audit and Risk Committee at their meeting on 11 December detailing the current plan to ensure the procurement of this contract before this extension concludes.

5. Supporting the SCH Delivery Plan

- 5.1 The SCH MTFS is produced to reflect the SCH Delivery Plan requirements and ensures these are affordable.

6. Consultation and engagement

- 6.1 There is no public consultation or engagement undertaken for the SCH financial monitoring. The forecasts within this report are based on the information supplied by the SCH Budget Managers.

7. Financial implications

7.1 Details are set out in the matters for consideration.

8. Legal implications

8.1 The SCH Management Agreement requires SCH to agree a balanced budget.

9. Risk implications

9.1 Work is currently ongoing to identify the mitigating actions to address any overspends.

10. Equalities implications

10.1 Any rectifying action to address overspends and impacting on service delivery, should be the subject of a separate report and a Fair Treatment Assessment.

11. List of appendices

Appendix A – SCH Financial Dashboard at Quarter 2

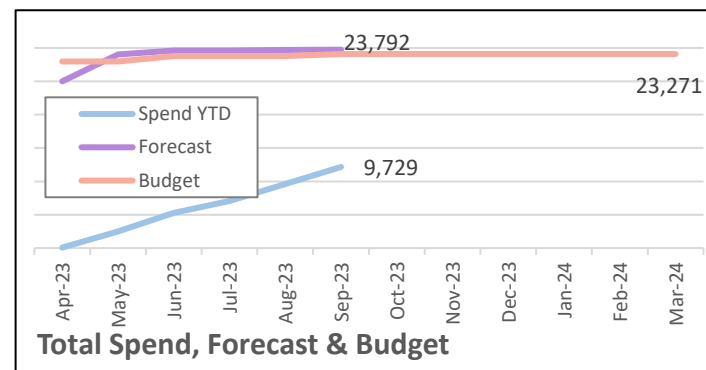
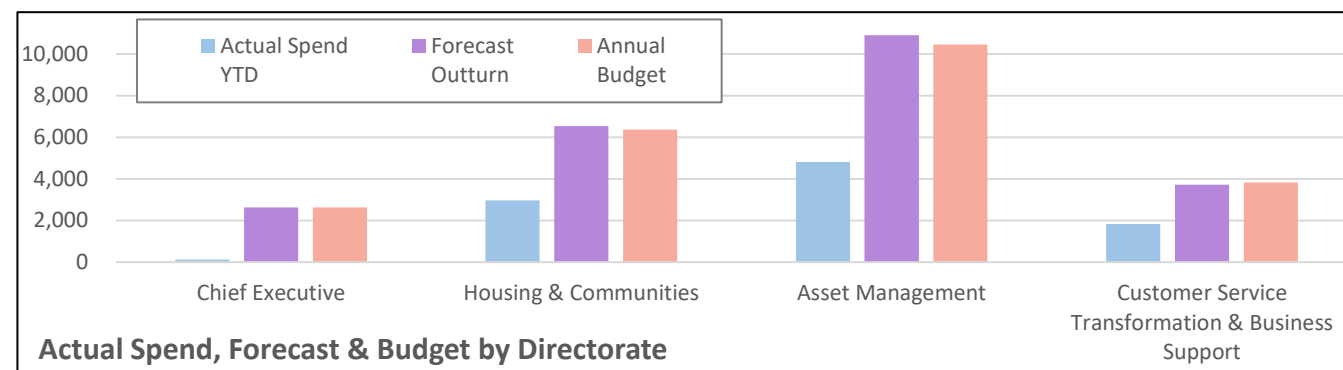
12. Background documents

SCH Board 2023/24 Revenue and Capital Budget report 8 November 2022

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FINANCIAL DASHBOARD AS AT SEPTEMBER 2023

REVENUE POSITION AT P06



Service Area	Annual Budget £000	Actual Spend YTD £000	Forecast Outturn £000	Forecast Variance £000
Chief Executive	2,621	120	2,630	9
Housing & Communities	6,365	2,968	6,537	172
Asset Management	10,450	4,817	10,906	456
Customer Service Transformation & Business Support	3,835	1,824	3,719	(116)
Revenue sub-total	23,271	9,729	23,792	521
Revenue Management fee	(22,146)	(11,184)	(22,146)	0
Use of HRA Reserves	(232)	0	(232)	0
Net Revenue Position	893	(1,455)	1,414	521

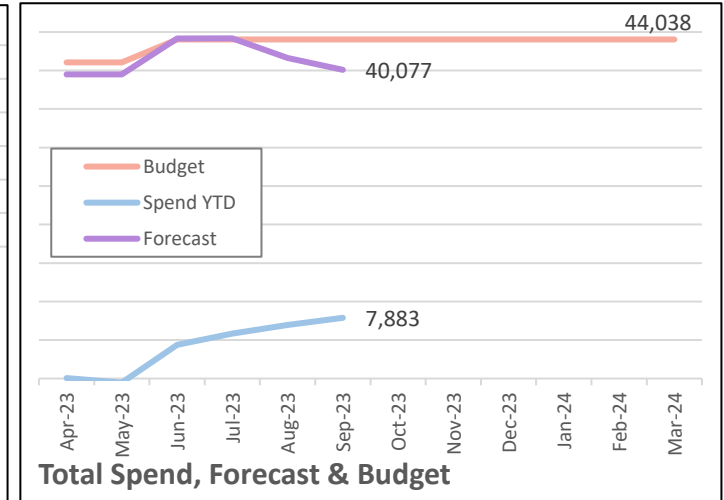
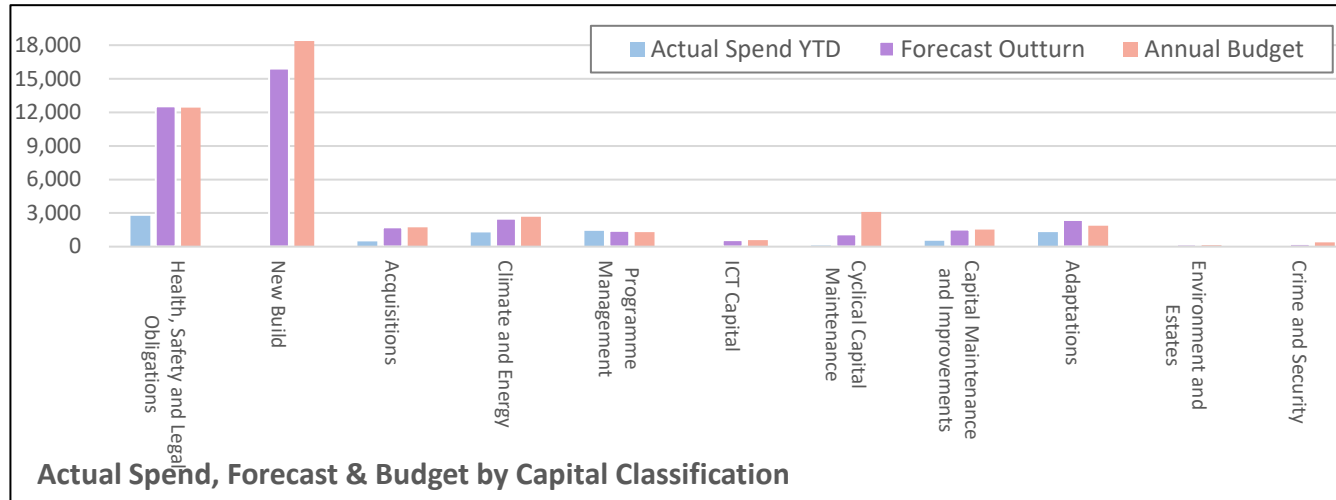
Forecast Variance Split Between		
Payroll £000	Non-Pay £000	Income £000
0	9	0
(62)	707	(473)
(76)	652	(120)
(216)	(35)	135
(354)	1,333	(458)
0	0	0
0	0	0
(354)	1,333	(458)

Forecast Variance P03 £000	Movement in Forecast £000
0	9
124	48
557	(101)
(23)	(93)
658	(137)
0	0
0	0
658	(137)

Service Area	Forecast Variance £000	Explanation of Forecast Variances
Chief Executive	9	Minor variances
Housing & Communities	172	+£10,000 for savings target rated red, +£75,000 Budget Hotels (net of HB recovered), +£42,000 other Homelessness service pressures (Tenant Medicals, Furniture & Taxes), +£29,000k CCTV contract pressure, +£22,000 Depreciation, +£21,000 Utility costs, +£18,000 Private ASB Income and £17,000 other net variances. Part offset by (£62,000) net payroll savings.
Asset Management	456	+£45,000 for savings target rated red, Continuing pressures on gas and electrical repairs costs of +£159,000 in Day to day and +£152,000 in Voids , +£130,000 Biomass pressure mainly due to increased utility costs, +£254,000 continuing pressure on materials costs, +£90,000 Fire Protection and £62,000 other net variances. Part offset by forecast underspends of (£125,000) asbestos sub-contractor costs, (£96,000) on electrical testing, (£99,000) Small Homes income and (£116,000) net payroll underspend.
Customer Service Transformation & Business Support	(116)	(£50,000) Utility costs, (£70,000) reimbursement of costs for the Sudanese response, (£109,000) net payroll forecast underspends and (£18,000) other net variances. Part offset by +£54,000 Subscriptions & Professional fees and +£77,000 Wellbeing net trading contribution less than budget.
Revenue Total	521	

FINANCIAL DASHBOARD AS AT SEPTEMBER 2023

CAPITAL POSITION AT P06



Capital Classification	Annual Budget £000	Actual Spend YTD £000	Forecast Outturn £000	Forecast Variance £000	Explanation of Forecast Variances
Health, Safety and Legal Obligations	12,413	2,764	12,525	112	Forecast overspend on Building Safety +£247,000; part offset by reduced spend on Lift Replacements (£97,000) and Structural repairs (£38,000).
New Build	18,378	38	15,903	(2,475)	Lakeside: Asbestos removal & demolition taking place Q2, forecast now assumes Q4 start on Site for construction.
Acquisitions	1,714	457	1,714	0	
Climate and Energy	2,661	1,256	2,493	(168)	Forecast underspends on Low Carbon Projects (£207,000) and Overcladding (£99,000); part offset by pressures on heating systems +£113,000 and High Rise window replacements +£25,000.
Programme Management	1,300	1,405	1,405	105	Increased capital salaries recharge following review.
ICT Capital	580	31	580	0	
Cyclical Capital Maintenance	3,108	110	1,088	(2,020)	Significant underspends on Low Rise envelope schemes (£1.020million) and Cyclical Maintenance (£1.000million) due to later contract start dates.
Capital Maintenance and Improvements	1,537	522	1,537	0	
Adaptations	1,856	1,297	2,391	535	Increased occupational health referrals leading to increase in works.
Environment and Estates	113	3	213	100	Increased spend on tarmacking projects.
Crime and Security	378	0	228	(150)	Expected underspend on CCTV system upgrades.
Capital Total	44,038	7,883	40,077	(3,961)	Net underspend to be requested as carry forward into 2024/25

FINANCIAL DASHBOARD AS AT SEPTEMBER 2023

RESERVES

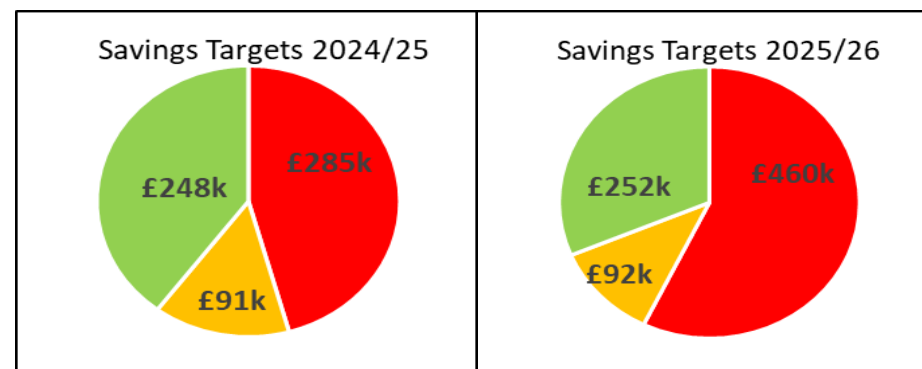
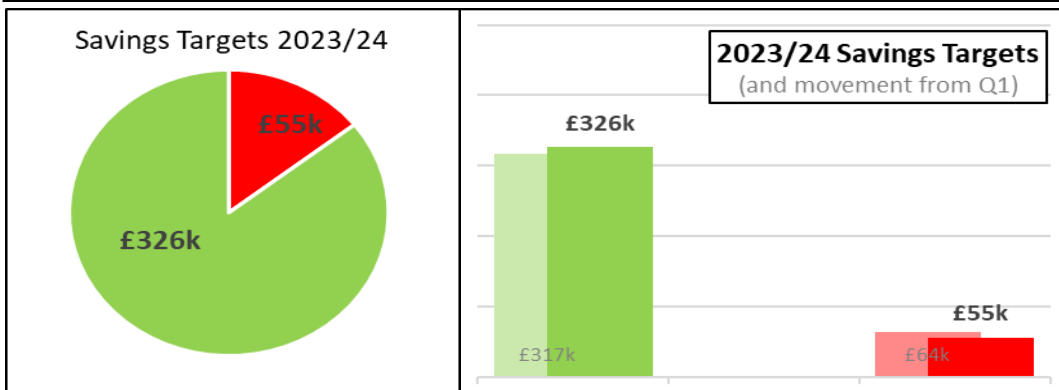
Solihull Community Housing Reserves	Balance 1-Apr-23 £000	Forecast Use 2023/24 £000	Forecast 31-Mar-24 £000	Committed/ Earmarked £000	Comments/ Notes on committed & earmarked use	Available Balances £000
Minimum Working Balance	1,500	0	1,500	(1,500)	Minimum requirement agreed with Auditor	0
General Reserve	66	(66)	0	0	The resulting deficit balance to be offset by the Budget Strategy Reserve.	0
Budget Strategy Reserve	5,652	(1,574)	4,078	(1,040)	£1.506m Workflow, £102,000 Damp & Mould, £521,000 current outturn forecast, £551,000 towards pay offer & employers pension	3,038
BSR: Earmarked for Restructures	539	(40)	499	(499)		0
Total SCH Reserves	7,757	(1,680)	6,077	(3,039)		3,038
Any under-achievement of savings targets (see below) for 2024/25 onwards may result in a further call on reserves.						

Housing Revenue Account Reserves	Balance 1-Apr-23 £000	Forecast Use 2023/24 £000	Forecast 31-Mar-24 £000	Committed/ Earmarked £000	Comments	Available Balances £000
HRA Balances/ General Reserves	8,967	(3,247)	5,720	(3,003)	Minimum £2.0m working balance required	2,717
Future Capital Investment	678	(678)	0	0		0
CAPITAL						
Major Repairs Reserve	2,545	600	3,145	(1,400)	Use of MRR carry forwards in Capital Programme	1,745
ARB Receipts Reserves	11,693	(346)	11,347	(2,561)	Earmarked sums mainly towards KHVC Project	8,786
Capital Receipts Unapplied	984	(52)	932	(932)	Shared Ownership receipts to be used towards new build	0
Total HRA Reserves	24,867	(3,723)	21,144	(7,896)		13,248

SAVINGS TRACKER

RED Rated Savings Targets 2023/24:

AM04-Relignment of Services	30,000	Internal delivery of services (repairs & maintenance) that are currently paid for externally
AM07-Contract Management	15,000	QS to provide commercial support for revenue related works as well as capital programme works
HC06-Realignment of Services	10,000	End Movement Incentive Scheme (partially met)



FINANCIAL DASHBOARD AS AT SEPTEMBER 2023

ACCOUNTS RECEIVABLE DUE DEBT

At 30-Sep-23	Current (0-30)	31-60	61-90	91-180	181-365	365+	Total Due	% of Due Debt
Council Debtors	£ 50	£ 9,161	£ 66,675	£ 4,584	£ 131,043	£ 12,698	£ 224,211	84%
Other Debtors	£ 763	£ 4,596	£ 7,857	£ 9,076	£ 14,336	£ 5,112	£ 41,740	16%
Total AR Debtors	£ 813	£ 13,757	£ 74,532	£ 13,660	£ 145,379	£ 17,810	£ 265,951	

At 31-May-23

Council Debtors	£ -	£ 120	£ 299,103	£ 23,269	£ 11,898	£ 4,703	£ 339,093	87%
Other Debtors	£ 1,890	£ 9,897	£ 9,971	£ 7,424	£ 9,336	£ 11,739	£ 50,257	13%
Total AR Debtors	£ 1,890	£ 10,017	£ 309,074	£ 30,693	£ 21,234	£ 16,442	£ 389,350	

RENT & CHARGES DEBT

HRA Income	
Overall Income Due	£24,385,872
HRA Income	£23,516,744
Rent Roll	£23,598,750
Percentage rent collected of rent due	96.44%
Percentage rent collected of rent due excl. arrears b/fwd	99.65%

HRA Arrears	Total HRA Debt £	Impairment Required £
31-Mar-23	4,492,332	3,579,117
29-Sep-23	4,812,022	3,691,205
Increase/ (Decrease)		112,088
TOTAL CHARGE TO DEBT IMPAIRMENT		112,088
Budget available for contribution to Debt Impairment		692,000

SCH Income	
SCH Rents collectable	£102,121
SCH income of rent due	£99,748
SCH Collection percentage	97.68%

SCH Arrears	Total SCH Debt £	Impairment Required £
31-Mar-23	102,834	88,763
29-Sep-23	129,087	117,217
Increase/ (Decrease)		28,454
Add: Net Write offs YTD		
TOTAL CHARGE TO DEBT IMPAIRMENT		28,454
Budget available for contribution to Debt Impairment		10,000

Meeting of the Board



Report title:	Delivery Plan 2024/25		
Meeting date:	20 November 2023		
Report from:	Martyn Sargeant, Executive Director – Customer Service, Transformation and Business Support		
Report author/lead officer:	Martyn Sargeant 0121 704 8667	Executive Director martynsargeant@solihullcommunityhousing.org.uk	
Report type:	Confidential Open		
Decision type:	Assurance	Approval	Information

1. Report overview/purpose

- 1.1 The report sets out the proposed overarching themes and priorities for the Delivery Plan for 2024/25, seeking Board approval prior to wider consultation with stakeholders.

2. Recommendations

- 2.1 The Board is asked to:
- (1) Approve the draft themes and enablers for the 2024/25 Delivery Plan.
 - (2) Approve the draft priorities for the Plan.

3. Background/context

- 3.1 SCH is required, under its management agreement with the Council, to produce an annual Delivery Plan setting out priorities for the year and the performance indicators against which progress and delivery will be assessed.
- 3.2 At its away day in early October, the Board had initial discussions about the content of the forthcoming Delivery Plan.

4. Timetable

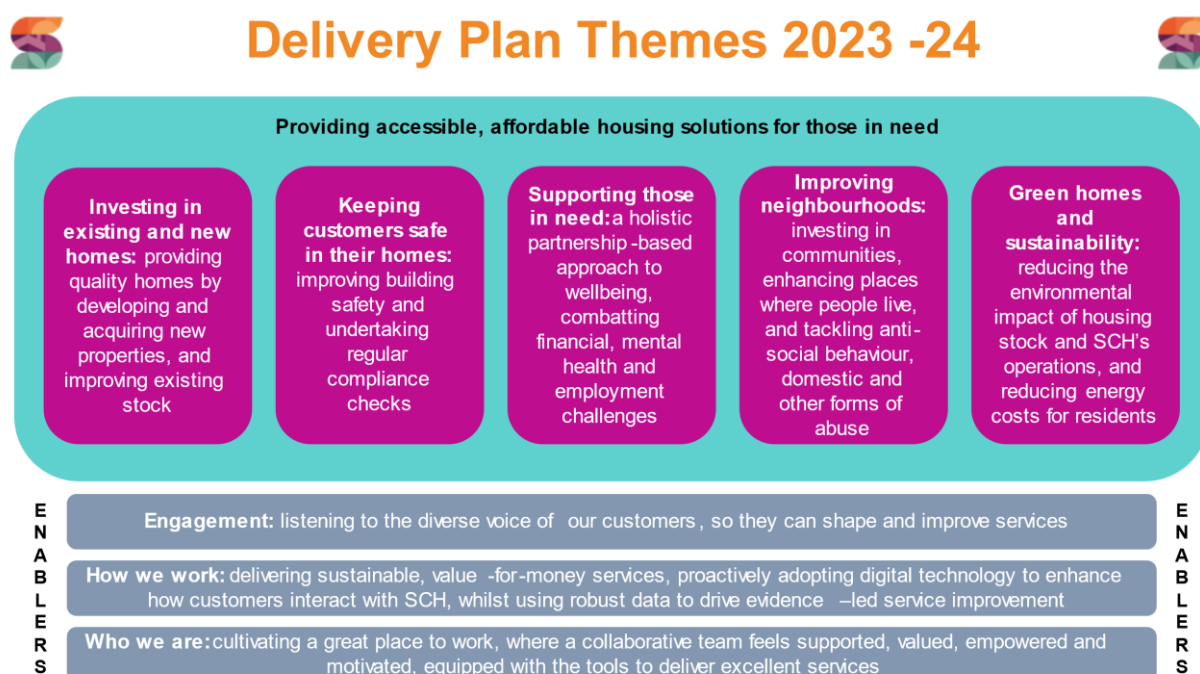
- 4.1 Whilst the Board drives and determines the Delivery Plan, its preparation is collaborative, involving consultation with customers, employees and Solihull

Council. The key dates for the approval of the 2024-25 Delivery Plan are set out below:

Aug/Sept 2023	SCH Big Conversation with residents
3 Oct 2023	SCH Board away day – initial Delivery Plan discussions
7 Nov 2023	QMB reviews emerging themes for Delivery Plan
20 Nov 2023	SCH Board agrees framework Delivery Plan
Nov/Dec 2023	Consultation with Council, SCH employees and other stakeholders
Jan 2023	Content finalised and design work completed
19 Feb 2024	SCH Board reviews final draft Delivery Plan
29 Feb 2024	Scrutiny Board reviews draft Delivery Plan (Council)
25 March 2024	Cabinet member considers the Delivery Plan for approval (Council) [TBC – may go to full Cabinet]

5. Delivery Plan themes

- 5.1 For 2023/24, the Board decided to move to a thematic approach to the Delivery Plan. The 2023/24 themes, and organisational enablers that underpin them, are set out below:

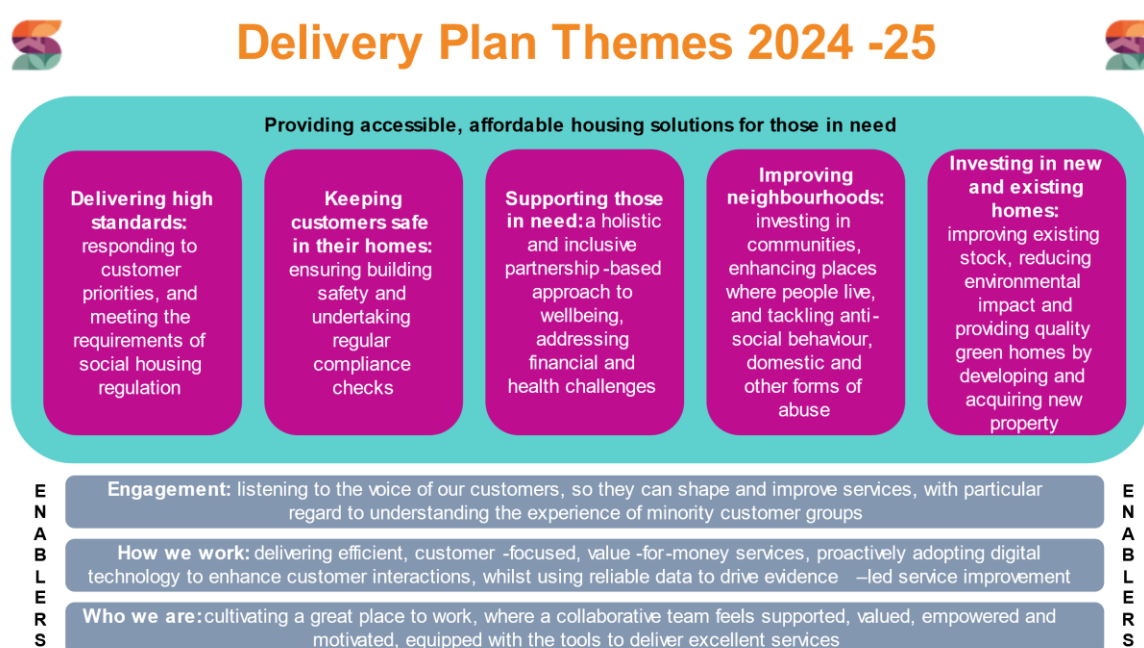


- 5.2 Drawing on feedback from the Wider Leadership Team, the Board made a number of changes to the themes/enablers, whilst agreeing to maintain the overall approach. This recognised that many of the existing priorities remain important in the coming year. Two particular changes were:

- To bring together the first and last themes, recognising the synergy between improving/developing homes and the sustainability priorities.
- To introduce a new theme about delivering core services well, which reflects customers' priorities, as well as the focus on consumer standards through regulation and the work of the Housing Ombudsman, as well as the Better Social Housing Review.

5.3 The revised enablers also reflected the drive to develop a better understanding of who lives in SCH's properties and to understand their views about the services they receive. This includes a particular focus on understanding the views of those in minority groups and using that information to shape service delivery.

5.4 The proposed themes and enablers for 2024/25 are:



6. Priorities

6.1 Each Delivery Plan sets out priority areas of work for the year ahead. Emerging proposals were discussed briefly at the Board away day. The Board's primary feedback was that it wished to see the Plan more clearly express how each priority will be achieved - 'how will we know when the objective is delivered?'.

6.2 Appendix A contains draft priorities against each of the themes and enablers. These are set out in a table that summarises the objective and answers the question posed by the Board. This will make it easier for the Board, as well as other stakeholders, to assess progress against the priorities.

7. Supporting the SCH Delivery Plan

- 7.1 This report sets out the framework for the Delivery Plan for the coming year.

8. Consultation and engagement

- 8.1 Shaping the Delivery Plan has begun with consultation with customers, through the SCH Big Conversation. Further consultation will follow with key stakeholders, particularly the Council and SCH employees.

9. Financial implications

- 9.1 The Delivery Plan sets out how SCH aims to meet the responsibilities delegated to it by the Council within the available budgets. There are no direct financial implications arising from the report.

10. Legal implications

- 10.1 SCH has entered into a management agreement with the Council for the delivery of core housing services. The Delivery Plan, which details how SCH will meet its obligations, is a requirement of that agreement.

11. Risk implications

- 11.1 SCH operates a comprehensive risk management framework, recording and managing risks at both a strategic and operational level. Risk reviews are carried out on a regular basis and relevant risks amended or new risks added according to the prevailing situation. There are no direct risk implications arising from this report.

12. Equalities implications

- 12.1 There are no direct equalities implications arising from this report and no equalities impact assessment is required, as SCH is not proposing to change its service delivery.
- 12.2 It is worth noting that a specific objective of the proposed Delivery Plan is to gather and analyse increased data about customers from minority groups in order to identify any issues and help shape service delivery in a way that reflects the needs and preferences of those groups.

13. List of appendices

Appendix A: Draft priorities for 2024/25

14. Background documents

SCH Delivery Plan Objectives 2024/25

THEME: delivering high standards	
<i>What will we do?</i>	<i>How will we know it's been achieved?</i>
Improve complaint responses.	Over 90% of complaints will receive a response within the target of ten days.
Strengthen complaint handling.	Increase the number of employees responding to complaints and implement a central team.
Meet the consumer standards.	Deliver the action plan arising from Savills' independent review of SCH's compliance.
Demonstrate how SCH learns and responds to customer feedback.	Report through the website and tenant newsletter on performance and learning twice a year.
Respond to customer feedback.	Identifiable and measurable initiatives and improvements arising particularly from the SCH Big Conversation.

THEME: keeping customers safe in their homes	
<i>What will we do?</i>	<i>How will we know it's been achieved?</i>
Improve fire safety across high-rise accommodation.	Complete the installation of spandrel panels across all blocks identified for improvement.
Undertake regular safety compliance checks that achieve agreed performance targets.	Quarterly performance data reported to customers, the SCH Board and the council.
Invest in high-rise accommodation for future generations.	Complete structural surveys of all high-rise blocks and develop a ten year investment plan.
Respond to customer feedback on building safety.	Respond to 100% of all building safety complaints within the complaint code timescales. Follow-up with all quarterly survey respondents who indicate they do not feel safe in their property.
Improve fire safety across all accommodation types.	All fire safety remedial actions are completed to schedule.

THEME: supporting those in need	
<i>What will we do?</i>	<i>How will we know it's been achieved?</i>
Ensure customers are signposted to relevant support.	Develop and implement a 'see it, report it' initiative for employees to signpost vulnerable residents.
Enhance independent living options for people in their own homes.	Implement an integrated service offer, using technology and property adaptations to improve customers' options.
Tackle homelessness and rough sleeping by supporting the council's new strategy.	Establish a joint board for Children's, Economy and Infrastructure and SCH to promote better collaboration and oversee operational joint working that improves outcomes for families. Evaluate the approach to temporary accommodation including exploring new models. Increasing the relief or prevention of homelessness (HO5).
Sustain tenancies by supporting those most at risk.	Work with customers to maximise their income and identify up to £2m of unclaimed benefits. Provide access to mental health support and advice, signposting to specialist teams.

THEME: improving neighbourhoods	
<i>What will we do?</i>	<i>How will we know it's been achieved?</i>
Strengthen SCH's support for those experiencing domestic abuse.	Achieve accreditation under the Domestic Abuse Housing Alliance by March 2025.
Improve community facilities in Kingshurst.	Agree a funded proposal for the development of community facilities.
Improve residents' experience in their neighbourhoods.	Implement a dedicated ASB team and improve residents' perception of SCH's interventions (TP11 and TP12).
Improve the quality of communal area cleaning.	Residents report improved satisfaction (TP10).
Improve access to housing advice and support for local people.	SCH to have a weekly presence in each new Family Hub opened by the council.

THEME: investing in existing and new homes	
<i>What will we do?</i>	<i>How will we know it's been achieved?</i>
Ensure consistent high standards of accommodation for residents.	All homes to meet existing Decent Homes standards. Develop an implementation plan to meet Decent Homes 2 when available.
Proactively tackle damp and mould.	Respond to and address all reports of damp and mould within 28 days.
Develop new homes in Kingshurst.	
Enhance SCH's understanding of stock condition to inform improvement priorities.	Complete stock condition surveys for 80% of homes, including a representative spread of archetypes.
Improve the repairs service for customers.	Improve satisfaction with repairs (TP02 and TP03).
Improve the energy efficiency of properties.	

Possibly: Castle Lane repurposing but need to be much clearer on the plan.

ENABLER: engagement	
<i>What will we do?</i>	<i>How will we know it's been achieved?</i>
Improve SCH's understanding of the customer experience for minority groups.	Analysis of customer experience by protected characteristic with associated initiatives to improve it.
Benchmark SCH's performance nationally.	Use TSM data to develop initiatives that improve the customer experience.
Respond proactively to customer scrutiny.	Develop and implement improvement plans arising from SCHape Panel reviews.
Create opportunities for customers to shape SCH's priorities.	Feedback from the tenant conference shapes Delivery Plan priorities for 2025/26.
Ensure tenant representation at Board level.	Recruit two new tenant Board members.

ENABLER: how we work	
<i>What will we do?</i>	<i>How will we know it's been achieved?</i>
Improve digital access for those customers wishing to self-serve.	Implement OneSCH customer relationship management system, including a new customer portal.

Streamline delivery of services to improve the customer experience.	Use OneSCH system to identify efficiencies in working practices that yield savings.
Improve use of data to enhance service delivery.	To be updated following discussions about the data strategy.
Improve the customer experience at first point of contact.	Increased collaborative working between SCH and Solihull Connect leads to improved customer satisfaction (TP1 and contact centre transactional survey).

ENABLER: who we are	
<i>What will we do?</i>	<i>How will we know it's been achieved?</i>
Improve employment opportunities with SH for local people.	Develop an apprenticeship pathway as the preferred route for recruitment.
Invest in staff development.	Develop and deliver an organisational training plan that meets the needs of the professionalisation agenda.
Enhance inclusivity in the workplace.	Embed the Staff Equalities Network and enable it to deliver diversity and inclusion initiatives. Record a baseline of staff satisfaction against protected characteristics.
Improve staff wellbeing.	Staff report improved wellbeing through the staff survey. Reduced sickness absence.

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Meeting of the Board



Report title:	National Housing Federation Code of Governance		
Meeting date:	20 November 2023		
Report from:	Martyn Sargeant, Executive Director – Customer Service, Transformation and Business Support		
Report author/lead officer:	Martyn Sargeant 0121 704 8667	Executive Director Martyn.sargeant@solihullcommunityhousing.org.uk	
Report type:	Confidential Open		
Decision type:	Assurance	Approval	Information

1. Report overview/purpose

- 1.1 To update the Board on its compliance against the National Housing Federation's Code of Governance.

2. Recommendations

- 2.1 The Board is asked to:
- (1) Agree the actions to ensure compliance against the Code (section five).
 - (2) Agree the proposed policy for handling complaints about Board members (appendix A).

3. Background

- 3.1 The Board has opted to sign-up to the National Housing Federation's Code of Governance (2020) as a mechanism to self-assess against a recognised industry standard. This provides assurance, both internally and externally, that SCH is operating to the highest standards of governance.
- 3.2 Self-assessments were carried out in 2021 and 2022. It is good practice to conduct an annual review against the Code to ensure compliance is maintained and identify any new actions that may be required.

4. Actions from the 2022 review

- 4.1 The last review identified four actions that were reported to the Board. The table below confirms the work undertaken to address each of these:

Requirement	Action	Update
There is a policy in place to set out how disputes or grievances involving Board members can be raised and dealt with.	Policy to be drafted for Board approval.	Draft policy attached as appendix to this report.
Audit Committee meets annually with the external auditors with only non-executives present.	Set-up separate meeting if required by Audit and Risk Committee.	Agreed with Committee chair that separate meeting can be arranged at his discretion.
The Board establishes and documents its appetite for the risks the organisation faces in the pursuit of its strategy.	Work in progress to develop risk appetite.	Action remains open (see below). ELT has completed scoping work, which has been reviewed by the Audit and Risk Committee. Process for Board to finalise risk appetite to be agreed.
If a Board member has concerns about the organisation that cannot be resolved, these concerns are shared with the Board and formally recorded.	Agree formal process for raising concerns.	Standing orders (11.3) amended to state: 'This would include where a member has concerns about SCH that he or she has been unable to resolve, in order that those concerns can be shared with the Board and formally accepted'.

5. Actions arising from 2023 review

- 5.1 Whilst the recent review against the Code has demonstrated SCH's continued compliance, it has highlighted a number of actions to strengthen that position. The table below sets out the proposed actions:

Requirement	Action	Owner	Timescale
The Board sets and actively drives the organisation's social purpose, mission and values.	Review SCH's vision and strategy.	Fiona Hughes	2025

Requirement	Action	Owner	Timescale
Structures are designed to support effective delivery and oversight of strategy, are clearly set out, and are regularly reviewed to ensure they remain fit for purpose.	Review committee terms of reference.	Sarah Brookes/ committee chairs	30 June 2024
The membership of board and committees comprises people with diverse backgrounds and attributes, having regard to the diversity of the communities the organisation serves.	Strengthen recruitment pathways to reach more diverse candidates.	Martyn Sargeant/Fiona Hughes	2024 recruitments
The organisation annually publishes information about the appointment of new Board members, and about the diversity skills, and attributes of all the Board members.	Publish information about Board members in the tenant newsletter.	Becci Youlden	30 April 2024
The Board has a strategy for its own renewal, which is based on an agreed statement of the skills, qualifications, diversity and other attributes required.	Review Board skills matrix.	Martyn Sargeant	31 March 2024
A compliance statement is published with the annual report, with an explanation given for any non-compliance.	Include compliance statement in 2024 annual report.	Martyn Sargeant/Sam Gilbert	30 Sept 2024
The Board establishes and documents its appetite for the risks the organisation faces in pursuit of its strategy.	Finalise risk appetite framework.	Fiona Hughes/Richard Hyde	31 March 2024

6. Supporting the SCH Delivery Plan

- 6.1 Effective governance is an important and integral part of ensuring that SCH achieves the objectives set out in the Delivery Plan. The proposals set out in this report support the maintenance of effective governance and therefore the aims of the Delivery Plan.

7. Consultation and engagement

7.1 No consultation has been undertaken in relation to this report.

8. Financial implications

8.1 There are no financial implications arising from this report.

9. Legal implications

9.1 The rules for SCH's governance are set out in the Articles of Association, supported by the standing orders, as well as legislation pertaining to company governance. Whilst adherence to the Code of Governance is not required, it demonstrates a commitment to high governance standards.

10. Risk implications

10.1 SCH has a specific corporate risk – 'failure to have robust governance arrangements in place' – that sets out a series of mitigating actions. The risk is reviewed periodically by the Executive Leadership Team, with the oversight of the Audit and Risk Committee.

11. Equalities implications

11.1 There are no equalities implications arising from this report.

12. List of appendices

App A: draft policy for handling complaints about Board members

14. Background papers

Self-assessment against Code of Governance (available from Sarah Brookes, sbrookes@solihullcommunityhousing.org.uk)

Policy and Procedure for Complaints about Board Members



Date of Board approval:	20 November 2023
Date of next review:	November 2025

1.0 PURPOSE AND SCOPE

- 1.1 SCH has adopted the National Housing Federation's Code of Governance (2020) and its Code of Conduct (2022). Recognised best practice requires a complaints policy and procedure tailored to complaints about board and committee members.
- 1.2 The purpose of this document is to detail a policy and process setting out how disputes and grievances involving members of the board and committees can be raised, and how they are responded to.
- 1.3 Within the Code of Governance, Principle 3 Board Effectiveness contains the requirement as follows:
 - [3.8.7] there is a policy and procedure setting out how disputes and grievances involving members of the board can be raised, and how they are responded to.

Principle 4 Control and Assurance contains the requirement as follows:

- [4.5.3] if a board member has concerns about the board or the organisation that cannot be resolved, these concerns are shared with the board and formally recorded.
- 1.4 The policy below sets out arrangements for employees, customers, and board and committee members to raise disputes and grievances relating to members of SCH's board or committees.

2.0 REFERENCES

- 2.1 NHF Code of Governance (2020 edition)
- 2.2 NHF Code of Conduct (2022 edition)
- 2.3 SMBC/SCH Whistleblowing Policy

3.0 POLICY STATEMENT

3.1 Where a complaint or allegation is made against a board or committee member by another board or committee member, employee, resident or member of the public, this must be made in writing to the Company Secretary, who will inform the Chair. The board or committee member will also be informed of the complaint made against them.

3.2 A preliminary investigation will be conducted by an officer appointed by the Chair [or by the Chief Executive if the complaint is about the Chair] to determine whether a breach of the Code of Conduct has occurred and whether it is a minor or serious breach. The preliminary investigation will also review the complaint alongside the Whistleblowing Policy and, should the complaint fall under the whistleblowing remit, recommend following that procedure.

3.3 Minor Breach

If it is assessed as a minor breach of the Code of Conduct, the board or committee member will be informed in writing of the outcome of the investigation and the case closed. No further action will then be taken, although if another complaint is made against the same board or committee member regarding the same breach, this may be considered as part of any future investigation within a 12 month period.

The Human Resources, Equalities and Remuneration Committee will be informed of the complaint and outcome of the investigation. If a board or committee member wishes to appeal, they should notify the Chair of their decision and the appeal will be heard by the Committee.

3.4 Serious Breach

If it is assessed that a serious breach of the Code of Conduct has occurred, the Human Resources, Equalities and Remuneration Committee will be convened. The board or committee member will be informed of this. In all cases following a serious complaint or allegation which may constitute a breach of the Code of Conduct, the Chair [or Chair of the Human Resources, Equalities and Remuneration Committee if the complaint is about the Chair] will approach three board members to form a review panel. The review panel members must not have any involvement with the complaint. The review panel will choose its own chair from the three members. A meeting date will be set as soon as practicable, while allowing for a full investigation to be carried out.

3.5 In cases where the continued involvement of a board or committee member about whom an allegation has been made may, in the opinion of the review panel,

- damage SCH's reputation; and/or,
- involve material financial detriment to SCH; and/or,
- give rise to claims against SCH.

the review panel may decide to suspend that board or committee member from the board as a precautionary measure pending the outcome of the investigation. A board or committee member upon being temporarily suspended shall take no part in SCH's business but shall continue to receive any remuneration.

The board or committee member will be notified of the steps that will be taken to investigate the complaint and an expected timescale within which the complaint will be dealt with.

- 3.6 The chair of the review panel will appoint an appropriate, competent and independent investigator to review the complaint in detail. This could be the initial investigator or a new appointment. They will prepare a full report looking at the allegation which will be circulated to the review panel and the board or committee member at least five working days in advance of the panel meeting. The Company Secretary will provide administrative and procedural support to the review panel.
- 3.7 At the review panel meeting, the investigator will be asked to present their report, and the board or committee member will be given the opportunity to put their case directly. If appropriate, witnesses can be called by either party. The board or committee member may be accompanied if they so wish but not by a professional representative (e.g. solicitor).
- 3.8 The review panel will consider the case on the day and, where possible, decide what action, if any, should be taken in relation to the board or committee member concerned. The review panel can decide to adjourn to consider its verdict, if it is deemed necessary. However, in this case, the adjournment should not lead to an unnecessary delay in delivering a judgement. This decision should be made without reference to the SCH Board, save where the recommendation is to remove the board or committee member altogether from their position. Additionally, the review panel is able to adjourn the meeting if it wishes to consider any new information presented on the day.
- 3.9 At the following SCH Board meeting the chair of the review panel will report to the Board, as a confidential item, details of the allegation and any action taken. If the review panel recommends removal from the board or committee, this decision must be approved by the SCH Board.
- 3.10 Where a board or committee member feels they have been unfairly or inequitably treated, they should submit their concerns in writing within 14 days of being notified in writing of the outcome of the complaint. They should notify the SCH Chair of their decision to appeal and the appeal will be heard by the Human Resources, Equalities and Remuneration Committee, subject to the three members of the review panel not participating in the proceedings. The board or committee member will be given at least three working days' notice in writing of the time and place of the meeting and of their right to be accompanied.
- 3.11 The Human Resources, Equalities and Remuneration Committee may either confirm the decision, or uphold the appeal and set aside the original decision, or uphold the appeal and substitute an alternative form of action or penalty if they think it is appropriate to do so. The decision will be made as quickly as reasonably possible having due consideration to the complaint, and, except in exceptional circumstances, a decision will be made within three working days of the Human Resources, Equalities and Remuneration Committee meeting and be set out in writing. The decision at appeal is final, there is no further right of appeal.

3.12 Unresolved Concerns

If a concern has been raised about a board or committee member, the Board or the organisation, and following investigation this cannot be resolved, these concerns will be shared with the Board and formally recorded.

4.0 EQUALITY AND DIVERSITY

- 4.1 A Fair Treatment Assessment has been completed. Each of the protected characteristics (under the Equality Act 2010) has been considered as to whether the policy affects particular groups of people in different ways compared to other groups. The impact of the policy on those with protected characteristics has been assessed as neutral.

5.0 RESPONSIBILITIES

- 5.1 The Human Resources, Equalities and Remuneration Committee is responsible for approving this policy and ensuring it is followed when complaints arise.

6.0 HEARING PROCEDURE

- 6.1 The detailed procedure for managing a hearing is attached as appendix A.

SOLIHULL COMMUNITY HOUSING

CODE OF CONDUCT FOR BOARD MEMBERS: HEARINGS PROCEDURE

1.0 The pre-hearing process

- 1.1 The purpose of the pre-hearing process is to allow matters at the hearing to be dealt with fairly and economically. It should alert parties to possible areas of difficulty and, if possible, allow them to be resolved before the hearing. The pre-hearing process will be used to:
- Identify whether the subject member disagrees with any of the findings of fact in the investigation report, including reasons for any disagreements
 - Identify whether those disagreements are likely to be relevant to any matter the hearing needs to decide
 - Identify whether evidence about those disagreements will need to be considered during the hearing
 - Identify if the subject member or the investigating officer wants to call relevant witnesses to give evidence to the review panel
- 1.2 The pre-hearing process will be dealt with by the Company Secretary and carried out in writing. However, occasionally a meeting between the Company Secretary, the relevant parties and their representatives may be necessary.
- 1.3 The Company Secretary will also ask the relevant parties to provide outlines or statements of the evidence their witnesses intend to give. This will allow the review panel to decide how many witnesses may reasonably be needed and to identify the issues they will be dealing with at the hearing.
- 1.4 Parties will not be permitted to raise new disagreements over factual matters in the investigation report at the hearing except in exceptional circumstances, such as new evidence becoming available that the parties could not have produced before.
- 1.5 No third party will be allowed to address the panel unless they are a complainant or are accompanying either the complainant or the subject member.

2.0 Formalities

- 2.1 The chair of the review panel will introduce its members, the officers supporting them, and the subject member whose actions led to the investigation.
- 2.2 The chair will explain the reason for the meeting and outline the procedure to be followed. The chair may choose to vary this procedure in any particular instance where s/he is of the opinion that such a variation is necessary in the interests of fairness.
- 2.3 The subject member may be accompanied if they so wish but not by a professional representative (e.g. solicitor).

- 2.4 The panel may take legal advice from its adviser, in private if necessary, at any time during the hearing or while it considers the outcome. The substance of any legal advice given to the panel should be shared with the subject member and the investigator if they are present.
- 2.5 The chair will confirm that all those involved understand the procedure to be followed and ask if there are any preliminary procedural issues which anyone wishes to raise before the Hearing begins.
- 2.6 If any procedural issues are raised, the panel will hear representations on them, before determining them.
- 2.7 If the subject member is not present at the start of the meeting, the review panel will consider any reasons given by them for non-attendance. If the panel is satisfied that there is good reason for non-attendance, it may adjourn to another date, or proceed if it has been requested to do so by the subject member.
- 2.8 If the review panel is not satisfied that there is good reason for the subject member's non-attendance, or if the subject member failed to provide any reason, the panel can decide:
- whether to consider the matter and make a determination in the absence of the subject member, or
 - agree to adjourn the Hearing to another date.

3.0 The Hearing

- 3.1 The review panel will identify any areas of disagreement between the investigator and the subject member on the investigation report's facts or conclusions.
- 3.2 The investigator will be invited to make representations in support of his/her report and about any written pre-hearing submission of the subject member.
- 3.3 The subject member will then be invited to make representations in support of the fact(s) concerned and whether the evidence gives rise to a breach or breaches of the Code of Conduct.
- 3.4 Members of the panel have the discretion to question any of the parties at any point, as they see fit.
- 3.5 The panel will consider what it has heard in private. The panel may ask the legal advisor to advise them if required.
- 3.6 The chair will then announce to all present at the hearing the panel's decision as to whether or not the subject member has failed to comply with the Code of Conduct, whilst setting out the facts upon which the conclusions have been reached.
- 3.7 If the panel decides that the subject member has not failed to follow the Code of

Conduct, the panel will then consider whether it should make any recommendations to the SCH Board.

4.0 Sanction

- 4.1 If the Panel decides that the subject member has failed to comply with the Code of Conduct, it will consider any verbal or written representations from the investigator, the Company Secretary and the subject member as to:
- whether or not the panel should impose a sanction and/or recommend to the SCH Board that a sanction be imposed; and
 - what form of sanction(s) is/are appropriate;
 - Any mitigation the subject member wishes the Panel to take into account.
- 4.2 The sanctions available are set out in section 5 of this procedure.
- 4.3 The panel will consider in private, accompanied only by its clerk [and legal advisor if required], whether or not to impose/recommend the imposition of a sanction on the subject member and, if so, what form.
- 4.4 The panel will also consider whether or not it should make any recommendations with a view to promoting high standards of conduct among members of the Board and its committees.
- 4.5 If the review panel recommends that sanctions should be imposed on the subject member concerned those sanctions may be immediately implemented if accepted by the subject member.
- 4.6 Where the subject member does not accept the proposed sanctions the review panel will make recommendations to the SCH Board.

5.0 Possible Sanctions

- 5.1 SCH has delegated to the review panel such of its powers to take action in respect of individual members as may be necessary to promote and maintain high standards of conduct. Accordingly the review panel may:
- a) Censure or reprimand the subject member;
 - b) Publish its findings in respect of the subject member's conduct;
 - c) Report its findings to the SCH Board for information;
 - d) Suspend the subject member from acting as a board or committee member of SCH for a period up to six months;
 - e) Instruct the Company Secretary to arrange training for the subject member;
 - f) Withdraw facilities provided to the subject member by the Council, such as a computer, website and/or email and internet access; or
 - g) Exclude the subject member from SCH's offices or other premises, with the exception of meeting rooms as necessary for attending SCH meetings.
- 5.2 Where the subject member is appointed to the Board by Solihull Council, the review

panel may choose to report its findings to the relevant political group leader.

- 5.3 The review panel has no power to disqualify the subject member from acting as a board or committee member or to withdraw the subject member's remuneration.

6.0 Considering the sanction

- 6.1 When deciding on a sanction, the review panel should ensure it is reasonable and proportionate to the subject member's behaviour. Before deciding what sanction to issue, the panel should consider the following questions, along with any other relevant circumstances:

- What was the subject member's intention?
- Did the subject member get advice from officers before the incident?
- Was that advice acted on or ignored in good faith?
- Has there been a breach of trust?
- Has there been financial impropriety, for example improper expense claims or procedural irregularities?
- What was the result of failing to follow the Code of Conduct?
- What were the potential results of the failure to follow the Code of Conduct?
- How serious was the incident?
- Does the subject member accept they were at fault?
- Did the subject member apologise to the relevant people?
- Has the subject member previously been warned or reprimanded for similar misconduct?
- Has the subject member failed to follow the Code of Conduct before?
- Is the subject member likely to do the same thing again?
- How will the sanction be carried out? For example, who will provide the training or mediation?
- Are there any resource or funding implications? For example, if a subject member has repeatedly or blatantly misused the authority's information technology resources, the review panel may consider withdrawing those resources from the subject member.

- 6.2 Sanctions involving restricting access to an authority's premises or equipment should not unnecessarily restrict the subject member's ability to carry out their responsibilities as a member of SCH's Board or its committees. Examples, but not an exhaustive list of mitigating factors are:

- The subject member's previous record of good service.
- Substantiated evidence that the subject member's actions have been affected by ill-health.
- Recognition that there has been a failure to follow the Code of Conduct; co-operation in rectifying the effects of that failure; an apology to affected persons where that is appropriate, self-reporting of the breach by the subject member.
- Compliance with the Code since the events giving rise to the determination.
- Some actions, which may have involved a breach of the Code, may nevertheless have had some beneficial effect for the public.

6.3 Examples, but not an exhaustive list, of aggravating factors are:

- Continuing to deny the facts despite clear contrary evidence.
- Seeking unfairly to blame other people.
- Failing to heed appropriate advice or warnings or previous findings of a failure to follow the provisions of the Code of Conduct.
- Persisting with a pattern of behaviour which involves repeatedly failing to abide by the provisions of the Code.

7.0 Issue of decision

7.1 In announcing its decision at the conclusion of the hearing the panel will briefly set out the reasons for the decision and any sanction.

7.2 The Panel will issue a full written decision including reasons within two weeks of the hearing.

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Meeting of the Board



Report title:	Quarter 2 Performance Update		
Meeting date:	20 th November 2023		
Report from:	Martyn Sargeant, Executive Director – Customer Service, Transformation and Business Support		
Report author/lead officer:	Katy Vincent 07787 286779	Business Intelligence Manager katyvincent@solihullcommunityhousing.org.uk	
Report type:	Confidential Open		
Decision type:	Assurance	Approval	Information

1. Report overview/purpose

- 1.1 To give an update on performance at the end of Quarter 2 of 2023/24 where targets have not been met.

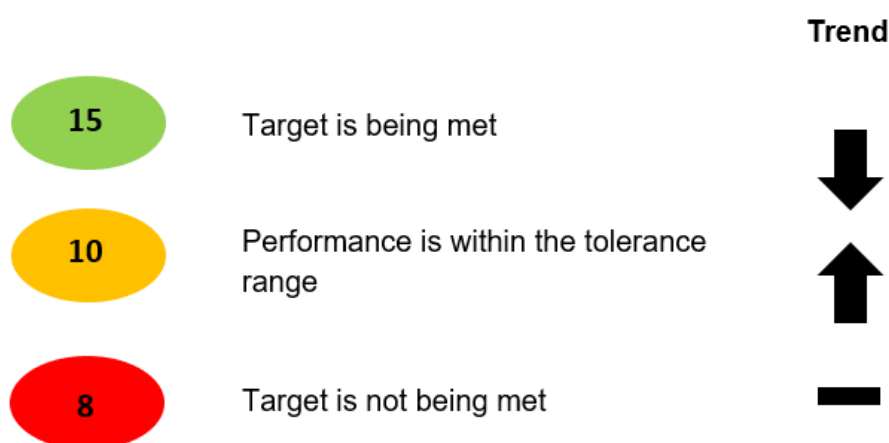
2. Recommendations

- 2.1 The Board is asked to:

- (1) Note those indicators, and the associated narrative, where the target performance has not been achieved.
- (2) To note that the quarterly performance report was reviewed in detail at the Housing Operations Committee on 6 November, and the Housemark benchmarking data will be reviewed at the Committee's meeting in February.

3. Performance Summary

- 3.1 At the end of Q2 2023/24 there were 33 KPIs with targets. In summary, performance was:



3.2 Since the end of Q1 2023/24, improvements have been made against:

- RP01 – Homes that do not meet the Decent Homes Standard. The number of non-decent homes has reduced from 85 to 81, and those which were made decent were due to electrical works.
- RP02b - Repairs completed within target timescale (non-emergency). This indicator has improved in the last two months, and the September outturn (97.72%) is the highest this year.
- BS01 - Percentage of properties with valid gas certificate. This indicator has improved from 99.84% at the end of July to 99.89% at the end of September.
- BS02 - Percentage non-domestic assets covered by a valid FRA. In the last reporting period, there was one communal area with an overdue FRA. This has now been completed and no others are outstanding at the time of reporting.
- AM1b - Percentage domestic properties with a satisfactory Electrical Installation Condition Report. This indicator has improved from 98.53% at the end of July, to 98.85% at the end of September.
- HO3a - Average stay in budget hotels (families with children) – days. The position of this indicator has improved from 37 days at the end of July, following the implementation of the B&B Use Reduction Action Plan.

4. Performance Exceptions

4.1 There were eight red indicators at end of Q2, which is the same as the position at the end of Q1 2023/24. There was a further eight off target but within tolerance, up from two at the end of Q1 2023/24. The red issues were:

4.2 CH02a - Complaints resolved in timescale (Stage 1)

The current year to date position is 69.79%, which is a very slight improvement in comparison to the end of Q1. As the TSM definition is to only report on those received in month, there are still 11 complaints which were received in September which have not been closed which can't be reported as in target until they are closed but are still counted in the denominator. Previous months have been

updated as complaints have been closed. So far of the 32 received in month, 21 have been closed of which 6 were out of target.

The volume of complaints has shown a consistent increase compared with the previous year, from around 25-35 each month to around 35-45.

4.3 BS01 - Percentage of properties with valid gas certificate

At the end of September, there were 9 properties without a valid LGSR. This gave a position of 99.89% properties having a valid gas certificate.

As of 11th October, this has reduced to 6 properties. Of these 6 properties, one is in a high rise and is with the legal team. Two others also have confirmed appointments and another two have had their 7 day letter sent and a legal pack is being prepared. The final property is currently with Neighbourhood Services to start the abandonment process.

4.4 BS03 – Percentage known asbestos locations re-inspected within benchmarked period (communal areas)

The Q2 outturn was 98.03%, and this was due to two communal re-inspections being due at the end of September, but due to workload went overdue.

These were both completed on 6th October, and at the time of reporting there are currently no overdue inspections.

4.5 TP09 – SCH approach to handling complaints

The Q2 outturn was 31.25%, which is a decrease of 17.32% from the Q1 23/24 position.

Further desktop analysis is currently in progress to identify any themes and follow up calls will be made with residents.

We will also identify how many of these customers have made formal complaints, as in the last quarter none expressing dissatisfaction had. Acuity have confirmed other providers have experienced the same with this measure.

4.6 TP12 – SCH approach to handling ASB

The Q2 outturn was 53.57%, which is a decrease of 9.25% from the Q1 2023/24 position.

As per TP09, further desktop analysis is currently in progress, and the Community Safety Manager is also conducting further analysis.

Follow up calls are also being made to residents to gain further detail of their dissatisfaction where appropriate.

4.7 AM1b - Percentage domestic properties with a satisfactory Electrical Installation Condition Report

Whilst this indicator remains below target, the number of properties with a satisfactory EICR has increased, improving this indicator for the second month in a row. At the end of September, there were 112 properties with an overdue EICR compared with 126 at the end of August. This gave an outturn of 98.85%.

Included in these are the properties without a 10yr certificate, and the number of these has reduced to 15.

4.8 AM1h - Overdue FRA remedials (all stock)

The number of overdue remedials arising from FRAs has seen an increase in Q2, and this is in part due to a high number of actions being due in September 2023. Of those now overdue 148 were due in September.

We're currently implementing new processes with the Estates Team to review and close all housekeeping actions. We're also conducting further surveys to identify compartmentation and facade works.

4.9 HO1 - Average stay (families with children) in budget hotels

The year to date outturn is an average stay of 81 days, which is within tolerance of the target of 80 days but the in month position was 117 days.

The average stay in temporary accommodation is slightly over target because the Housing Options team have successfully moved on a number of families with complex needs who require specific housing. The Housing Options team will continue to move households out of temporary accommodation as soon as possible to meet the B&B Use Reduction Action Plan.

5. Tenant Satisfaction Measures

During Q2, the next round of quarterly tenant satisfaction measures surveys were undertaken. Of the twelve measures, two were below target (as detailed above), six were below target but within tolerance, and four were above target.

This has seen a reduction in the number of measures above target, as this was eight in the last report. However, overall satisfaction with SCH has increased slightly again to 80.42%, which is our highest result since we have been running these surveys.

Additional analysis collating previous quarters data is underway, and a satisfaction action log has been created to monitor progress against actions identified through this.

Housemark are also carrying out some initial benchmarking based on the Q1 and Q2 data for 2023/24. We have submitted our data for this, and this is for all measures therefore including both the tenant perception and the management information indicators. Results are anticipated at the end of November, and we will be benchmarked against our peer group (English LA's and ALMO's with under 10,000 properties.)

6. Annual Benchmarking

During this quarter, we have also received results from our benchmarking for our 2022/23 annual cost and performance data from Housemark. This annual performance summary included as appendix A, shows how our costs and performance compare for the 2022/23 financial year against our peer group. Our peer group is English Local Authorities and ALMOs with less than 10,000 rented units, and there are a total of 57 providers in this group. Generally, across the report our performance was within the 2nd or 3rd quartile. Overall, our costs were in line with that of the peer group, with our housing management spend below the median but above in some parts of asset management.

Areas of good performance included:

- Customer Experience – our overall satisfaction was above the group median
- Building Safety – for all indicators we were either at the median or above
- Non-emergency repairs completed within target timescale – we're in the 1st quartile for this indicator

Areas for improvement:

- Current tenant arrears – for our 2022/23 position we were in the 3rd quartile, which is the same position as 2021/22
- Staff turnover - for 2022/23 our position was in the 4th quartile, and saw a significant increase from 2021/22

Following presenting these results to SCH ELT and SLT, follow up work has been identified. One particular area of focus was a deep dive into rent arrears. As we are on the upper end of the stock numbers for our peer group, we are working with Housemark to review this and ensure we are in a truly comparable group. Housemark are also completing some further analysis on complaints for us, particularly around the cost of managing these. Housemark will also be delivering feedback from this benchmarking to the Housing Operations Committee.

7. Supporting the SCH Delivery Plan

- 7.1 Supports the enabling theme *'How we work: delivering sustainable, value-for-money services, proactively adopting digital technology to enhance how customers interact with SCH, whilst using robust data to drive evidence-led service improvement'*.

8. Consultation and engagement

- 8.1 There has been no specific consultation in relation to this report; however, the SCHAPE panel will consider the summary of performance.

9. Financial implications

- 9.1 There are no specific cost implications arising from this information report. The costs of delivering services are covered by the annual budget setting process.

10. Legal implications

- 10.1 TSM management and perception indicators are a regulatory requirement.

11. Risk implications

- 11.1 Not calculating the TSMs accurately in line with the technical requirements could lead to a regulatory judgement.

12. Equalities implications

- 12.1 There are no equalities implications arising from this report.

13. Appendices

- A. Annual Performance Summary 2023 – Solihull Community Housing



Annual Performance Summary
Solihull Community Housing

Executive summary

Social landlords are facing increased scrutiny. The quality and safety of social housing is under the microscope and significant investment is required to ensure the houses we provide are well-maintained, safe and environmentally friendly.

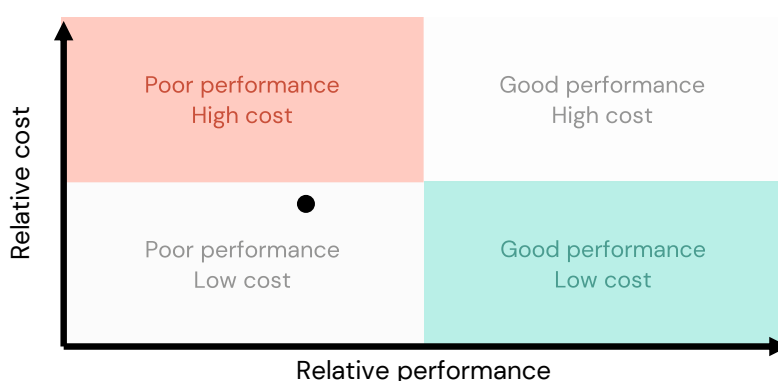
Unlocking the investment required against the current backdrop of high inflation and rising customer expectations will require good financial management and robust business decisions.

Your Housemark membership provides you with the comparisons and insight you need across all core landlord functions. Using Housemark data you can understand where you are investing, and how this is impacting on your operational performance and customer experience.

This annual performance summary shows how your costs and performance compare for the 2022/23 financial year against a group of similar landlords. To understand these scores in context and how you might improve, contact data@housemark.co.uk.

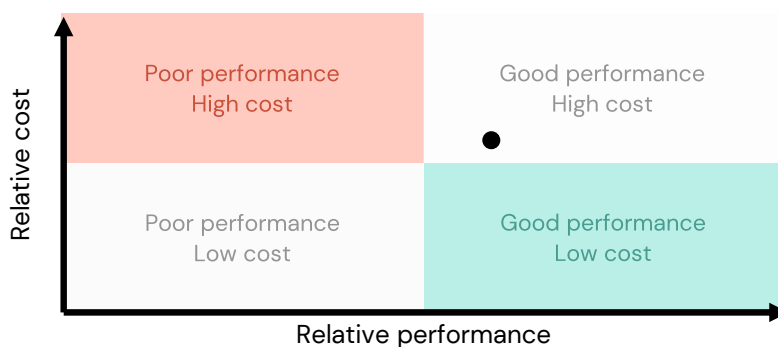
Operational productivity

Your overall operational performance was below that of your peers, however, your costs are lower. This is based on your overheads cost per property of £425, front-line housing management cost per property of £263 and your average performance across arrears, void loss, staff sickness and turnover.



Asset management

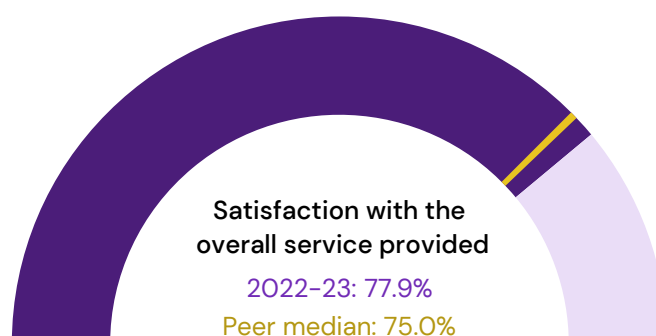
Your overall maintenance performance was slightly above that of your peers, however, your front-line costs are higher. This is based on your responsive repairs and void works cost per property of £787, your cyclical maintenance and major works cost per property of £2,445 and your average performance across gas safety, repairs volumes, repairs completed within target and repairs satisfaction.



Customer experience

Your overall satisfaction score was slightly above that of your peers. This is based on your annual perception survey results from 2022/2023 and places you in quartile 2.

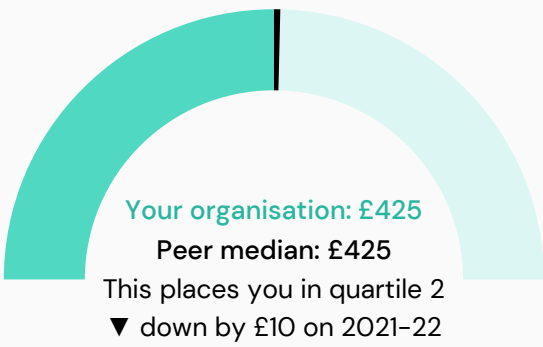
It is important to understand the impact of your operational context and how you carried out your survey to build a clear understanding of relative performance. We published an analysis of the key variables that influence the outcomes of satisfaction surveys – get your copy [here](#).



Operational productivity

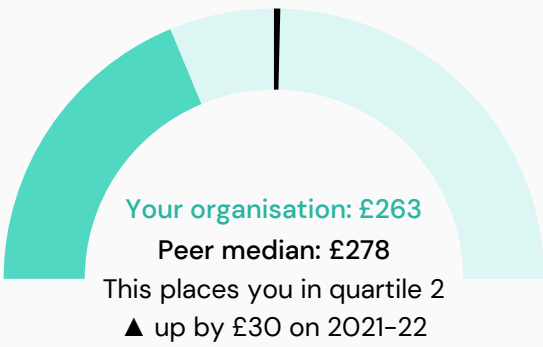
Overheads cost per property

Housemark’s definition of overheads includes all spend on premises, ITC, finance, HR and other central back-office costs. Central overheads make up 49% of your spend, finance, HR and IT contribute 39% and 12% is spent on premises. Larger housing associations can typically achieve some economies of scale in overheads, particularly in the finance and central functions. However, recent years have seen increases particularly relating to IT investment and central business improvement staffing. For local authorities, overheads are largely made up of recharges to the general fund.



Housing management cost per property (direct)

Housing management is a core landlord service largely made up of front-line employee costs – including specialist rent collection officers, lettings teams, ASB managers and generic housing, neighbourhood officers and administrators. These staff play a vital role in delivering an excellent customer experience, and increasingly landlords are looking at how these functions are structured to deliver services in the most efficient way possible. Housemark is a key resource when it comes to comparing staffing structures and outcomes.



Housing management

Current tenant arrears



2022-23: 3.58%
▲ up by 0.18 on 2021-22
Peer median: 2.53%
This places you in quartile 3

The cost-of-living crisis has placed significant pressure on tenants who in many cases are having to make tough choices about what they can afford. At a national level we have seen a slow and steady uptick in arrears over the past year, mostly driven by urban landlords who typically have a more challenging arrears profile.

Rent loss due to voids



2022-23: 1.91%
▲ up by 0.19 on 2021-22
Peer median: 1.99%
This places you in quartile 2

Efforts to clear persistent voids backlogs have been hampered by the increased price of materials and volatility in the labour market. Whilst vacancy rates at the average landlord have now returned to normal, re-let times remain higher due to dwellings being empty for longer. Void loss across the sector is improving but is likely to remain higher than pre-pandemic levels until March 2024.

Staff wellbeing

Average working days lost due to sickness absence



No data for 2022-23
2021-22: 11.9
Peer median: 10.3

Sickness absence across the [entire UK workforce](#) remains higher than prior to the pandemic. Two-thirds of employers report COVID is still a significant cause of absence. Social landlords historically report higher sickness absence than other sectors which remains true in 2023, particularly landlords with a high proportion of customer-facing staff.

Percentage of staff turnover in the year



2022-23: 18.77%
▲ up by 7.78 on 2021-22
Peer median: 13.41%
This places you in quartile 4

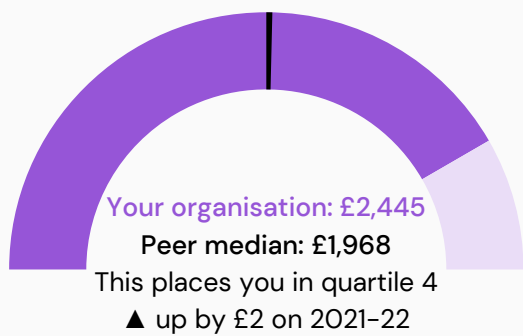
Staff attrition remains stubbornly high for the average landlord. The average cost per employee has increased 6.6% over the past year, but Gallup Research suggests pay and benefits are not the only thing that matters to employees. 41% of employees surveyed said that [improving the workplace culture](#) is the most important thing an employer can do to keep them engaged.

Asset management

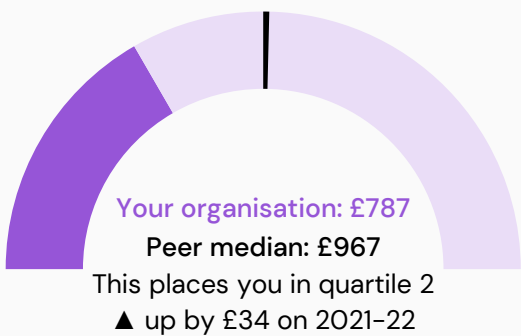
Housing maintenance cost per property (direct)

Construction sector price inflation – an effect of labour and materials shortages – resulted in a challenging operating environment for repairs teams during 2022/23. In an industry known for tight margins we have seen many contractors going out of business with many landlords looking to bring services in-house. Our data shows that neither method of repairs delivery is intrinsically better value for money, with both relying on the capabilities and resources available to all parties to make the service a success.

Major works and cyclical maintenance



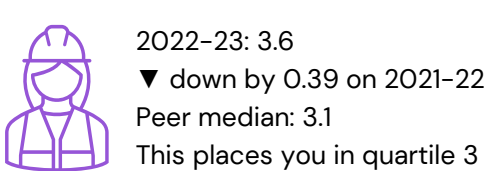
Responsive repairs and void works



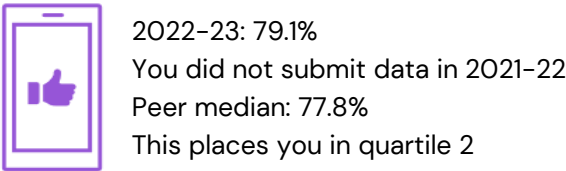
Responsive repairs

While repairs volumes have largely returned to pre-pandemic levels, repairs teams continue to struggle to provide a service that meets residents’ expectations – with landlords struggling to meet the same level of performance as previous years, which often results in lower satisfaction rates.

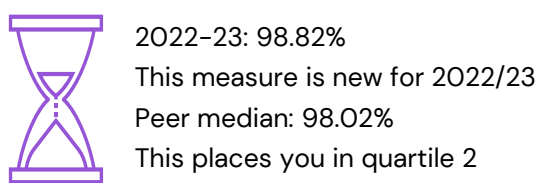
Number of responsive repairs per property



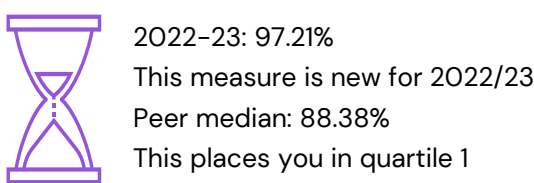
Satisfaction with the repairs service over the last 12 months (perception)



Percentage of emergency repairs completed within target timescale

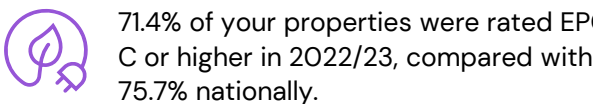


Percentage of non-emergency repairs completed within target timescale



Maintaining homes

Building safety and quality has become one of the most important challenges facing landlords in 2023. In addition to existing safety compliance, the consequences of poor maintenance such as damp and mouldy homes became a key concern, resulting in parliamentary legislation. Measuring quality and safety compliance will require technical expertise in the short to medium term as landlords build up a picture of stock and keep it updated in line with regulatory expectations.



Building Safety 2022-23 results	Your result	Peer median
Dwellings with valid gas safety cert	99.94%	99.94%
Properties with EICR up to 5 yrs old	98.64%	92.75%
Non-domestic assets covered by valid Fire Risk Assessment	100.00%	100.00%
Non-domestic assets covered by current asbestos survey	100.00%	100.00%
Relevant water installations covered by risk assessment	100.00%	100.00%
Lift safety (LOLER) examinations completed within target	100.00%	100.00%

Customer experience

Perception

Overall satisfaction with the service provided by social landlords has been declining for a number of years and is now on average 10 percentage points lower than five years ago. However, latest results from our monthly monitoring are providing encouraging signs of improvement, driven primarily by English landlords focussing on improving the customer experience in light of new regulation.

Satisfaction with the overall service provided by the landlord



2022-23: 77.9%
Peer median: 75.0%
This places you in quartile 2
▼ down by 0.10 on 2021-22

Satisfaction that the landlord listens to views and acts upon them



2022-23: 72.3%
Peer median: 58.8%
This places you in quartile 1
▲ up by 2.30 on 2021-22

Complaints

We know there is variation amongst landlords in what is recorded as a formal complaint, particularly when it comes to service requests. As such, high volumes are not necessarily negative as long as they drive service improvement. Our data shows an overall increase in volumes as tenants become more aware of ways to voice concerns. Definitions for these measures differ slightly across the UK in line with differing regulatory regimes but are broadly comparable and so have been combined for this report.

Stage 1 complaints received per 1,000 properties



2022-23: 36.0
This measure is new for 2022/23
Peer median: 32.9
This places you in quartile 3

Percentage of complaints responded to within target time



2022-23: 93.2%
This measure is new for 2022/23
Peer median: 80.3%
This places you in quartile 3

Anti-social behaviour

Reports of ASB vary significantly between landlords. Large urban landlords typically report significantly higher volumes than their smaller more rural providers. Landlord approaches to what gets logged as ASB can also vary significantly with incidents such as rubbish and garden nuisance treated differently.

Number of new ASB cases reported per 1,000 properties



2022-23: 35.0
▼ down by 7.86 on 2021-22
Peer median: 35.0
This places you in quartile 2

Satisfaction that the landlord makes a positive contribution to neighbourhoods



2022-23: 74.4%
Peer median: 60.5%
This places you in quartile 1

Contact

Contact centres across the UK are under significant pressure as average wait times continue to increase and have quadrupled in just four years. Despite the deployment of digital channels, the average landlord still receives just as many calls, but answers fewer and spends longer on each call. This is exacerbated by contact centres having to manage with fewer staff numbers and significant staff turnover.

Number of calls answered per property



2022-23: 9.0
▼ down by 0.74 on 2021-22
Peer median: 5.9
This places you in quartile 4

Average time to answer inbound telephone calls (seconds)



2022-23: 195.0
▼ down by 92.00 on 2021-22
Peer median: 199.5
This places you in quartile 2

Appendix

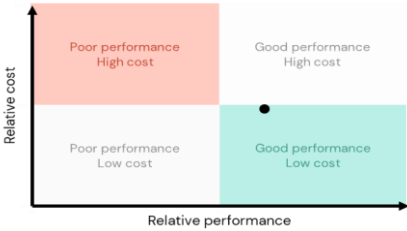
The data in this report is based on cost and performance data for the financial year 2022–23, unless otherwise stated. All quartile comparisons are based on your bespoke peer group which is detailed below.

Note, we have issued this report now because we already hold data for most of your peers. However, due to mergers, acquisitions, entity name changes and late submissions, your peer group may change over time. Housemark can provide information and advice on peer groups on request, including expected submission dates for any potential latecomers.

Further analysis against different peer groups is recommended using Housemark’s online reporting tool. Our online tool includes hundreds of additional measures that can help you understand your performance in context. The tool displays live data and so if more of your peers submit data, your results may differ compared to this report.

Summary Quadrant

This report includes quadrants that summarise how well you perform compared to your peer group within two key areas. These are calculated using all the KPIs included on those pages. For example, ‘Operational Productivity’ plots your average relative cost position using your overheads and housing management cost per property results and your average relative performance position using your arrears, void loss, staff sickness and turnover results.



Peer group

The organisations in your peer group have the following characteristics:

Name

English LAs & ALMOs <10k

Size

0 – 9,797 units

Region

- North East ✓
- North West ✓
- Yorkshire and Humberside ✓
- Eastern ✓
- East Midlands ✓
- West Midlands ✓
- London ✓
- South East ✓
- South West ✓
- Scotland
- Wales
- Northern Ireland
- Other

Organisation type

- ALMOs ✓
- London Boroughs ✓
- Mets/Unitaries ✓
- Districts ✓
- Housing Association (LSVT)
- Housing Association (Traditional)
- Other

DLO

- Yes ✓
- No ✓
- No data ✓

Total sample size

57



Board Forward Plan

Monday 20 November 2023 AGM		
Brought forward from:	Agenda Item	Owner
	AGM	Andrew Kinsey
	Quarter 2 2023/24 Performance Report (above the line?)	Martyn Sargeant/ Becci Youlden
	Quarter 2 2023/24 Health and Safety Report	Mark Wills
	Quarter 2 2023/24 Financial Monitoring (September 2023)	Sam Gilbert
4/9/23	Medium Term Financial Strategy Update	Sam Gilbert
	HRA Budget 2024/25 (including rents)	Sam Gilbert
	Chair's Report from Housing Operations Committee on 18 September 2023 and 6 November 2023	Phil Hardy
	Chair's Report from Audit and Risk Committee 25 September 2023	Mark Thrasher
	Chair's Report from Building Safety Committee 9 October 2023	Richard Hyde
	Chair's Report from Human Resources, Equalities and Remuneration Committee on 16 October 2023	Louise Tubbs
	Draft Delivery Plan 2024/25	Martyn Sargeant
	Annual Review of Compliance against NHF Code of Governance	Martyn Sargeant
4/9/23	'The Big Conversation' Update include in CEO update	Becci Youlden
4/9/23	Spandrel Panel Update (including financial impact and liability)	Darren Baggs
Monday 19 February 2024		
Brought forward from:	Agenda Item	Owner
	Quarter 3 2023/24 Performance Exception Report	Martyn Sargeant
	Quarter 3 2023/24 Health and Safety Report	Mark Wills
	Quarter 3 2023/24 Financial Monitoring (December 2023)	Sam Gilbert
	Knowledge and Information Strategy	Becci Youlden
20/11/23	SCH/SMBC Management Agreement	Martyn Sargeant
	Chair's Report from Audit and Risk Committee 11 December 2023	Mark Thrasher
	Chair's Report from Building Safety Task and Finish Group 29 January 2024	Richard Hyde
	Chair's Report from Housing Operations Committee on 5 February 2024	Phil Hardy

Monday 20 May 2024

Brought forward from:	Agenda Item	Owner
	Quarter 4 2023/24 Performance Exception Report	Martyn Sargeant
	Quarter 4 2023/24 Health and Safety Report	Mark Wills
	Quarter 4 2023/24 Financial Monitoring (March 2023)	Sam Gilbert
	Financial Outturn 2023/24	Sam Gilbert
	Chair's Report from Audit and Risk Committee 4 March 2024	Mark Thrasher
	Chair's Report from Building Safety Task and Finish Group 29 April 2024	Richard Hyde
	Chair's Report from Human Resources, Equalities and Remuneration Committee on 11 March 2024	Louise Tubbs
	Chair's Report from Housing Operations Committee on 9 May 2024	Phil Hardy

Regular Items (every meeting):

- Minutes of Previous Meeting
- Action Log
- Declarations of Interest
- Minutes from Committee Meetings

Quarterly Reports:

- Performance (Exception Reporting)
- Financial Monitoring
- Health & Safety Report (including data on accidents)

Annual reports:

- Governance/SO Review (Martyn Sargeant – Sept 24)
- Corporate Risk review (Mark Wills – Sept 24)
- Review against Code of Governance for Complaints (Becci Youlden – Sept 24)

13/11/23