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Solihull Community Housing

SCH: Board Meeting

Tuesday 15 September 2026 - 6.00 pm at Endeavour House - Meriden Drive, Kingshust

Agenda

Ref	Item	Purpose	Lead	Report Type	Report classification
1.	Chair's Welcome and Introduction	For information	Simon Wilson	Verbal	Open
2.	Apologies for Absence	For noting	Simon Wilson	Verbal	Open
3.	Declarations of Interest	For noting	All	Verbal	Open
4.	Written Resolution of the Board Meeting	For information	Paul Edwards	Written 3 - 4	Open
5.	Minutes of the Meeting held on: • 3 June 2026 and • 17 June 2026	For approval	Simon Wilson	Written 5 - 24	Open
6.	Action Log	For approval	Simon Wilson	Written 25 - 28	Open
7.	Chief Executive's Update	For information	Mark Pearson	Written 29 - 220	Open
8.	Strategic Performance Report Quarter 1 2026/27	For assurance	Becci Youlden	Written 221 - 236	Open
9.	Building Safety Report Quarter 1 - 2026/27	For assurance	Becci Youlden	Written 237 - 264	Open
10.	Housing Ombudsman Service Complaints - Annual Report and Service Improvement Plan	For assurance	Becci Youlden	Written 265 - 316	Open
11.	Corporate and Joint Risk Management Report	For assurance	Mark Wills	Written 317 - 326	Open
12.	Health and Safety Quarterly Report: Quarter 1 2026/27	For assurance	Mark Wills	Written 327 - 332	Open
13.	Biomass Heating System Update - Half Year review	For approval	Andy Duke	Written 333 - 354	**Closed**

14.	Statutory Accounts 2025/26	For approval	Sam Gilbert	Written 355 - 450	Open
15.	Financial Monitoring and Forecast – Quarter 1 2026/27	For assurance	Sam Gilbert	Written 451 - 458	Open
16.	HRA Budget Strategy Review	For assurance	Sam Gilbert	Written 459 - 478	**Closed**
17.	Tenancy Agreement	For assurance	Carol Trappett	Written 479 - 594	Open
18.	Proposed Changes to Rent Charging Periods	For information	Carol Trappett	Written 595 - 608	Open
19.	Chair's Report from Audit & Risk Committee Meeting held on 6 July 2026 *Para* • Annual Assurance Report • Proposed Board Assurance Map	For approval	Mark Thrasher	Written 609 - 634	**Closed**
20.	Chair's Report from Customer Experience Committee Meeting held on 2 September 2026	For assurance	Susan Buckley	Verbal	**Closed**
21.	Chair's Report from Performance and Safety Committee Meeting on 7 September 2026	For assurance	Phil Hardy	Verbal	**Closed**
22.	Forward Plan	For information	Simon Wilson	635 - 636	Open
23.	Any Other Business	For information	All	Verbal	Open

Meeting of the Board

Report title:	Written Resolution of the Board	
Meeting date:	15 September 2026	
Report from:	Paul Edwards, Executive Director – Customer Experience and Corporate Support	
Report author/ lead officer:	Paul Edwards 07990 648392	Executive Director paul.edwards@solihullcommunityhousing.org.uk
Report type:	~~Confidential~~ Open	
Decision type:	~~Assurance~~	~~Approval~~ Information

1. Report overview/purpose

1.1 The purpose of this report is to note the formal decision of the Board made by way of written resolution in accordance with article 60 of the Articles of Association which provides that a resolution in writing, signed by all Board Members entitled to receive notice of a meeting, is as valid and effective as if it had been passed at a duly convened and quorate Board meeting.

2. Recommendations

The Board is asked to note the report.

3. Background

3.1 The Board meeting held on 3 June 2026 was not quorate and, therefore, the Board was unable to formally transact business.

3.2 Following the meeting, the papers relating to the matters requiring Board decision were to Board Members who were members of the Board on 3rd June and who signed a resolution confirming their agreement to the following decisions:

Board appointments

- Approval of the appointment of Deb Bannigan as an Independent Board Member
- Approval of the appointment of Gottfried Plange-Welbeck as a Co-opted Board Member
- Approval of the appointment of Dale Taber and Shajeda Ashraf as Tenant Board Members
- Noting the continuation of Councillor Dave Pinwell as a Council-appointed Board Member

- Noting the appointment of Councillor Michael Carthew and Councillor Michael James as Council-appointed Board Members

Other decisions

- Approval of the Occupational Health and Safety Policy
- Approval of the proposed changes to the Financial Regulations

4. Supporting the SCH Delivery Plan

4.1 The matters set out in this report supports effective governance and oversight of SCH's activities.

5. Consultation and engagement

5.1 No formal consultation is required in relation to this report.

7. Financial implications

7.1 There are no additional financial implications arising directly from the matters presented in this report. The changes to the Financial Regulations set out the framework to support effective financial control.

8. Legal implications

8.1 The use of a written resolution in accordance with article 60 of the Articles of Association ensures that decisions are approved in accordance with SCH’s Articles of Association.

9. Risk implications

9.1 SCH operates a comprehensive risk management framework, recording and managing risks at both a strategic and operational level. Maintaining effective governance arrangements and appropriate Board oversight is an important element of SCH's approach to managing corporate risk.

10. Equalities implications

10.1 Not applicable

11. List of appendices

11.1 No Appendices.

SCH BOARD MEETING - 2 JUNE 2026

MINUTES

Present: Simon Wilson, Shajeda Ashraf, Deb Bannigan, Michael Carthew, Michael James, Mark Parker, Gottfried Plange-Welbeck and Dale Taber.

Note: the meeting was not quorate

Officers: Lee Sugden – Interim Chief Executive
Darren Baggs – Executive Director of Operations
Sarah Brookes – Business Support Manager
Andy Duke – Head of Assets and Development
Paul Edwards – Executive Director of Customer Experience and Corporate Support
Sam Gilbert – Chief Finance Officer
Abel Phiri – Head of Building Safety
Carol Trappett – Head of Housing and Neighbourhoods
Perry Wardle - Director of Economy and Infrastructure
Mark Wills – Health, Safety and Risk Manager
Becci Youlden – Head of Customer Experience

1. CHAIR'S WELCOME AND FORMAL ADMISSION OF NEW BOARD MEMBERS

The Chair, Simon Wilson, welcomed Board members and officers to the meeting. A particular welcome was extended to Deb Bannigan, Gottfried Plange-Welbeck, Dale Taber, Shajeda Ashraf, Councillor Michael Carthew and Councillor Michael James who were attending their first meeting following their appointment to the Board.

Paul Edwards presented an overview of the arrangements relating to Board membership and appointments. He explained that the current Articles of Association permitted the appointment of three independent Board members. The Council have agreed to amend our articles of association to increase the number of independent members to four. This should happen in parallel with changes to the management agreement which we anticipate will take place over the coming months. We identified two excellent independent Board members during the recent recruitment exercise. We are using our powers to co-opt one of the members pending the formal changes in the Articles.

Simon Wilson formally recorded the Board's thanks to Bernie Donnelly and Gail Sleigh, whose terms of office had come to an end. The Board expressed its appreciation for their contribution, commitment and service to SCH during their time as Board members.

RESOLVED

(1) APPROVED:	the appointment of Deb Bannigan as an Independent Board Member.
(2) APPROVED:	the appointment of Gottfried Plange-Welbeck as a Co-opted Board Member.
(3) APPROVED:	the appointment of Dale Taber and Shajeda Ashraf as Tenant Board Members.
(4) NOTED:	the continuation of Councillor Dave Pinwell as a Council-appointed Board Member.
(5) NOTED:	the appointment of Councillor Michael Carthew and Councillor Michael James as Council-appointed Board Members.

(6) RECORDED: the Board's thanks and appreciation to Bernie Donnelly and Gail Sleigh for their service and contribution to SCH.

2. APOLOGIES FOR ABSENCE

Apologies for absence were received from Susan Buckley, Phil Hardy, Dave Pinwell and Mark Thrasher. It was noted for the record that Councillor Mark Parker joined the meeting at 18:12.

3. DECLARATIONS OF INTEREST

Deb Bannigan declared an interest in relation to Campbell Tickell.
No other declarations of interest were made.

The Board was reminded to declare any interests relating to specific agenda items at the appropriate point in the meeting if required.

4. MINUTES OF THE MEETING HELD ON 24 FEBRUARY 2026

The minutes of the meeting held on 24 February 2026 were reviewed. No amendments were proposed and the Board confirmed the minutes as a true and accurate record.

5. ACTION LOG

The Board reviewed the Action Log and noted that actions had either been resolved or were progressing appropriately.

DECISION

(1) APPROVED: the Action Log.

6. CHIEF EXECUTIVE'S UPDATE REPORT

Lee Sugden presented the report and provided an update on a number of key strategic and operational matters.

Lee highlighted that the recent monthly Board bulletin had included an update on the funding award for the district heating system. It was noted that the programme of efficiency improvements and upgrades was progressing well and the additional funding secured from the Heat Network Efficiency Scheme (HNES) would be used to support upgrades to a further five plantrooms serving ten high rise buildings. Upon completion of the current phase of works, only five plantrooms would remain requiring future upgrade works.

Lee also provided an update on the remediation programme for spandrel panels. The Board noted that SCH had submitted the required Building Assessment Certificate applications and supporting information to the Building Safety Regulator (BSR) and was awaiting the outcome of those submissions. Progress remained dependent upon regulatory approval being granted before remediation works could proceed. Lee explained that delays within the BSR approval process continued to impact timescales and acknowledged the frustration this was causing for both officers and residents.

Councillor Michael James queried whether there was potential to develop a more local fuel supply source in the future to reduce transportation costs and minimise the impact of fuel costs on tenants. In response, Lee advised that the ongoing review of the biomass system would consider the most appropriate long-term fuel source and operating model.

Lee advised that a Council-led working group was continuing its review of the biomass heating system and it was anticipated that recommendations would be reported back to the Board in the autumn. *Action 20260602-BOARD-001*

Gottfried Plange-Welbeck commented on the wider supply chain considerations associated with the biomass system and welcomed the improvements already achieved through the upgrade programme. Officers confirmed that the completed works had delivered measurable improvements in system efficiency.

Lee also advised that SCH continued to monitor developments relating to changes in social housing legislation, including reforms affecting the Right to Buy. The Board would continue to receive updates on any legislative changes and the potential implications for SCH and its tenants.

Gottfried Plange-Welbeck sought assurance regarding SCH's preparedness for the implementation of Awaab's Law. Darren Baggs provided an overview of the legislation and confirmed that Phase 1 had been successfully implemented in October 2025. He advised that preparations for Phase 2 were progressing and would build upon the arrangements already established under Phase 1, whilst introducing additional areas of responsibility. Simon Wilson reiterated that compliance with Awaab's Law remained a key organisational priority.

DECISION

(1) NOTED: the contents of the report.

7. STRATEGIC PERFORMANCE REPORT QUARTER 4 2025/26

Becci Youlden presented the report and provided an overview of the composition of the Strategic Performance Report, explaining how performance information was collected, monitored and presented to the Board.

Of the 34 Key Performance Indicators (KPIs), 11 had achieved target, 11 were within tolerance and 12 had not met target. Becci advised that overall performance remained stable, with improvement activity underway in areas where performance remained below target.

Becci highlighted a number of positive performance outcomes, including improved complaint handling performance, increased transactional customer satisfaction and improvements in damp and mould performance following the introduction of Awaab's Law requirements. There was a reduction in the number of homes failing the Decent Homes Standard compared with the previous year.

The Board discussed performance pressures within the Contact Centre. Becci explained that staffing challenges had adversely impacted Average Speed of Answer (ASA) performance. A review of the Contact Centre structure had been undertaken and recruitment levels had been increased to provide additional resilience. The revised arrangements had been implemented during May and early indications suggested a positive impact on performance.

A discussion took place on the emergency repairs completed within timescale. Darren Baggs advised that performance remained below target and that a significant proportion of the underperformance related to external contractor delivery. A detailed review had been undertaken to identify the underlying causes and improvement actions were being progressed.

The Board also considered performance relating to Electrical Installation Condition Reports (EICRs). Darren Baggs advised that a significant proportion of non-compliance was attributable to access issues and outlined the revised approach being piloted to improve access arrangements. The new process was beginning to deliver positive results.

In relation to damp and mould remedial actions, Darren Baggs explained that performance reporting reflected both the introduction of Awaab's Law and revised performance methodologies.

Dale Taber also queried the percentage of fire safety remedial actions completed within timescale. Abel Phiri advised that a review had identified that the completion timescales originally assigned by fire risk assessors were, in some cases, unrealistic and did not accurately reflect the complexity of the required works. Revised timescales had been introduced and processes strengthened to provide assurance that resident safety was not compromised. It was also noted that a review had identified instances where the correct procedures had not been consistently followed and actions had been implemented to address this.

Councillor Michael Carthew referred to the Tenant Satisfaction Measure relating to complaints handling and sought assurance regarding how customer feedback was gathered. Becci explained that tenant perception surveys were independently undertaken by Acuity and that responses were monitored through a red, amber and green escalation process, enabling issues to be prioritised and addressed according to risk and severity.

Councillor Michael James queried the approach to Decent Homes investment and the replacement of kitchens. Darren Baggs explained that all vacant properties were required to meet the SCH lettable standard. Stock condition surveys informed the capital investment programme and investment priorities were determined using the data collected through those surveys.

Gottfried Plange-Welbeck sought clarification regarding work in progress and responsive repairs data and whether this was reflected within the Board reporting framework. Darren Baggs confirmed that more detailed operational dashboards were used to monitor and manage work in progress and responsive repairs activity, with this information reviewed routinely at an operational level.

Gottfried Plange-Welbeck referred to occupied properties with a capped gas supply and sought assurance that appropriate welfare checks were being undertaken. He emphasised the importance of ensuring that vulnerable residents were identified and supported where compliance activity could not be completed, and that sufficient assurance arrangements were in place to manage any associated risks.

Abel Phiri advised that officers were developing a revised process which would utilise vulnerability information to better target and prioritise engagement activity. He confirmed that this work remained in progress. Gottfried requested that future reporting include assurance regarding the number of affected properties and the welfare checks undertaken. *Action 20260602-BOARD-002*

Councillor Michael Carthew queried whether residents raising complaints were routinely signposted to available support and advocacy arrangements. Becci advised that information regarding the complaints process was promoted through a range of channels including newsletters, social media and customer communications. She also

explained that the SCHape panel had recently undertaken a review of the complaints process.
Councillor Michael James emphasised the importance of ensuring that the complaints process remained as simple and accessible as possible for residents. In response, Becci advised that SCH's Tenant Mystery Shoppers could be invited to review the accessibility and ease of the complaints process and provide feedback to support future improvements. *Action 20260602-BOARD-003*

DECISION

(1) REVIEWED:	the year end performance 2025/26 in the Strategic Performance Report and associated appendices.
(**2) NOTED:**	the actions being taken in relation to areas of underperformance.
(3) NOTED:	the new Key Performance Indicators (KPIs) and targets for 2026/27 (Appendix B) approved by the Board as part of the new Delivery Plan.

8. BUILDING SAFETY REPORT (QUARTER 4 25/26)

The meeting adjourned at 19:00 and reconvened at 19:06.

Becci Youlden introduced the report and invited Abel Phiri to present the detailed performance information.

Abel Phiri highlighted the key areas of performance and advised that the accompanying commentary within the report provided important context to the performance indicators, explaining the reasons for areas of underperformance and the mitigating actions being taken.

Darren Baggs reminded members that there was no tolerance applied to building safety compliance indicators and emphasised the importance of the narrative within the report in understanding the reasons behind any indicators reported as red and the actions being taken to address them.

Referring to the commentary contained within the report, Michael James sought clarification regarding Water Risk Assessments (WRAs). Abel Phiri outlined the process for undertaking WRAs and explained how performance was monitored and reported. There is no set frequency period in law to undertake water risk assessments however, industry best practice is every 2 years, and which is in place at SCH. In addition, SCH goes a little further and targets a 10% sample of homes where relevant. Where risks are identified, (for the block, communal facilities and individual flats) mitigations are programmed in relation to frequency, systems, water testing, flushing systems while more permeant solutions are considered and programmed. SCH specialist contractor, IWS, advised no further mitigations are required ahead of remedial works being undertaken.

Gottfried Plange-Welbeck queried whether future performance reports could provide additional assurance regarding the overall safety position alongside the performance information. *Action 20260602-BOARD-004.*

Abel Phiri explained that there was an important distinction between the completion of risk assessments and the completion of any remedial actions arising from those assessments. Whilst the required risk assessments had been completed, some associated actions remained outstanding. He advised that further detail regarding this

position had been included within the supplementary paper circulated prior to the meeting on 1 June 2026.

The Board received assurance regarding the management of building safety compliance and the actions being taken in relation to outstanding remedial works.

DECISION

(1) NOTED:	the contents of the Building Safety Performance Report.
(2) NOTED:	the action being taken where performance targets were not being met.

9. VOICE OF THE CUSTOMER REPORT (QUARTER 4 25/26)

Becci Youlden presented the report and provided an overview of the Tenant Satisfaction Measures, Complaints performance and compliance with the Service Standards. She advised that the complaints dashboard provided additional detail regarding complaint handling performance and trends, whilst the Service Standards reporting enabled the Board to monitor compliance against customer service standards.

Although the majority of standards were being achieved, a small number of areas required further investigation or improvement, including customer satisfaction with lettable standards, communal cleaning and quality assurance arrangements for repairs and building safety works. In particular, feedback from customers had highlighted opportunities to improve communication, particularly in relation to more complex cases involving multiple services or workstreams. In response, SCH had commenced a joint review of repairs communications involving officers and the SCHape Panel, with the aim of identifying opportunities to improve the customer experience.

Becci advised that complaint volumes had increased during the year, which was not necessarily indicative of declining service performance and could reflect increased customer confidence in raising concerns. However, analysis of complaints continued to identify communication as a recurring theme and a key area for improvement.

Michael James sought clarification regarding tenant alterations and the standards applied when properties became vacant. Darren Baggs explained that all properties were required to meet SCH's lettable standard before being re-let. Where tenants had undertaken alterations, SCH would determine whether permission had been granted and whether the work met the required standard. Alterations completed to an acceptable standard could remain in place; however, where work presented a risk or had been undertaken without permission, SCH could reinstate the property and recover the associated costs where appropriate.

Gottfried Plange-Welbeck sought clarification regarding the main themes arising from customer complaints. Becci Youlden advised that there were a range of contributing factors, although communication remained the most common theme. As an example, she highlighted previous complaints relating to roofing works and scaffolding arrangements, where changes to communication processes had resulted in a reduction in complaint levels. Darren Baggs added that repairs requiring multiple trades often generated customer dissatisfaction and advised that a dedicated co-ordinator role had been introduced to improve communication and oversight in these cases.

Deb Bannigan sought assurance regarding training provided to staff involved in complaints handling and customer contact, including whether unconscious bias training had been delivered. Becci Youlden outlined that all staff have recently received customer experience training and confirmed that unconscious bias formed part of the training programme. She also advised that the introduction of a centralised complaints team had strengthened consistency in complaint handling and reduced the potential for individual bias to influence decision-making.

DECISION

(1) REVIEWED: and noted performance and progress contained within the:

a. The Voice of the Customer report
b. Complaints Dashboard
c. Compliance with Service Standards report

10. CORPORATE AND JOINT RISK MANAGEMENT REPORT

Mark Wills presented the report and provided an overview of SCH's Risk Management Framework. He explained that the framework included the methodology for identifying, assessing and prioritising risks, together with the risk scoring matrix used to evaluate the likelihood and impact of individual risks.

Mark highlighted that the Corporate Risk Register now comprised nine strategic risks and three new risks had been added during the previous quarter relating to financial and resourcing pressures, failure of strategic partners and inadequate business continuity arrangements. These additions had been approved by the Board in February 2026. The ongoing focus on ensuring the effective use of capital funding was also noted.

He advised that the detailed commentary contained within section 4.2 of the report provided additional information regarding those risks which remained outside the Board's agreed risk appetite, together with the actions being taken to mitigate them.

Mark reported that one operational risk relating to spandrel panels had been escalated to the Executive Leadership Team (ELT) due to the ongoing delays in obtaining approvals from the Building Safety Regulator. He also discussed the potential impact of ongoing instability in the Middle East and the need to continue monitoring any implications for supply chains, costs and business continuity arrangements.

Paul Edwards advised that the Corporate Risk Register had been reviewed by the ELT on 26 May 2026 and included consideration of the potential impact of the Middle East crisis for SCH and customers. They had resolved to keep this under review.

Councillor Michael James highlighted the importance of sustainability and reducing reliance on global supply chains wherever possible. He queried whether opportunities existed to source goods and services more locally in order to strengthen resilience, support business continuity and mitigate the impact of global events on SCH and its customers.

In response, Lee Sugden acknowledged the importance of the issue and advised that the ELT would give further consideration to how SCH could strengthen its approach to business continuity, sustainability and supply chain resilience. The Board would receive further updates as this work progressed. *Action 20260602-BOARD-005.*

DECISION

(1) NOTED:	the contents of the report.
(2) NOTED:	the assurance provided regarding the management of risks outside the Board's agreed risk appetite.

11. HEALTH AND SAFETY QUARTERLY REPORT: Q4

Due to the time available, it was agreed that, unless Board members had any specific questions or issues to raise, the report would be noted without detailed discussion.

Mark Wills advised that Appendix 3, the Occupational Health and Safety Policy, was presented for approval. He explained that the policy was subject to review every three years and set out SCH's approach to ensuring the health, safety and wellbeing of its workforce. Mark advised that the policy had been reviewed by the Executive Leadership Team and included a section outlining the Board's responsibilities in relation to health and safety governance and oversight.

Deb Bannigan confirmed her support for the proposed policy. It was agreed that any comments from the remaining Board members would be submitted by 17 June 2026 to enable them to be considered prior to finalisation of the policy. *Action 20260602-BOARD-006.*

DECISION

(1) NOTED:	the contents of the report.
(2) NOTED:	**Appendix 1 –** Legislative/guidance update.
(3) NOTED:	**Appendix 2 -** Accident/Incident Reporting Analysis Q4 2025/26.
(4) APPROVED:	Appendix 3, the Occupational Health and Safety Policy, subject to any comments received from Board members within two weeks of the meeting.

12. REVIEW OF STANDING ORDERS AND FINANCIAL REGS REPORT

Paul Edwards presented the report and provided an overview of the proposed amendments to the governance documents. He advised that no changes were currently proposed to the Standing Orders, although further amendments may be required in the future. He also advised that changes arising from the Procurement Act 2023 were being reviewed and may be brought back to the Board in September 2026 for approval.

Paul Edwards invited Sam Gilbert to present the proposed amendments to the Financial Regulations. Sam highlighted the proposed changes set out on page 187 of the report, including amendments relating to lease arrangements.

Abel Phiri explained that the proposed amendments to the approved levels of delegation reflected increases in costs and contract values since the thresholds were last reviewed. The changes were intended to ensure that the Financial Regulations remained proportionate to current operating requirements and reduced operational delays caused by the existing approval arrangements.

DECISION

(1) NOTED:	the contents of the report.

(2) APPROVED: the proposed changes to the Financial Regulations.
(3) NOTED: that changes arising from the Procurement Act 2023 may be brought back for consideration later in 2026.

13. COMMITTEE MEMBERSHIPS REPORT

Paul Edwards presented the report and provided an update on the proposed committee structure. He reminded the Board that the revised committee structure had been approved by the Board in autumn 2025 following a review of SCH's governance arrangements.

Paul advised that the next stage of implementation would involve discussions with the Council-appointed Board members to agree membership of the new committees and ensure appropriate representation across the governance structure.

The Board noted the proposed approach and the planned engagement with Board members regarding committee appointments.

DECISION

(1) AGREED: the committee membership for 2026/27.
(2) NOTED: that discussions would take place with Council-appointed Board members regarding membership of the revised committee structure.

14. QUARTERLY CAPITAL INVESTMENT PROGRAMME UPDATE

Andy Duke presented the report and provided an update on the Capital Investment Programme, including the delivery of investment works across the housing stock. An update was also provided on the rolling stock condition survey programme.

Michael James sought clarification regarding the Right to Buy process and queried whether properties purchased through Right to Buy could subsequently be sublet. In response, Andy Duke confirmed that properties acquired through the Right to Buy scheme can be sublet by the owner.

Michael James also queried whether SCH was able to acquire empty properties. Andy Duke outlined the arrangements relating to the acquisitions budget and explained how the funding was utilised to support property acquisitions where opportunities aligned with SCH's strategic objectives and investment priorities.

The Board noted the update and acknowledged the progress being made in delivering the Capital Investment Programme and undertaking the Stock Condition Surveys across the housing stock.

DECISION

(1) NOTED: the outturn position on the Capital programme.
(2) NOTED: the position with respect to the stock condition survey data.
(3) NOTED: the Capital Programme for 2026/27
(4) NOTED: the approach being used to obtain stock data to inform the investment decisions.

15. FINANCIAL OUTTURN REPORT 2025/26

It was agreed that the report, together with the remaining agenda items not considered at the meeting, would be recirculated and brought back for consideration at the reconvened Board meeting on 17 June 2026.

DECISION

(1)	**DEFERRED:**	consideration of the Financial Outturn Report 2025/26.
(2)	**AGREED:**	that the Financial Outturn Report and all remaining outstanding business not considered at the meeting be recirculated and brought to the reconvened Board meeting on 17 June 2026.

16. EQUALITY, DIVERSITY AND INCLUSION REPORT

Due to the time available, the report was not considered. It was agreed that the report would be recirculated and brought back for consideration at the reconvened Board meeting on 17 June 2026.

17. ANNUAL HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT REPORT

Due to the time available, the report was not considered. It was agreed that the report would be recirculated and brought back for consideration at the reconvened Board meeting on 17 June 2026.

18. MINUTES FROM AUDIT & RISK COMMITTEE MEETING HELD ON 23 MARCH 2026

Due to the time available, the minutes were not considered. It was agreed that they would be brought back for consideration at the reconvened Board meeting on 17 June 2026.

19. MINUTES FROM PERFORMANCE AND SAFETY COMMITTEE MEETING ON 11 MAY 2026

Due to the time available, the minutes were not considered. It was agreed that they would be brought back for consideration at the reconvened Board meeting on 17 June 2026.

20. FORWARD PLAN

Due to the time available, the item was not considered. It was agreed that the plan would be brought back for consideration at the reconvened Board meeting on 17 June 2026.

21. ANY OTHER BUSINESS

It was agreed that consideration would be given to how the remaining agenda items would be addressed, including whether they could be incorporated into the Board training session scheduled for 17 June 2026.

Simon Wilson thanked the new Board members for their contributions and encouraged all Board members to raise any questions or concerns with either himself or Sarah

Brookes. He advised that he would continue to hold regular one-to-one discussions with Board members.

The Board recorded its thanks to Abel Phiri for his hard work and contribution to SCH and wished him every success for the future.

The meeting closed at 20.05

Signed ……... Date: ……

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SCH: BOARD MEETING - 17 June 2026

CONFIDENTIAL MINUTES (NOT FOR PUBLICATION)

THESE MINUTES CONTAIN CONFIDENTIAL AND EXEMPT INFORMATION. CIRCULATION IS RESTRICTED TO BOARD MEMBERS AND AUTHORISED OFFICERS ONLY.

Present:	Simon Wilson, Shajeda Ashraf , Susan Buckley, Deb Bannigan, Michael Carthew, Dave Pinwell, Gottfried Plange-Welbeck, Dale Taber and Mark Thrasher
Officers:	Lee Sugden – Interim Chief Executive Sarah Brookes – Business Support Manager Paul Edwards – Executive Director of Customer Experience and Corporate Support Satnam Kaur – Assistant Director for Housing (SMBC) Abel Phiri – Head of Building Safety Carol Trappett – Head of Housing and Neighbourhoods Perry Wardle - Director of Economy and Infrastructure (SMBC) Becci Youlden – Head of Customer Experience

1. CHAIR'S WELCOME

The Chair, Simon Wilson, welcomed all attendees to the reconvened Board meeting and opened proceedings at 12.30pm.

The Board noted that the meeting was a continuation of the Board meeting held on 3 June 2026 and had been reconvened to consider the remaining agenda items following the adjournment of that meeting due to insufficient time to conclude all business.

2. APOLOGIES FOR ABSENCE

Apologies for absence were received from Phil Hardy, Mark Parker, Sam Gilbert, Darren Baggs, Andy Duke and Mark Wills.

3. DECLARATIONS OF INTEREST

There were no declarations of interest made.

4. FINANCIAL OUTTURN REPORT 2025/26

Paul Edwards presented the report on behalf of Sam Gilbert. He advised that the 2025/26 year-end position showed a positive revenue variance (underspend) of £658,000 and a lower than anticipated use of reserves.

Whilst the approved budget had included the use of reserves, actual expenditure during the year had been lower than forecast. The report also identified a capital programme underspend of £5.366 million, primarily relating to the timing of new build, acquisition and investment programmes.

The Board noted:

- The overall revenue underspend and reduced use of reserves.

- Increased expenditure on electrical repairs and day-to-day responsive repairs arising from additional compliance activity and inspection programmes.
- The capital programme outturn and significant underspends relating primarily to new build and acquisition programmes.
- Proposed capital budget carry forwards into 2026/27.
- The impact of delayed projects and planning approvals on programme delivery.
- The outcome of the West Midlands Pension Fund review, including the reduction in employer contribution rates for the next three years and the proposal to contribute £1.1 million to the SCH Budget Strategy Reserve.
- The implications for the Housing Revenue Account (HRA), including the continuation of funding for the Regulatory Project Manager Post from existing budgets during 2026/27.

The Board welcomed the improved reserves position and recognised the opportunity to strengthen reserves whilst continuing to deliver key investment and compliance programmes.

Councillor Carthew sought clarification regarding the increase in day-to-day responsive repairs expenditure. Paul Edwards explained that the overspend reflected a combination of factors, including the use of subcontractors to cover vacancies, increased void property works and higher drainage repair costs.

Mark Thrasher noted that the figures would be subject to further scrutiny through the Audit and Risk Committee. He welcomed the significant reduction in employer pension contributions, observing that previous budget assumptions had anticipated contribution rates remaining at existing levels. He considered this to be a positive opportunity to strengthen SCH's reserves position whilst helping to mitigate future financial pressures.

Mark Thrasher also sought clarification regarding the impact of the capital programme underspend. Abel Phiri advised that a number of schemes had been delayed during the latter part of the financial year, resulting in planned expenditure being reprofiled into 2026/27. He explained that delays were primarily linked to project programming and planning approval requirements rather than any reduction in the scope of works.

Gottfried Welbeck asked whether SCH had sufficient internal resources to deliver the expanded capital programme. Abel Phiri advised that increasing organisational capacity had been one of the key drivers behind the recent Management of Change programme. Additional resources had been recruited into the Asset Management and Investment teams and the structure strengthened to support delivery of the capital programme alongside the Strategic Property Maintenance Partnership (SPMP) arrangements.

Gottfried Welbeck noted that Building Safety and Compliance was the only service area reporting an overspend. Abel Phiri advised that, as SCH continued to implement the regulatory framework and undertake further surveys, inspections and compliance activities, additional works were being identified. Whilst this created expenditure pressures in the short term, it reflected SCH's commitment to maintaining compliance and ensuring the safety of tenants and residents. He added that the full extent of future requirements would continue to emerge as SCH developed a greater understanding of its housing stock through ongoing survey and inspection activity. He further confirmed that expenditure within this area would continue to be closely monitored and managed, with consideration being given to the most appropriate funding mechanisms through both capital and revenue budgets.

DECISION

(1) NOTED	the revenue and capital outturn for 2025/26.
(2) NOTED	the age profile of outstanding Accounts Receivable debt.
(3) NOTED	the Housing Revenue Account outturn for 2025/26.
(4) NOTED	the end-of-year reserves position.
(5) NOTED	the continuation of funding for the Regulatory Preparation Post.
(6) APPROVED	a contribution of £1,100,000 to the SCH Budget Strategy Reserve.

5. EQUALITY, DIVERSITY AND INCLUSION REPORT

Simon Wilson introduced the report and explained that, following the governance review, oversight of this area had transferred from the Human Resources, Equalities and Remuneration Committee to the Board. This was the first report of its kind to be presented directly to the Board, providing the Board with enhanced oversight and assurance.

Becci Youlden presented the report and highlighted that it should be read alongside the Public Sector Equality Report. She advised that the report demonstrated positive progress in SCH's understanding of its customers through the Everyone Matters initiative and the improved collection and analysis of equality data.

Whilst service access was generally reflective of the overall customer profile, the report identified several areas of disproportionality requiring further investigation and targeted action. She noted that as analysis became more granular, sample sizes reduced, meaning that some findings should be interpreted with caution.

The Board noted the key themes emerging from the report, including patterns relating to age, gender, ethnicity and vulnerability, together with the proposed action plan for 2026/27. The Board was advised that priority actions would focus on improving data quality, understanding areas of disproportionality and increasing engagement with under-represented groups. Progress against the action plan would be monitored through the Customer Experience Committee, with any significant issues escalated to the Board as appropriate.

During discussion, Deb Bannigan welcomed the progress made in improving customer data and understanding customer needs but queried whether gaps in the data reflected customers' reluctance to disclose personal information. In particular, she sought assurance regarding the collection of data relating to LGBTQ+ communities. Becci Youlden advised that whilst SCH continued to improve the quality and completeness of its equality data through the Everyone Matters initiative, some customers simply chose not to disclose certain personal information.

It was agreed that a more detailed discussion regarding data collection methodologies and engagement approaches would take place outside the meeting. *Action 20260617-BOARD-001*

Mark Thrasher sought assurance regarding SCH's engagement with different age groups and whether the findings reflected variations in how customers interacted with services. Becci Youlden advised that engagement methods varied across

demographic groups and that the organisation continued to develop its approach through customer panels, surveys and targeted engagement activities.

Mark Thrasher also asked whether analysis had been undertaken to compare SCH's customer profile with that of the wider Solihull population. Becci Youlden confirmed that comparative analysis had been undertaken and that the report identified some demographic differences, including lower levels of ethnic diversity within the SCH customer base when compared with the wider borough. Further analysis was planned to better understand these differences and inform future engagement activity.

Councillor Pinwell referred to the gender analysis within the report and noted that women were disproportionately represented across a number of service areas. He asked whether further work would be undertaken to understand the reasons behind this trend. Becci Youlden confirmed that a review of gender-related patterns in service reporting, complaints and engagement activity formed part of the action plan and would be progressed during 2026/27.

The Board welcomed the report and recognised the significant progress made in improving equality data, customer insight and understanding of customer needs. It was noted that the report provided a strong baseline for future analysis and the Board welcomed the commitment to further develop equality reporting and scrutiny arrangements through the Customer Experience Committee.

DECISION

(1) REVIEWED	the content of the Equalities Annual report.
(2) NOTED	the proposed action plan.
(3) NOTED	the intention to further develop future reporting, including additional analysis and areas of interest identified by Board Members.

6. ANNUAL HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT REPORT

CONFIDENTIAL AND EXEMPT INFORMATION. CIRCULATION IS RESTRICTED TO BOARD MEMBERS AND AUTHORISED OFFICERS ONLY.

7. MINUTES FROM AUDIT & RISK COMMITTEE MEETING HELD ON 23 MARCH

CONFIDENTIAL AND EXEMPT INFORMATION. CIRCULATION IS RESTRICTED TO BOARD MEMBERS AND AUTHORISED OFFICERS ONLY.

8. MINUTES FROM PERFORMANCE AND SAFETY COMMITTEE MEETING ON 11 MAY 202

CONFIDENTIAL AND EXEMPT INFORMATION. CIRCULATION IS RESTRICTED TO BOARD MEMBERS AND AUTHORISED OFFICERS ONLY.

9. FORWARD PLAN

Board Members confirmed that they had reviewed the forward plan in advance of the reconvened meeting and it was noted without further discussion.

10. ANY OTHER BUSINESS

Legionella Incident Update

Abel Phiri provided a verbal update on the suspected Legionella incident at Redwood House and advised that a detailed briefing note would be circulated to Board Members following the meeting. He confirmed that the resident concerned had made a full recovery and had been discharged from hospital and returned home. SCH continued to work closely with SMBC and the UK Health Security Agency (UKHSA) as investigations progressed.

Lee Sugden explained that, based on the information currently available, there was no evidence of a wider risk to residents. Interim sampling results requiring action had been identified within the affected property, however testing and precautionary works had been extended across the wider block and no wider public health response had been deemed necessary at this stage. SCH, SMBC and UKHSA continued to meet regularly to review the position and agree any further actions.

Perry Wardle emphasised that the welfare of the residents remained the primary concern. He noted that SMBC had acknowledged the proactive actions being taken by SCH and stressed the importance of receiving the outstanding test results as soon as possible to enable a full assessment of the position and ensure that any required actions continued to progress at pace.

Gottfried Welbeck requested assurance regarding the inspection, testing and water management arrangements in place at Redwood House. Abel Phiri advised that the briefing note would provide further detail about the water safety regime, recent Water Risk Assessments and the precautionary measures undertaken following notification of the incident. He confirmed that all planned maintenance activities had been completed in accordance with requirements and that a review of the wider water management arrangements was ongoing.

Councillor Carthew asked whether residents had been informed of the incident. Abel Phiri advised that no communication had been issued to residents at this stage whilst investigations remained ongoing. Lee Sugden explained that this approach had been agreed jointly by SCH, SMBC and UKHSA. Perry Wardle confirmed that, as no wider public health response had been deemed necessary and in recognition of the resident's right to medical confidentiality, it was not considered appropriate to issue wider communications pending the outcome of the investigation. He further advised

that the position was being kept under regular review through ongoing liaison meetings between SCH, SMBC and UKHSA.

The Board noted the update and the actions being taken in response to the incident.

The Board requested that further updates be provided as the investigation progresses and noted that an additional Board meeting would be convened if circumstances required.

Simon Wilson thanked officers for their work to date and reminded the Board that the information remained confidential. The Board requested that confidential items be clearly identified within future Board papers and updates.

SMBC Review of ALMO Arrangements

Simon Wilson introduced the item and referred to the update provided to the Board in February 2026 regarding SMBC's intention to review its future management arrangements with SCH. He invited Perry Wardle to provide a further update.

Perry Wardle advised that SMBC was undertaking a wide-ranging review of its services and operating arrangements in response to the Council's significant financial challenges. Whilst financial considerations formed part of the context for the review, he emphasised that the Council's responsibilities to residents and the effectiveness of service delivery remained of equal importance.

He advised that discussions are ongoing at SMBC and if it was deemed reasonable a report would need to be taken to Cabinet for them to consider whether to commission an independent review of the future management arrangements between SMBC and SCH. The scope of any review had not yet been determined, however potential options could include:

- Retaining the current arrangements.
- Making amendments to the existing management agreement and governance arrangements.
- Bringing housing services back under direct Council management.

Perry Wardle explained that discussions with elected Members were ongoing and that, should this be agreed as the preferred way forward, the matter would need to be considered by Cabinet in July 2026. Should Cabinet agree to proceeding, the intention would be for any review to be undertaken as comprehensively and efficiently as possible. He noted that any future recommendations would need to demonstrate clear benefits and value for money, particularly given the potential costs and organisational impact associated with significant structural change.

The Board discussed the potential implications of a review and highlighted a number of risks and considerations, including:

- The timing of the review in the context of the forthcoming regulatory inspection.
- The current recruitment process for a permanent Chief Executive.
- The importance of maintaining organisational stability and continuity of leadership.
- The potential impact on staff morale and organisational capacity arising from uncertainty.

- The complexity of any potential organisational change, including legal, financial, HR, ICT, governance and stakeholder implications.
- The need to ensure that service delivery and outcomes for residents remained the primary consideration throughout any review process.

Perry Wardle advised that, if the review identifies either positive or negative implications, it will need to be completed promptly to ensure that any resulting impacts can be reflected in next year's accounts.

Dave Pinwell commented that, based on his experience of organisational change programmes, any decision to separate or integrate services would require extensive planning and implementation and was unlikely to be achievable in the short term. The Board agreed that any review should be carefully managed to avoid unintended consequences for residents, staff and service performance.

Gottfried Welbeck expressed concern regarding the timing of any proposed review in advance of the regulatory inspection, emphasising the importance of stability for the organisation during this period. The Board acknowledged that any significant organisational change undertaken at pace could introduce unnecessary risk and instability. Dale Taber concurred, noting that such a move would present significant infrastructure challenges and would be unlikely to be achieved without substantial financial cost.

Mark Thrasher asked whether the scope of any review could extend to alternative housing delivery models. Perry Wardle advised that the scope had not yet been defined and that this would form part of any future scoping exercise should Cabinet decide to proceed.

In concluding the discussion, Simon Wilson acknowledged that it was the Council's prerogative, as shareholder, to review the future arrangements. He confirmed that SCH would engage constructively with any review process and support the implementation of any decisions ultimately taken by SMBC.

Perry Wardle left the meeting at 1.35pm.

At 1.36pm, officers left the meeting and the Board continued in private session to consider a confidential item.

The Board considered a confidential report regarding SCH Leadership Arrangements – Next Steps. In accordance with the Board's confidentiality arrangements, the details of the discussion and any decisions arising are recorded separately.

The meeting closed at 14.11

Signed …….. Date: ……

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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	Revised Due Date	Comments	Status
20250916-BOARD-004	Include narrative in future performance reports on non-recoverable indicators, risk appetite, and impact on tenants.	Paul Edwards / Becci Youlden	From Q2 report onwards	Q3 2026/27	Narrative on non-recoverable indicators/impact on customers now included. Further work on risk appetite indicators and how we relate them to the strategic performance report is being explored but not concluded. Is included in the review of performance reporting, which will be concluded in October.	
20260224-BOARD-003	Include sample sizes in Voice of the Customer reporting.	Becci Youlden	Next report cycle Q4	Q2 2026/27	Included from July 2026 onwards	
20260224-BOARD-004	Improve clarity and accessibility of risk reporting and present to Audit & Risk Committee.	Paul Edwards	July 2026		To be considered further at Audit & Risk Committee. Considered at the Committee meeting on 6 July 26.	
20260224-BOARD-006	Undertake biomass tariff actions: mid-year review, full-year data analysis, resident comms, standing charge consideration, SMBC cost-sharing.	Darren Baggs	September/ October 2026		Paper to be presented to September 2026 meeting (Agenda item 12).	

20260224-BOARD-007	Review and clarify wording relating to tenant members in governance report.	Paul Edwards/ Becci Youlden	30 April 2026	30 September 2026	To be reflected in revised Terms of Reference to be agreed by new Customer Experience Committee on 2 September 2026.	
20260224-BOARD-010	Provide an update regarding the Saxon Court service charge issue.	Paul Edwards	June 2026	30 September 2026	Finance colleagues are arranging a further workshop with Campbell Tickell and SCH colleagues to finalise the position re Saxon Court Service Charges.	
20260603-BOARD-001	Provide the Board with the outcome and recommendations of the Council-led review of the biomass heating system.	Mark Pearson	31.10.26	30 October 2026	Phase 2 of SMBC Scrutiny review is being planned – updates/outcomes will be shared with Board as received.	
20260603-BOARD-002	Occupied properties with a capped gas supply - include future reporting on compliance access issues, including the number of affected properties and welfare checks undertaken where compliance actions cannot be completed	Darren Baggs	4.9.26	30 October 2026	This will be included as part of future performance reporting. Currently these are being reviewed and will be introduced for Q2.	
20260603-BOARD-003	Arrange for Tenant Mystery Shoppers to review the accessibility and ease of the complaints process and provide feedback.	Becci Youlden	31.10.26	30 October 2026	Currently being undertaken. Will be reported in the Q2 VOC report	
20260603-BOARD-004	Consider how future Building Safety reports can provide additional assurance regarding the overall safety position alongside performance information.	Darren Baggs	4.9.26	30 October 2026	This information will be incorporated into future performance reporting. A review of the current position is underway, and reporting on compliance access issues, will be introduced from the Q2 reporting cycle onwards.	
20260603-BOARD-005	Consider and report on opportunities to strengthen SCH's approach to business continuity,	Darren Baggs	4.9.26		SCH has procured the maintenance and supply of biomass pellets through approved procurement	

	sustainability and supply chain resilience, including local sourcing opportunities.				routes. Under this arrangement, Dodds is responsible for securing the most economically advantageous supplier. To support business continuity and supply chain resilience, SCH also has access to alternative suppliers through the Strategic Property Maintenance Partnership Contract should supply constraints arise. This provides flexibility to mitigate potential disruptions while maintaining continuity of service.	
20260603-BOARD-006	Board members to submit any comments on the Occupational Health and Safety Policy.	All Board Members	17.6.2026		Policy has now been approved following Board feedback.	
20260617-BOARD-001	Hold a more detailed discussion with Deb Bannigan regarding equality data collection methodologies and engagement approaches, including the collection of LGBTQ+ data.	Becci Youlden	4.9.26	30.10.26	Work in progress – arranging a scoping meeting with Deb Bannigan.	

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Meeting of the Board

Report title:	Chief Executive's Update	
Meeting date:	15 September 2026	
Report from:	Mark Pearson	Chief Executive
Report author/ lead officer:	Mark Pearson	Chief Executive
	07736 693132	markpearson@solihullcommunityhousing.org.uk
Report type:	~~Confidential~~ Open	
Decision type:	~~Assurance~~	~~Approval~~ Information

1. Report overview/purpose

1.1 The purpose of this report is to provide the Board with an update on key areas of organisational activity, including service delivery, regulatory compliance, operational performance and strategic developments across SCH.

2. Recommendations

(1) NOTE the content of the report.

3. SMBC/SCH Governance

3.1 Management Agreement

3.1.1 SCH has shared with SMBC details of the legal advice received in relation to the draft management agreement. We have also shared our comments on the detail of the draft agreement. We await further discussions with SMBC in order that the agreement can be finalised through our respective governance arrangements.

4. Social Housing Regulation

4.1 SMBC and SCH continue to work collaboratively to ensure compliance with the Consumer Standards and to ensure we are well placed for regulation. As the landlord, Solihull Council is the regulated body.

4.2 The new Consumer Standard for 'Competence and Conduct' takes effect in October. We believe we are well placed to meet the requirements of this standard.

4.3 We are working with SMBC to produce a series of position statements in relation to each of the Consumer Standards. These will support the development of briefing

notes for those participating in mock interviews to be carried out by Campbell Tickell in the autumn.

5. Property Services and Building

5.1 Building Assessment Certificates (BAC)

5.1.1 SMBC in their role as the Principal Accountable Person (PAP) received advance notification from the Building Safety Regulator (BSR), that 7 high rise buildings (HRBs) owned by SMBC and managed by SCH would be included in the next round of HRBs called upon by the BSR to apply for a BAC. SMBC received notification to apply for BACs for 6 of the 7 originally identified HRBs on 11 July 2025, for the following buildings:

Bangor House	(HRB10680M9F3)
Clare House	(HRB10912N7Y6)
Keele House	(HRB11499R6N6)
Pembroke House	(HRB11642V5N5)
Wedgewood House	(HRB11686X3F7)
Westham House	(HRB11702C3R9)

5.1.2 SCH retuned all required documentation by the November 2026 deadline. The BSR considers the award of BACs based upon assessment of risk. The latest guidance, currently used to prioritise buildings is:

- Extreme height & density: buildings over 18m to 29.99m and more than 378 residential units, or over 30m and more than 11 residential units
- Clad with combustible aluminium composite material
- Large panel system (LPS) built between 1957 and 1973 with a gas supply, where it is unclear if reinforcement work has been carried out

5.1.3 Each building must meet at least one of these criteria to be invited to apply through this priority scheme.

5.1.4 Until 18 August 2026 SMBC had not received any correspondence from the BSR in relation to the submitted BACs of the previous November. Then on 18 August 2026 the BSR wrote to confirm all BACs were being assessed, whilst providing an opportunity to submit any updated information. We/SMBC await the finding of the BSR's assessments.

5.2 Implementation of Awaab's Law

5.2.1 Awaab's Law Phase 2: preparations remain on track, with policies, procedures, training, and performance monitoring arrangements being strengthened ahead of implementation, 30 November 2026, and as set out in a presentation to Performance and Safety Committee.

5.2.2 No significant compliance gaps have been identified; however, the new legislation introduces a much broader set of hazards for which we also need to consider individual customer vulnerabilities. We expect to see an increase in demand on surveying, repairs and contractor resources due to tighter communication and reporting requirements to customers.

5.2.3 Resource planning and capacity reviews are underway to mitigate these pressures as far as reasonably practicable. However, we are seeing peer organisations increase resources to meet the additional requirements of the new legislation, and this may also become necessary for SCH. Work continues across all relevant work streams to ensure we are well positioned to comply with the new requirements.

6. Asset Management and Development

6.1 Capital Programme Update

6.1.1 Delivery of the 2026/27 Capital Programme is in progress, with a high proportion of the programme now being delivered through the Strategic Property Maintenance Partnership (SPMP) contract with Dodd Group. Programmed works already delivered through this contract have started well and are on track for delivery by year end, although currently reported completions and expenditure are low due to the delay between works being undertaken and invoicing, which can be 2-3 months. As other contracts end, new workstreams will continue to transition into the SPMP contract.

6.1.2 Energy efficiency improvements include Warm Homes: Social Housing Fund (WHSHF) grant money through the West Midlands Combined Authority (WMCA), to support the delivery of energy efficiency improvements to 245 homes which are EPC D and below. This funding spans 2025-2028, with the majority of project delivery occurring over the next 18 months. Grant funding has also been secured for the Heat Network Efficiency Scheme (HNES) Phase 2 works, which are well underway and on course to complete in November. A third bid submission is in preparation with the hope to secure funding to support upgrade of the remaining five energy centres.

6.2 Development Programme Update

6.2.1 **Anglesey Avenue**

6.2.2 The development of 5 new homes (2 and 3-bedroom houses) on a former garage site, includes a new access road, public parking and open space. Planning permission was granted in May 2022.

6.2.2 The scheme was originally intended to be delivered alongside Townshend Grove but was progressed separately to avoid planning permission expiry. SCH entered a Pre-Construction Services Agreement (PCSA) with Seddon Construction Ltd in October 2025 through the Constructing West Midlands Framework. Detailed design is now complete and a fixed contract sum has been agreed.

6.2.3 Total project cost is approximately £1.9m, including construction, contingency, PCSA costs and client-side support. Cabinet approved the build contract and land appropriation on 23 July 2026. Contract documentation is with Legal and Procurement, land appropriation is underway, and site start is planned for November 2026.

6.3 Townshend Grove / Daylesford Road 1 & 2 / Campden Green

6.3.1 This programme will deliver 46 affordable homes across four sites:

- Townshend Grove (Lakeside): 28 homes, including 20 supported living apartments under a “Live and Work” model and 8 general needs homes.
- Daylesford Road Site 1: 6 two-bedroom houses.
- Daylesford Road Site 2: 9 houses (4 three-bedroom and 5 two-bedroom).
- Campden Green: 3 three-bedroom houses plus 12 parking spaces.

Planning permission is secured across all sites. The former Lakeside building was demolished in 2023, with the revised development brief approved in November 2025.

6.3.2 Cabinet approved funding applications and procurement arrangements in July 2026 for an estimated net cost £12.8m. SCH Procurement Board subsequently approved the procurement strategy, and contractor selection is now being prepared through the Homes England Dynamic Purchasing System (DPS) framework.

6.4 Kingshurst Regeneration

6.4.1 Phase 1 involved the redevelopment of the former Mountfort Pub site. The project was successfully completed in September 2024, delivering 25 Net Zero homes and providing a key milestone in the wider regeneration of Kingshurst.

6.4.2 Phase 2 will deliver a mixed-use development comprising a new commercial, health and retail hub, alongside 6 Net Zero homes, a new vicarage, and significant improvements to local infrastructure, including parks, roads and landscaping. The planned site start is November 2026, with overall completion targeted for winter 2028.

6.4.3 The project continues to make good progress. A Section 73 planning application has been submitted and has received informal support, while highway designs have also been informally approved. Utility proposals and legal agreements relating to the new substation are progressing as planned.

6.4.4 The Phase 2 development has an overall project cost (inclusive of client costs) of £23.9 million. The procurement and value-for-money assessment process has been completed, with the conclusion that the project represents good value for money. A Cabinet report is scheduled for September, and funding includes external grants, a £3 million Community Infrastructure Levy (CIL) contribution, alongside resources from the HRA and dedicated Council budgets.

6.4.5 Value engineering exercises are expected to generate savings of between £50,000 and £100,000. The formal construction programme is currently scheduled to run from January 2027 to August 2028, and social value proposals are being finalised as part of the overall delivery strategy.

6.4.6 Phase 3 is proposed to deliver a further 47 Net Zero homes, building on the achievements of the earlier phases and continuing the long-term regeneration and sustainability objectives for Kingshurst.

6.5 Pipeline

6.5.1 **Middlewood House -** 18 new homes – planning process currently managed by SMBC with a decision due this year. SCH has advised on design, specifications, planning etc. SCH will become more involved next year at PCSA stage and will also manage and fund the build.

6.5.2 SCH is creating a pipeline of sites to follow the above sites. This is work in progress. We currently have three smaller garage sites we believe we can develop. This is along with further sites UK Central (UKC) will require our expertise in managing

6.6 Acquisitions

6.6.1 SCH is purchasing 6 properties in Local Authority Housing Fund (LAHF) round 4 during 2026/27:

- 3 for resettlement purposes.
- 3 for general needs housing.

7.1 Spandrel Panels

7.1.1 **Spandrel Phase 2a (Louvre Towers) -** Gateway 2 approval has been granted. Contract is ready to be signed and works are due to start on site 1 September 2026 and completion on 16 July 2027. Notification of construction works to the Health & Safety Executive (F10) has been issued. Site compound locations have been presented and agreed by SCH for all towers. Elhance will facilitate resident communication through letters and a poster in the communal areas. SCH Comms team has been made aware of the project and its timescales. The construction cost is estimated at £1,445,053.

7.1.2 **Spandrel Phase 2b (Winter Gardens)** - Dodds continues to work through Royal Institute of British Architects (RIBA) Stage 4 via the PCSA and are due to complete the final planning drawings by the end of August. RG+P are to then issue a Non-Material Amendment (NMA) for all 6 towers to SMBC (this includes a new Gateway 1 application by Salus). Gateway 2 application to the BSR is expected October 26. Works are now estimated to start on site in July 2027 and the construction cost (estimate) is £6,500,000.

8. Customer Experience and Corporate Support

8.1 Customer Engagement

8.1.1 I am pleased to report to Board that SCH retained its Tenant Participation Advisory Service (TPAS) accreditation for another 3 years, following a review of its engagement function over the last few months. A score of 90% was received, which is an excellent testament to the team's hard work and the organisation's commitment to putting our customers at the heart of everything we do. TPAS highlighted areas of good practice, particularly around the development of the Customer Experience Committee and the SCH Big Conversation. There are suggested areas for further development, particularly around customer engagement in procurement and contract management. The team is working with the procurement team to develop ideas.

8.1.2 The Customer Engagement Framework is currently being reviewed, and a refreshed framework will be presented to the Customer Experience Committee in February 2027, for approval. The engagement team is currently consulting with residents and staff to ascertain what works well, where we can enhance the voice of the customer in decision making and service delivery. Feedback from the TPAS accreditation will also be used to enhance the engagement offer to customers.

8.1.3 During September the engagement team, with the support of staff from across the organisation, is running pop-ups across all 37 of our high-rise blocks. This is an opportunity to talk to residents about building safety, promote the Everyone Matters campaign and talk to residents about any concerns they have. We encourage staff, exec team, Board and Committee members and partners to join us on the sessions. There is still time to join a session - if you are interested, please contact Becci Youlden who will be able to provide you with more information.

8.2 Team SCH

8.2.1 The Chief Executive joined SCH in August 2026 and has commenced a programme of engagement with colleagues, Board Members, SMBC representatives and key stakeholders. Initial priorities have focused on developing relationships, reviewing organisational priorities and supporting the continued delivery of SCH's strategic objectives.

8.2.2 Recruitment to the Head of Property Services and Building Safety position has progressed following the departure of Abel Phiri. Darren Dunphy joined SCH on 1 September 2026. Interim management arrangements have ensured continuity of leadership across the service.

8.3 Organisational Development

8.3.1 **Staff Survey 2026 -** as agreed with the Executive Director and Head of Service, a Staff Survey will be sent out to SCH workforce in September 2026. Acuity will host the survey to ensure the confidence around anonymity and EDI demographics is going be included.

8.3.2 **Competence and Conduct Standard October 2026 -** the standard requires social housing providers to ensure that staff responsible for housing services have the skills, knowledge, experience and behaviours needed to deliver safe, high-quality services and treat tenants with respect. The standard emphasises professionalism, accountability, continuous learning, and a culture that listens and responds to residents' concerns.

8.3.3 The standard takes effect from 1 October 2026, with a transition period for qualification compliance of 3 years. In response, SCH is progressing work across all aspects of the standard to provide assurance to both the SCH Board and Solihull Council. Key requirements include:

- Ensuring relevant SCH staff have the necessary competencies and behaviours to deliver high-quality housing services.
- Taking appropriate steps to ensure relevant staff employed by service providers also meet these standards.
- Maintaining a written policy covering areas such as learning and development, performance appraisal, and the management of poor performance.

- Adopting and embedding an appropriate code of conduct of professional behaviours for staff.
- Providing tenants with meaningful opportunities to influence and scrutinise the code of conduct of professional behaviour, ensuring these remain accessible, up to date and fit for purpose.
- Ensuring senior housing leaders and managers achieve, or are working towards, recognised housing management qualifications, while also supporting relevant managers employed by service providers to do the same.

8.3.4 To support compliance with the qualification requirements, SCH has appointed Access Training (East Midlands) as its training provider, and managers have either commenced or are scheduled to undertake the required qualification programmes over the next three years.

9. SCH Profile

9.1 **National Federation of ALMOs (NFA) –** as members will be aware, SCH is a long standing member of the NFA. SCH Chief Exec has been asked to join the NFA Board and has agreed to do so with the support of the SCH Chair. This will be an opportunity to build positive relationships with other ALMOs whilst being able to support the influence of policy.

9.2 **National Housing Federation (NHF) –** SCH is in the process of joining the NHF as a new member. This will greatly benefit SCH in terms of policy updates, influence national advocacy, access to various events, conferences and publications and research and greater collaboration and knowledge sharing with specialist networks within the social housing sector more broadly.

10. National Policy Update – Housing Sector

10.1 The housing sector continues to experience significant legislative and regulatory change. SCH continues to monitor developments across consumer regulation, building safety, asset management, energy efficiency and tenant engagement to ensure the organisation remains compliant and well prepared for future regulatory requirements.

10.2 The Government's Social Housing Bill continues to progress through Parliament. SCH is monitoring the proposed reforms, including changes to Right to Buy, strengthened protections for tenants and measures intended to support long-term investment in social housing. The organisation will assess any operational implications as the legislation progresses.

10.3 SCH continues to monitor wider sector developments, including the implementation of the new Rent Standard, proposed changes to the Decent Homes Standard and Minimum Energy Efficiency Standards, together with any implications for future business planning, financial resilience and investment priorities.

10.4 Since a change in Prime Minister, Angela Rayner has been re-appointed to the Cabinet in July of this year, returning to the role of Secretary of State for Housing, Communities and Local Government (MHCLG). Matthew Pennycook continues in his role as Minister for Housing and Planning whilst Florence Eshalomi has been appointed as Minister of State at the MHCLG with responsibility for homelessness

and rough sleeping. One immediate priority, announced by Andy Burnham and backed by increased funding of £442m, is to tackle rough sleeping by offering everyone who needs it a route off the streets by Christmas.

11. Housing Ombudsman Service (HOS) Determinations

11.1 Since the last Board report, the Housing Ombudsman Service (HOS) has issued determinations on two cases, summarised below.

11.2 **Case 1 -** SCH issued its final response in January 2025. The complaint related to:

(a) Anti-social Behaviour (ASB) and
(b) A request to be rehoused.

11.3 The HOS determined that both aspects of the complaint were 'outside its jurisdiction'. In relation to the ASB matter, the Ombudsman noted that the customer had advised SCH that they did not wish to make a complaint about the handling of ASB. Regarding the rehousing request, the Ombudsman concluded that this did not fall within its remit as a landlord function. The customer has subsequently referred the matter to the Local Government and Social Care Ombudsman (LGSCO).

11.4 **Case 2 –** SCH issued its final response in May 2024. The complaint related to:

(a) The handling of reports of pests in the property and
(b) Complaint handling.

11.5 The HOS found that SCH had provided 'reasonable redress' in respect of both complaints elements. This determination reflects the Ombudsman's view that reasonable steps were taken and to address the issues raised and that reasonable compensation was provided through the complaint handling process.

11.6 The HOS also made a recommendation that the compensation should be paid if this had not already occurred. SCH confirmed that payment was made in June 2024.

11.7 The key learning identified from this case relates to communication with customers regarding pest control matters and complaint handling processes.

11.8 The HOS currently have 15 cases under assessment.

12. QMB Papers

12.1 The Quarterly Management Board (QMB) met on 25 August 2026 and the papers considered by QMB are attached at **Appendix 1** for the Board's information.

13. List of Appendices

13.1 Appendix 1 - QMB Report Pack

Quarterly Monitoring Board – Q1 Agenda

Date 25 August 2026

1700 – 1900

TEAMS

1.	Apologies: None received (to date)		Chair
2.	Notes/actions from meeting held 15 June 2026 • Minutes • Action Tracker	Notes Action Tracker	All
3.	Assurance Report from SCH Board	Report	Simon Wilson
4.	Quarter 1 – Performance and Assurance Update	Report	Satnam Kaur
5.	Tenant Satisfaction Measures 2025/26 Outturn	Report	Satnam Kaur/ Becci Youlden
6.	Asset Management and Capital Programme Update	Report	Darren Baggs
7.	Finance Update Q1	Report	Samantha Gilbert
8.	Internal Audit Report	Report	Olly Dodds
9.	AOB • QMB Updated Terms of Reference	Verbal Report	All Satnam Kaur
	Date of Next Meeting: 24 November 2026		

Quarterly Monitoring Board – Q4 Agenda

Date 15 June 2026

MINUTES

In Attendance: Cllr Parker (Chair), Perry Wardle, Cllr McCabe, Cllr McLoughlin, Simon Wilson, Satnam Kaur, Abel Phiri, Carol Trappett, Jennifer Mason, Lee Sugden, Paul Edwards, Susan Buckley, Zoe Covington.

1.	Apologies: Sam Gilbert, Cllr James, Darren Baggs. Cllr Parker welcomed Cllr McCabe, Cllr McLoughlin and Susan Buckley to their first meeting.
2.	The Chair referred to the minutes of the meeting held on 2 March 2026 and confirmed there were no matters to raise. Members were invited to comment. No comments were received. The minutes were agreed as an accurate record. **Update – Water Safety / Legionella Incident** PW provided an update regarding a suspected case of Legionella at Redwood House. Environmental Health were notified on 4 June. The resident had been hospitalised and has since been discharged. The property had an existing water safety risk assessment and management arrangements in place. UKHSA attended the site with Environmental Health and undertook water sampling. Results are expected within approximately 10 days. SCH carried out precautionary actions, including remedial works and disinfection. Interim results identified Legionella at actionable levels. Sampling has been extended across the wider block and an initial action plan developed. Work is ongoing to assess any wider impact on the system and other buildings. At this stage, no wider public health response is required and no proactive communication has been issued to residents. PW confirmed that the Council is working closely with UKHSA and SCH and that the situation is being closely monitored. He also advised that the matter should be handled sensitively due to the risk of identifying the individual concerned. The Chair thanked PW for the update and confirmed that the matter would not be opened for detailed discussion due to its sensitive nature. Members were advised to raise any queries directly with officers outside of the meeting. PW confirmed that officers would respond to any such queries.

3.	**Quarterly Monitoring Board Terms of Reference** The Chair introduced the item and invited SK to present the refreshed Terms of Reference. SK advised that the document clarifies the role of QMB within the Council's assurance framework, particularly in relation to oversight of SCH. QMB is a member-led forum focused on oversight and challenge, ensuring that housing services delivered by SCH are safe, compliant and delivering for residents. Its remit covers the landlord function, including approximately 10,000 homes, as well as homelessness and allocations services. QMB operates alongside SCH's governance arrangements and does not replace them. It does not oversee operational management, but instead reviews performance from an assurance and risk perspective, with a focus on risks, outcomes and areas where assurance is limited. SK confirmed that QMB is an assurance and scrutiny forum rather than a decision-making body. Formal decisions remain within the Council's governance processes, although QMB may request further information, seek assurance and escalate issues where required. The Chair welcomed the report and commented that it provided clearer alignment with regulatory expectations. Cllr McLoughlin queried the position of QMB within the Council's governance framework, including whether meetings are private and how outputs should be treated. SK advised that QMB does not form part of the Council's formal decision-making structure under the Local Government Act 1972. As such, papers are not published via mod.gov and are not subject to the same requirements as committee reports. Formal decisions continue to be taken through Cabinet or officer processes. PW added that the quarterly nature of QMB allows for ongoing scrutiny, enabling members to track performance over time. In relation to confidentiality, PW advised that this is considered on a case-by-case basis. Sensitive items will be identified as such, although not all information discussed is confidential. The approach seeks to balance transparency with the need to provide sufficient information to support effective challenge.
4.	**Assurance Report from SCH Board** The Chair invited SW to present the report. SW advised that the report was for noting and confirmed he was happy to take questions, directing these to SCH officers as appropriate. Referring to paragraph 3, he explained that the report contributes to the assurance provided to SMBC, with paragraph 3.1 outlining the responsibilities of the SCH Board. He advised that the recent Board meeting reflected a refreshed membership, including two councillors, two tenant representatives and two independent members. He noted that, for the first time in his experience, the Board felt fully established.

	As this was the first meeting of the new Board, members were still becoming familiar with the agenda, and fewer items were considered than usual. SW highlighted that the primary focus of Board discussions was the Strategic Performance Report. Paragraphs 4.2 to 4.4 set out the discussion, including areas of strong performance and those where targets had not been met, which formed the basis for challenge. A key issue identified was the ongoing deep dive into emergency repairs, aimed at understanding the causes of delays in meeting timescales. In relation to Awaab's Law, SW advised that performance has improved since its introduction, although further work is required. This remains a key area of focus both locally and nationally. SW also highlighted the Building Safety Compliance Dashboard, which was subject to detailed review. This included electrical testing, fire safety, water risk assessments, and smoke and carbon monoxide compliance. Referring to paragraph 4.6, SW noted this relates to water risk assessments and highlighted that this discussion took place prior to the incident referenced earlier in the meeting, indicating the Board was already reviewing this area. This reflects the type of assurance discussion undertaken at SCH Board level. SW referred to the corporate and joint risk register, noting that paragraph 4.8 sets out corporate risks and paragraph 4.9 identifies those shared with the Council. He confirmed that risks are regularly reviewed, including ratings and mitigation measures, with shared risks reflecting areas of joint responsibility. He advised that the final items considered were the capital investment programme and the Quarter 4 financial monitoring and forecast. SW confirmed he was happy to take questions LS advised that Awaab's Law is being introduced in phases, with further requirements expected to cover wider health and safety compliance. While challenging, these requirements are essential to ensure resident safety. Cllr McCabe confirmed the overview was helpful and asked for clarification on current remediation timescales. LS advised that timescales vary depending on severity, with cases triaged to determine whether they are urgent or emergency. Response requirements are set accordingly. LS offered to provide further detail on specific timescale to Cllr McCabe. **ACTION – LS Provide detailed Awaab's Law timescales to Cllr McCabe.** The Chair thanked LS and invited SK to comment. SK advised that an induction session for QMB members will be arranged, covering regulatory requirements including Awaab's Law, noting this had not been possible prior to the meeting due to timing of nominations. Cllr McCabe welcomed this.

	The Chair agreed this would be beneficial for members, given the complexity of the subject. Cllr McLoughlin asked whether biomass had been discussed at SCH Board, noting this was not referenced in the report. He then referred to fire remedial actions (42.21% completed within timescale against a target of 80%), highlighting this as a significant concern. He noted the importance of fire safety, particularly in high-rise buildings, and sought assurance on the current position and how performance would be improved. He added that, while some works may require longer lead-in times, the expectation would be for performance to be closer to full compliance. AP advised that work has been undertaken with fire risk assessors to improve understanding of remedial processes. Using fire doors as an example, he explained that although a timescale (e.g. 28 days) may be set, delivery involves multiple stages including ordering, manufacturing and installation, which can lead to delays beyond the original timeframe. AP advised that timescales are under review with contractors and assessors to better reflect delivery processes, while ensuring no additional risk to residents. This includes consideration of appropriate interim measures. He noted that all high-rise buildings are fitted with sprinkler systems, which act as a key mitigation in limiting fire spread and are factored into risk assessments. He confirmed that actions vary in nature, including items such as signage and fire doors. No current actions have required changes to evacuation policies, and none are assessed as posing a significant risk to residents. Cllr McLoughlin thanked officers for the response. SW responded to the earlier query, confirming there were no new updates reported at the most recent SCH Board meeting. He noted that the last substantive discussion took place in February, when the tariff was set and a programme of work agreed. The matter will be considered again at a future meeting. LS confirmed this position and outlined next steps, advising that a Council working group (Task and Finish Phase 2) will take place over the summer and autumn to inform future decisions on fuel supply. A six-monthly tariff review will also form part of this process. He added that approval has been granted for upgrades to management systems in five additional blocks, with works scheduled for the summer and autumn to improve efficiency. Cllr McLoughlin sought clarification on the working group and LS confirmed this relates to Task and Finish Phase 2. The Chair thanked LS and invited any further questions. The Chair then referred to the earlier update on water risk assessments and asked whether this had prompted any increased focus in that area. AP advised that a programme of water risk assessments is in place in line with HSG 274 Part 2. All assessments are up to date, having been completed in 2024 and due for renewal in 2026, and the organisation is compliant.

	He explained that the latest assessments adopted a more proactive approach, including sampling within domestic dwellings as well as communal areas. This has identified additional actions, which are currently being progressed, including some requiring strategic decisions such as heating systems. AP confirmed that specialist contractors have been consulted regarding mitigation measures, and no additional measures were required at this stage. He further outlined that water risk assessments generate both remedial actions and an ongoing control regime. This includes compliance checks such as temperature monitoring and tank cleaning, which are in place and regularly monitored. AP added that, following the Redwood incident, work is underway to review whether further information can be used to reprioritise actions. The Chair thanked AP for the update and noted this provided reassurance. The Chair asked if there were any further questions. No further questions were raised. The Chair noted that discussions at SCH Board align with the level of assurance required by QMB. The report was noted.
5.	**Council Review of SCH Performance, Compliance and Resident Outcomes 2025–26** SK introduced the report and apologised for its length, noting that this reflects its nature as an annual review. She advised that future quarterly reports will be more concise. She confirmed that the approach to reporting has changed. Performance is now presented by the Council's client team, providing a Council-led perspective as the accountable body, rather than relying solely on SCH dashboards. The report brings together year-end data across a number of dashboards. A key element of the approach is the triangulation of this information, focusing on themes and what the data collectively indicates, rather than reviewing indicators in isolation. SK advised that the analysis considers not only headline performance but the underlying position, including actions from compliance activity, whether these are overdue, the mitigations in place, and the work programmes required to address performance issues. SK noted that this work has developed over the past 12 months and will continue to be refined. Key themes identified include pressures within repairs, increased complaints, and lower customer satisfaction. She advised that customer feedback highlights issues around communication and follow-on work, particularly in repairs, and that these are recurring issues rather than isolated cases. Overall, while progress has been made, performance remains inconsistent in some areas, reflecting similar findings from the SCH Board report.

	SK emphasised the need to continue strengthening understanding of the impact on residents, moving beyond activity to outcomes. SK referred to section 4.2, noting that resident satisfaction is above the sector average but below the local target. She added that targets are set at an ambitious level. In relation to repairs, she highlighted the backlog set out in section 5. Progress is being made, but further detail is being sought from SCH to understand how the backlog is reducing, including the extent to which this reflects completed works, data cleansing or cancellations, and the underlying causes. SK noted that visibility of damp and mould cases has improved, although overdue actions remain and complaints have increased, making this a continuing area of focus. SK advised that, while complaints handling has improved, overall volumes have risen. Further analysis is required to understand the drivers of dissatisfaction, particularly in relation to repairs, follow-on works and communication. In terms of compliance and safety, headline performance is strong, but further focus is needed on the management of overdue actions, understanding resident vulnerability, and prioritising work based on risk. By way of example, she referred to stock condition surveys, noting that current coverage is 77% within the last five years, with a target of 85% by year end. SK advised that, beyond overall coverage, further work is being undertaken to understand what stock condition data indicates in relation to future investment requirements and how risks are being managed where surveys are not up to date, including appropriate mitigation. SK noted similar considerations in relation to anti-social behaviour, where activity and partnership working is evident, but there is a need to demonstrate clearer outcomes for residents. SK also advised that improving confidence in data remains an area of focus, including ensuring accuracy, understanding assurance processes within SCH, and strengthening Council validation. SK concluded that, while improvement is being made, the focus for the coming year will be on strengthening oversight in higher-risk areas, improving visibility of underlying performance, and providing clearer evidence of outcomes for residents. The Chair thanked SK for the report and noted the level of detail provided. He invited questions and called on Cllr McLoughlin. Cllr McLoughlin noted that he was continuing to familiarise himself with the detail, particularly in the context of recent regulatory changes. He referred to section 4.3 (page 33) on Tenant Satisfaction Measures and queried the benchmarking approach used. He noted that this report appears to benchmark against the Regulator of Social Housing, whereas the previous item referenced a local authority peer group, and asked which comparator is most appropriate.

	He also referred to Regulator data and noted that it is subdivided into categories, including low-cost rental accommodation and low-cost home ownership, and questioned how these distinctions are reflected in the benchmarking approach. Cllr McLoughlin advised that he had compared the Tenant Satisfaction Measures with data published on the Government website. He noted that SCH appears to perform above average in some areas, but lower in others, including homes well maintained, complaint handling and anti-social behaviour. He sought reassurance on how the overall position should be interpreted, noting that while the overall score is slightly above benchmark, performance across individual measures appears mixed. He asked whether, taken together, the data indicates that performance is being managed effectively. SK referred Cllr McLoughlin to the relevant appendix, noting that it brings together the full suite of KPIs, including Tenant Satisfaction Measures, alongside benchmarking information. She advised that the appendix includes previous year data, benchmarks (including quartile positioning), annual targets and outturn performance, providing a single view for comparison. SK noted that overall satisfaction at year end was 78% against a target of 80%, which she advised remains a strong position. She highlighted that the appendix also identifies pressure areas, including anti-social behaviour satisfaction, complaint handling and increased complaint volumes, and emphasised the need to understand these through triangulation. SK advised that, while headline benchmarking appears positive, there are specific areas requiring focus, and performance cannot be considered in isolation from these. She noted that targeted action is required to address these pressures and support improvement. Cllr McLoughlin apologised for intervening and clarified that his concern related to how the data is presented. He referred to specific Tenant Satisfaction Measures, including TPO1 and TP09, comparing figures within the report to those published by the Regulator. He noted that TPO1 is presented as 71.8 against a median benchmark of 68.5, but that other measures, including TPO6 and TP09, appear differently when compared with regulator averages. In relation to TP09 (complaint handling), he highlighted that the report shows 34.78 against a median of 31.3, whereas regulator data indicates an average of 35.5, suggesting performance may be lower when viewed against that comparator. Cllr McLoughlin acknowledged that there may be a time lag in benchmarking data, but expressed concern that the report presentation could appear more favourable than when compared with published regulator figures. He emphasised the importance of ensuring that data provides a fair and accurate reflection of performance. PE clarified that the Regulator publishes multiple benchmarking groups, including local authority peers, housing associations, and a combined dataset.

	He advised that the report uses the local authority peer group, which aligns with the Council's approach. This difference in comparators explains the variation between figures in the report and those published by the Regulator. Cllr McLoughlin thanked officers for the clarification and noted that, in the event of inspection, local authority benchmarking would be the relevant comparator. The Chair raised a further question regarding the repairs backlog, noting this remains an area of concern. He acknowledged progress made, including the development of tools to better understand the causes. He asked LS and SW what plans are in place to ensure continuity following the departure of AP, and how focus will be maintained on identifying the causes of the backlog and improving timeliness of repairs. LS acknowledged progress in reducing the volume of remedial actions, noting that some may exceed target timescales due to factors such as access to properties and material availability. He advised that further work is required and this remains a key area of focus. LS also referred to the forthcoming departure of AP, noting his significant contribution. He advised that recruitment is underway, with interviews completed and a replacement expected shortly. He confirmed that steps are in place to ensure continuity. The Chair thanked LS and requested that, for the next meeting, evidence or a tool is provided to demonstrate how the repairs backlog is being reduced. **ACTION – LS Provide evidence or a tool demonstrating how the repairs backlog is being reduced.** LS confirmed that this information is already available and can be shared in advance of the next meeting. The Chair thanked LS and invited Cllr McCabe to speak. Cllr McCabe noted that his question had largely been covered but sought clarification on how improvements are being driven. He asked whether issues are addressed on a case-by-case basis or through an overall structure to identify and address underlying problems. LS advised that there is an established structure in place. He explained that the issue had been identified as a resourcing gap, and that, working with Council colleagues, additional operatives were recruited over the summer. He confirmed that this has contributed to improved performance. LS further advised that the focus is on ensuring resourcing levels are sufficient to meet ongoing demand and prevent a recurrence of backlog issues. He noted that work is underway to provide assurance in this area. He added that, over the past four months, overdue repairs have reduced significantly. This has been achieved without adverse impact, suggesting the improving trajectory is stable, subject to confirmation of resource levels. Cllr McCabe confirmed his understanding and advised that he would be leaving the meeting. The Chair acknowledged this and thanked Cllr McCabe for his attendance.

	The Chair reiterated the importance of identifying root causes and reducing duplication of issues. He emphasised that addressing underlying weaknesses should support improvements in repairs and contribute to reducing complaints over time. The Chair asked if there were any further questions and invited Cllr McLoughlin to speak. Cllr McLoughlin referred to paragraph 8.2 and noted that 1,163 properties have no stock condition survey on record, identifying this as a concern. He asked for clarification on the reasons for this, including whether it relates to capacity constraints or access issues, recognising the challenges in gaining access to some properties. He further asked about the potential regulatory implications, noting that statutory duties remain in place in relation to housing standards, fire safety and compliance, regardless of whether surveys have been completed. Cllr McLoughlin also queried whether alternative approaches, such as external surveys, are considered where access cannot be gained, to provide some level of assurance. The Chair referred to the target of achieving 85% survey coverage, asking whether delivery by the end of 2026 is realistic given the scale of activity required. PE advised that this remains a priority and explained that the programme operates on a five-year cycle, requiring around 20% of stock to be surveyed annually. He noted that activity had previously reduced and is now being increased to return to that level. He confirmed that more than 20% of stock is expected to be surveyed this year, supported by additional resources, to support delivery of the target. The Chair asked whether, when access is gained to properties for activities such as gas or electrical inspections, stock condition surveys are also undertaken at the same time. PE advised that stock condition surveys are only carried out where they fall within the five-year cycle. He explained that ongoing no access work is helping to improve this, with opportunities taken to complete multiple activities during a single visit where access is secured. He noted that, where possible, compliance activity and survey requirements are addressed together. SK referred to the Terms of Reference and emphasised that, while the regulator measures the percentage of properties with a survey in the last five years, there is also an expectation to understand what that data indicates. She advised that this includes the implications for future investment decisions, such as decent homes and energy efficiency, and how assurance is maintained that residents are safe where surveys are not up to date. She noted that this reflects QMB's focus on assurance and risk, and invited members to take this perspective as they become more familiar with the Board's role. The Chair thanked SK and noted the importance of the point raised. He reiterated the need to understand how the organisation will achieve 85% stock condition survey coverage and asked for clarity on the timescale for delivery. PE confirmed that the target is to achieve this by the end of the current financial year, with a programme in place to reach 85% by 31 March 2027.

	The Chair welcomed this and requested that progress against this target is reported at the next QMB meeting, to allow the Board to monitor delivery. **ACTION: - SK** The Chair asked if there were any further questions and invited Cllr McLoughlin to speak Cllr McLoughlin referred to paragraph 10.1 (page 36) and highlighted the increase in anti-social behaviour (ASB) cases from 22.84 to 31.32 per 1,000 properties. He noted that this may be contributing to lower tenant satisfaction and expressed concern at the trend. He asked how this is being addressed more broadly, including how work is being coordinated across the Council and partners, emphasising the need to focus on underlying causes as well as case volumes. PW advised he was not able to comment on detailed operational matters but confirmed that further information could be provided following the meeting. He explained that, at a strategic level, ASB is managed through the Safe and Solihull Partnership, bringing together the Council, SCH and partner agencies. He noted that SCH representatives attend regular tasking meetings alongside Council officers and partners. PW explained that partnership working brings together the Council, police, probation services and SCH, enabling a coordinated response to agreed priorities and locations. He noted that there have been changes to ASB roles and responsibilities over the past 12–18 months, and that it is important to understand the impact of these changes. PW confirmed that, at a strategic level, there is strong partnership working, with a focus on addressing the root causes of ASB. Cllr McLoughlin acknowledged the challenging operating environment, noting that wider economic and environmental factors may contribute to increasing ASB. He emphasised the importance of understanding these underlying drivers. He asked whether there are lessons from other housing providers, particularly in relation to preventative approaches and building stronger communities. He referred to examples such as allocation practices aimed at supporting community cohesion, recognising the challenges of doing so where there is pressure to allocate housing quickly. He noted that some placements may result in conflicting household dynamics, making it more difficult to sustain positive relationships. Cllr McLoughlin asked what can realistically be achieved by SCH in this area and what the limits of intervention are, noting that current trends suggest performance is deteriorating. CT provided additional context on the increase in anti-social behaviour (ASB), advising that higher case numbers can reflect increased confidence in reporting and should not be viewed solely as a negative indicator. She noted that current levels remain below the national median of 37 cases per 1,000 properties, compared to 31 locally. CT explained that ASB is often an emotive issue, and satisfaction levels are typically lower due to the distress experienced by residents. She added that issues such as noise and neighbour disputes, alongside wider social and economic factors, contribute to this. She confirmed that satisfaction levels remain slightly below the median, with a focus on improving performance towards upper quartile levels.

	CT outlined a number of improvement actions, including a review of the ASB service by Resolve, which will assess current practice and identify areas for improvement, and further analysis focusing on a more victim-led approach and the outcomes experienced by residents. She advised that a programme of work is planned for 2026–27 to support improvements in how ASB is managed. CT also emphasised the importance of partnership working, confirming that SCH continues to work closely with partner agencies, including the police, through regular coordination meetings. Cllr McLoughlin thanked CT for the response and acknowledged the explanation regarding increased reporting. CT added that, following management changes, the approach to ASB is being strengthened, including recruitment of three additional enforcement officers to improve case management. The Chair welcomed this and noted that, while addressing root causes is important, there must also be a clear deterrent, with tenants reminded of their responsibilities under tenancy agreements where behaviour falls below expectations. He acknowledged the complexity of addressing ASB and the need for joint working across agencies, including mental health services, the NHS, police and probation. He noted the challenge of translating strategic plans into effective delivery, particularly where significant resource and sustained effort are required. PW advised that a previous deep dive report on ASB had been prepared at the Chair's request and includes further detail on background, processes and outcomes. He suggested this be shared with Cllr McLoughlin. **ACTION: PE** The Chair asked if there were any further questions. No further questions were raised. The Chair referred to the recommendations within the report. The Board: • Noted the Council's year-end assessment of SCH performance, compliance and resident outcomes; • Recognised areas of strength in performance and governance; • Recognised areas where performance remains inconsistent and requires further improvement; • Endorsed priorities for strengthened client-side oversight during 2026–27, including outcome-based performance, data confidence and risk reduction; • Supported the approach for future reporting to clearly distinguish between activity, outcomes, risk and forward actions. • These were agreed and noted.
6.	**Homelessness, Lettings and Allocations** JM presented the report and provided an overview of homelessness and housing allocations performance, focusing on demand and delivery against statutory duties. She advised that demand during 2025–26 has remained high but broadly stable, in line with regional and national trends.

	JM highlighted that performance in prevention duties has improved, alongside a reduction in the use of temporary accommodation, particularly budget hotels. Where hotels are used, stays are typically limited to two to three days in severe weather or crisis situations. Performance in this area is currently assessed as green against Government measures. She advised that the overall number of households in temporary accommodation has reduced, indicating a positive trend. However, pressures remain, particularly in relation to the discharge of relief duties. JM noted that early prevention is more effective, whereas relief duties are more challenging, impacting both entry into temporary accommodation and length of stay. Overall, performance across prevention and relief has improved compared to the previous year, with stronger outcomes in prevention, reinforcing the importance of early intervention. JM highlighted that the key pressure remains move-on from temporary accommodation, particularly for families, where lengths of stay remain above target. This is driven by limited availability of suitable move-on options in both the private rented sector and social housing. In relation to housing allocations, JM advised that a new allocation scheme introduced in September 2025 has implemented a more targeted approach, prioritising those in greatest need. Initial review indicates a smaller, more focused housing register, increased lettings to homeless households and those in highest need, and changes to banding to reflect higher priority for homelessness cases. JM outlined key priorities for the coming year, including reducing the length of stay in temporary accommodation, strengthening early intervention, and monitoring the impact of new legislation such as Renters' Reform. She noted early indications of a slight increase in approaches linked to Section 21 notices, which will continue to be monitored. JM invited questions from members. The Chair thanked JM for the introduction and noted that the housing allocation policy's focus on those in greatest need was positive. He commented that the approach appeared responsive and was having a positive impact. The Chair invited questions and called on Cllr McLoughlin. Cllr McLoughlin referred to table 3.7 and the homelessness KPIs, seeking clarification on the figures presented. He asked whether the 2026–27 tracking measures reflect the updated methodology outlined in paragraph 3.9, noting that the figures are currently shown as not applicable. JM advised that the methodology for measuring temporary accommodation performance has changed, particularly in relation to average length of stay. She explained that the previous approach focused on individual placements, such as movement between accommodation types, and did not capture the full housing journey. JM confirmed that, from 2026–27, the revised approach tracks the full journey of a household from initial placement through to move-on, including movement between different accommodation types.

	She noted that, as this is a new methodology, there is currently no historical benchmark available for comparison. Cllr McLoughlin welcomed the revised approach to measuring temporary accommodation length of stay, noting the importance of capturing the full journey to a settled tenancy. He suggested that, for transparency, both the previous and new measures could be presented side by side to allow comparison over time. He noted that combining different types of temporary accommodation into a single measure may increase overall figures and risk giving the impression of declining performance, and emphasised the need for consistency in how data is presented. CT provided further clarification on how the measure is calculated. She advised that a placement is recorded at the point of entry into temporary accommodation, with subsequent moves between accommodation types treated as part of the same case rather than separate placements. She explained that the length of stay is measured from initial placement through to discharge of duty, typically when suitable accommodation is accepted. CT noted that figures are influenced by household circumstances, with some cases resolved quickly, while others, such as larger families or those requiring accessible accommodation, remain in temporary accommodation for longer, impacting the overall average. The Chair referred to paragraph 6.5, noting that 1,215 applicants were on the housing register as at 31 March, representing a steady increase. He asked whether this was expected and whether the backlog had been cleared. CT advised that the position is broadly in line with expectations, noting that a reduction had been anticipated following the introduction of stricter qualifying criteria, including income thresholds. She added that some historic applicants may not have re-registered, reflecting low likelihood of securing housing. In relation to the backlog, CT advised that she could not confirm the exact position at the meeting but expects only a small number of cases remain outstanding. She confirmed that work has been ongoing to address this and will confirm the position outside the meeting. The Chair welcomed this and requested a further update on the housing register backlog outside of the meeting. **ACTION – CT Provide update on housing register backlog position.** The Chair referred to the use of the online mutual exchange scheme and asked whether there is greater demand to move into Solihull than out of the borough. CT advised that data is available on both in-borough and out-of-borough moves, including multi-party exchanges, and confirmed this could be provided. **ACTION – CT Provide data on in-borough and out-of-borough mutual exchanges.**

	The Chair noted this would help understand demand pressures, particularly where like-for-like exchanges are possible. CT clarified that the HomeSwapper scheme operates nationally, allowing tenants to exchange across different areas, rather than being limited to Solihull. She advised that SCH can report on completed exchanges, including those within the borough and those involving moves into Solihull from other authorities. She noted the distinction between the mutual exchange scheme and the housing allocations process. The Chair thanked CT for the clarification and invited Cllr McLoughlin to speak. Cllr McLoughlin referred to paragraphs 4.4 and 4.5, noting the increasing trend of young people being asked to leave by family or friends, and the breakdown of informal living arrangements as a key driver of homelessness. He asked how these cases are being linked with wider Council services, highlighting the importance of access to mental health support where relationship breakdown may increase vulnerability. He queried how effectively information is shared across services and how individuals are identified to ensure appropriate support and intervention. JM advised that youth homelessness services are commissioned to St Basil's, a specialist organisation supporting young people. She explained that St Basil's works closely with mental health and wider support services, and referrals are made where additional needs or risks are identified. She advised that young people can access the youth homelessness pathway, which provides a range of accommodation options alongside ongoing support. JM noted that this includes support from St Basil's officers, corporate progression coaches and links to other services, ensuring a coordinated approach. The Chair thanked JM for the update and asked if there were any further questions. No further questions were raised. The Chair welcomed the positive progress reported, including outcomes in relation to domestic abuse and safe accommodation. He acknowledged the ongoing pressures, particularly around temporary accommodation, noting that these challenges are consistent across the region. The Chair referred to the recommendations within the report. The Board: • Noted the overall homelessness and housing allocations position for 2025–26, including improved prevention outcomes and reduced use of temporary accommodation; • Noted ongoing operational pressures relating to temporary accommodation, move-on activity and access to settled housing; • Noted the positive impact of the revised housing allocation scheme in prioritising those in greatest need. These were noted.
7.	**SMBC Assurance Report: Consumer Standards** SK introduced the report and advised that she would not cover it in detail, noting that the content is largely self-explanatory and overlaps with earlier performance reporting.

	She highlighted key areas for members' attention. SK referred to section 3, which sets out recent regulatory judgements, including comparison between local authorities and housing associations. She also drew attention to paragraph 3.3, which provides a table of ALMOs inspected to date and their outcomes. She referred to section 4.2, noting that the Council is working with Campbell Tickell to support preparation for regulation. As part of this, an assurance framework is being developed, which remains in progress and has not yet been fully agreed with SCH. SK advised that the framework has been initially populated by SCH, and that the Council's client team will undertake its own assessment of overall regulatory readiness. She further advised that a deep dive into the Safety and Quality Standard has been completed, with findings shared with SCH identifying areas where further assurance is required. A response from SCH is awaited. Finally, SK highlighted improvements in relation to the Transparency, Influence and Accountability Standard, including the establishment of the Customer Experience Committee, chaired by Susan, which will continue to develop as it becomes established. The Chair confirmed there would be an opportunity for questions and invited members to speak. Cllr McLoughlin asked for an overview of the Council's and SCH's current position in relation to regulatory ratings, and what would be required to achieve a C1 or C2 grading. He acknowledged the broad nature of the question and sought clarity on the organisation's current position and the further work required to improve outcomes under the regulatory framework. SK referred to the earlier performance discussion, noting that gaps in assurance remain a focus of ongoing work. She explained that, in an inspection, the Regulator will engage with both the Council and SCH, with a focus on how the Council gains assurance that services are being delivered effectively and that residents are safe. SK advised that the approach being developed through reporting and dashboards is intended to demonstrate that the Council understands performance, how this compares with sector benchmarks and local targets, and where assurance gaps exist. She noted that the next step is to strengthen visibility of what sits behind the data, how gaps will be addressed, the trajectory for improvement, and the associated timescales. SK advised that, until this position is fully developed, it is not possible to assign a specific regulatory rating. The priority is to ensure a clear understanding of current performance, identified gaps, and how these will be addressed. She added that an important element of this work is ensuring that resident experience is clearly understood and reflected. Cllr McLoughlin thanked SK for the response and acknowledged the explanation, noting the importance of identifying assurance gaps and having clear improvement plans in place. He clarified that his questions were intended to ensure clarity on performance, planning and improvement, both for regulatory inspection and for service delivery to residents. Cllr McLoughlin noted that some repetition in questioning is expected as the Board develops its understanding, and that this should support greater clarity over time.

	He added that, while inspection can create pressure, it can also be beneficial in providing external perspective and insight into performance. He asked whether there are opportunities to undertake peer learning with organisations that have already undergone inspection. SK confirmed that engagement has taken place with other local authorities operating ALMOs, including Wolverhampton, which has acted as a key comparator. She advised that Wolverhampton self-referred to the regulator due to issues with stock condition survey data and was subsequently inspected, receiving a C2 judgement. She noted that this reflected both the self-referral and their understanding of the issues. SK further advised that Wolverhampton continues to engage regularly with the regulator, including six-weekly meetings to monitor progress against its improvement plan. She noted that this illustrates that regulatory engagement continues beyond inspection, with a focus on embedding improvement and delivering outcomes for residents. LS supported the points made by SK and advised that the appendix within the report sets out SCH's self-assessment of actions still required. He noted that this reflects areas identified for improvement. He explained that this forms part of the evidence base which the Council will use to form its own independent assessment, as reflected in the summary report. LS added that it would not be appropriate to predict the outcome of any future inspection, noting that while preparation can be thorough, outcomes cannot be determined in advance. The Chair thanked LS for his comments and noted that, while gaps remain, it is important that clear plans and processes are in place to demonstrate progress. He advised that the regulator will expect evidence of delivery as well as planning, and that improvement represents an ongoing process, including sustaining progress beyond inspection. He noted that this will require a continued cultural shift. The Chair asked if there were any further comments. No further comments were raised. The Chair referred to the recommendations within the report. The Board: • Noted the latest position on consumer regulation and the developing assurance approach; • Noted SCH's current assessment against the standards; • Noted the main findings from the Council's review of the Safety and Quality Standard; • Noted the next steps for both the Council and SCH in building towards a more aligned position. • These were noted.
8.	**Finance Update** The Chair advised that SG was unable to attend due to emergency leave and that it had not been possible to arrange an alternative officer to present the report.

	The Chair advised that any questions on the finance report could be submitted by email to himself or directly to SG, with responses to be provided outside of the meeting.
9.	**Biomass Audit Report** ZC introduced the biomass audit report. She advised that the audit was undertaken between July and November 2025, with the final report issued in February 2026 following engagement with management. ZC noted that the report has already been considered through a number of governance routes, including ELT, CLT, SCH Audit and Risk Committee, and the Council's Audit Committee. As a result, QMB is receiving the report at a later stage than usual. She advised that the report represents a snapshot in time, and that progress will have been made since the audit was completed. ZC informed the Board that a follow-up review is planned for Quarter 2 of the current financial year (August–September), subject to agreement with management. This will provide a more up-to-date position on progress. She confirmed that the report was presented for information and invited questions. The Chair thanked ZC and confirmed he was familiar with the report, noting that it had previously been considered by the Audit Committee. ZC confirmed this. The Chair advised that, from an audit perspective, it is important to understand whether lessons have been learned and whether appropriate controls and safeguards have been introduced to prevent recurrence. ZC advised that management is progressing a range of actions arising from the audit, alongside actions already identified internally. She noted that it would be more appropriate to review progress following completion of the follow-up review. She added that management has responded positively and that work has also progressed through a Task and Finish Group. The Chair thanked ZC for the response and noted the unique nature of the situation, recognising that some of the challenges could not have been anticipated at the outset. He referred to external factors, including changes in fuel costs and supply, which have impacted the service. He confirmed that he had no further questions and invited Cllr McLoughlin to comment. Cllr McLoughlin welcomed the quality and thoroughness of the audit, acknowledging the scale and complexity of the issues. He noted that both the audit work and the Task and Finish Group had been of a high standard and expressed appreciation for the work undertaken. He also acknowledged the challenges faced by SCH and clarified that his comments were intended to support improved outcomes for residents. Cllr McLoughlin highlighted that a key focus moving forward will be the next phase of Task and Finish work, particularly in relation to resident engagement, noting that feedback suggests relationships with some tenants have been affected.

	The Chair thanked Cllr McLoughlin and confirmed his agreement with the points raised. The Chair thanked ZC for the report and her attendance.
10.	**Any Other Business** The Chair reminded members that any questions on the finance report should be submitted directly to SG or via the Chair. He invited members to raise any other business. Cllr McLoughlin raised a point in relation to "no access" properties, noting that this remains a recurring issue across several areas, including inspections and compliance activities such as fire safety and gas checks. He asked whether a strategy for addressing hard-to-access properties would be brought forward. LS advised that a pilot scheme undertaken in the previous year, focused on electrical inspections, had been successful in reducing long-standing outstanding cases. He explained that this approach has now been adopted as standard practice, with two additional officers recruited to support delivery. LS confirmed that the approach is being extended across a range of service areas, including stock condition surveys and other compliance activity, with implementation planned across approximately eight or nine areas. He noted that this will initially run for a six-month period before transitioning into the enforcement function. He confirmed that a report on this work could be brought to a future meeting. The Chair welcomed this and confirmed that a further report would be useful. **ACTION – LS Provide a report on the "no access" approach and progress.** PW added that the Council maintains oversight of this issue, with SCH providing weekly updates on long-standing cases, including electrical certification, enabling close monitoring of progress and impact. He noted that this supports evaluation of the approach prior to embedding it as business-as-usual. PW advised that, while "no access" may explain some performance issues, the regulator will expect clarity on actions being taken, effectiveness, risk mitigation, and ongoing improvement. Cllr McLoughlin emphasised that barriers to access may reflect complex underlying circumstances, including vulnerability and mental health factors. He highlighted the importance of maximising access opportunities to undertake multiple checks during a single visit. LS confirmed that this approach is being adopted, including maximising access visits and applying a risk-based matrix to prioritise properties, particularly where vulnerabilities are known. He advised that further information will be provided to members, including a briefing note in advance of the next meeting. **ACTION – LS Provide a briefing note on the "no access" approach and actions ahead of the next meeting.**

	The Chair thanked LS for the update and noted that the Annual Equalities Report within the agenda would also support understanding of tenant needs. He asked that thanks be passed to AP for his contribution and wished him well. LS confirmed this would be done. The Chair thanked members and officers for their contributions and noted the productive discussion. The meeting was formally closed.
	Date of Next Meeting **Tuesday 25 August 2026. 5.00pm – 7.00pm (Teams)**.

Action Tracker

No.	Date Assigned	Action	Responsible Officer	Date to be Completed	Completed? Yes/No	Date Completed	Additional Notes
	2026						
1	2.3.26 (Item 4)	Stock Condition Surveys – SCH to present a revised analysis at the next meeting summarising current stock condition findings, required and planned investment levels, and the projected timeline to achieve 100% decency.	SCH	June QMB			Deferred
2	2.3.26 (Item 4)	Discussion with Democratic Services in relation to QMB minutes being part of the democratic process and available for public view	PW/SK	ASAP	Yes	June QMB	Verbal Update at June QMB Meeting - SK
3	2.3.26 (Item 5)	Check that residents are being informed of works being undertaken - in relation to damp and mould and advise Cllr Carthew	DB	ASAP	Complete	Mar-26	Upon inspection of reported DMC, if works required cannot be not completed at inspection and repeat visits are needed, the customers informed and will also receive a report within 10 day of the inspection setting out all works required and the need for access until works are complete.
4	2.3.26 (Item 6)	Discussion on communal space to take place with Cllr Carthew following his question in relation to communication with Birmingham City Council	SK	ASAP	Y	21-May	Meeting took place with Cllr Carthew
5	2.3.26 (Item 8)	Issue in Olton where the wrong contractor was repeatedly sent to undertake works - DB to follow up and report back to Cllr Carthew	DB	ASAP	Complete	May-26	email sent detailing findings of the investigated matter. Headline two teams had same work orders and one team completed ahead of second team arrival
6	2.3.26 (Item 8)	Repairs Backlog – Future reports to include analysis of overdue repair jobs, covering the length of time outstanding, the types of repairs involved, the scale of the backlog, and the mitigations in place to manage risk while works remain outstanding.	DB/AP	June QMB	Complete	Jun-26	suggested detail now included in SCH performance reports
7	2.3.26 (Item 8)	Backlog of works in September 2025 was 2262 overdue. The report states that there is 1508 - clarification asked for by SK	DB	ASAP	Complete	May-26	Email sent. The difference related to internal WiP and specifically tracking progress against additional resources approved by SCH Board. Total WiP (internal and contractors) at the end of Sept 2025 was 2262, at year end the total number had fallen to 879.

8	2.3.26 (Item 8)	Repairs Continuous Improvement Plan to be shared with QMB Members	DB	June QMB		June QMB	Important to note internal and external audits note the repairs service and associated Customer satisfaction to be performing well. The continuous improvement plan identifies areas for consideration which need to be balanced with available resources and capacity, those that we can do are in scope, others are noted should capacity/resource become available or seen as a priority over other areas.
9	15.6.26 (Item 4)	Provide detailed Awaab's Law timescales to Cllr McCabe.	LS	ASAP	Yes	08-Jul-26	Sent Via Email
10	15.6.26 (Item 5)	Provide evidence or a tool demonstrating how the repairs backlog is being reduced.	LS	ASAP			
11	15.6.26 (Item 5)	Stock condition survey coverage - Cllr Parker requested progress against this target is reported at the next QMB meeting	SK	August QMB			
12	15.6.26 (Item 5)	Share the ASB spotlight report done last year with Cllr McLoughlin	PE	ASAP	Yes	08-Jul-26	Sent via email
13	15.6.26 (Item 6)	Provide update on housing register backlog position Provide data on in-borough and out-of-borough mutual exchanges	CT	ASAP			34 mutual exchanges completed outside of borough (i.e one party was not an SMBC tenant), 4 completed in borough (i.e both parties were SMBC tenants) At 13th July, there are 239 housing applications for processing, 120 are still within the 10 day target and 119 out of target. Oldest dated application is 11th June so operating 12 days over target. Pressures are a result of additional evidence required at point of application, receipt of daily new applications, and in process of recruiting to new posts created through restructure of teams.
14	15.5.26 (Item 10)	Report on No Access work to date and next steps	PE	ASAP	Yes	08-Jul-26	Sent via email
15							
16							
17							

Key

	Overdue
	In Progress
	Completed Actions

ITEM 3

QUARTERLY MONITORING BOARD

Report title:	Report from the SCH Board Chair
Meeting date:	25 August 2026
Report from:	Simon Wilson, Chair SCH

1. Report overview/purpose

1.1 To provide the Quarterly Monitoring Board with

- an update on the assurance received as Board Chair
- update on key issues and decisions through the SCH Board.

2. Recommendations

2.1 The Quarterly Monitoring Board is asked to:

(1) Note the report

3. Background/context

3.1 This report from the SCH Board Chair is intended to contribute to the assurance provided to SMBC about the running of the housing and associated services. It draws on the Board's strategic role in directing the affairs of SCH and in particular, its core responsibilities to:

- set and ensure compliance with the values, vision, mission and strategic objectives of SCH, ensuring its long–term success
- set a positive culture, with strong customer focus
- ensure that the organisation operates effectively, efficiently and economically
- provide oversight, direction and constructive challenge to the organisation's Chief Executive
- satisfy itself as to the integrity of financial information, approving each year's budget, Delivery Plan and annual accounts prior to publication
- assure itself of compliance with all regulatory requirements, with

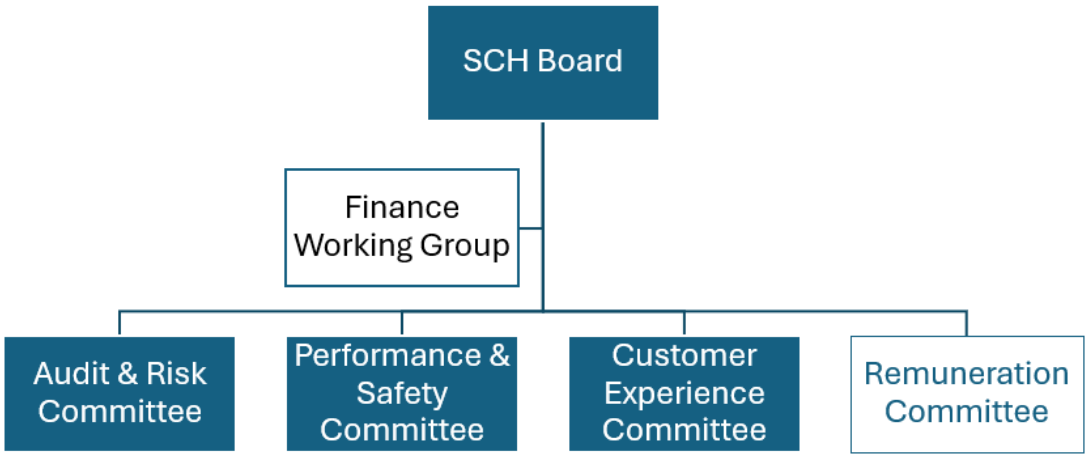
particular regard to building safety
- establish, oversee and review annually a framework of delegation and systems of internal control and
- establish and oversee a company-wide risk management framework to safeguard the assets of the organisation.

3.2 My report follows a slightly different format this time as the next meeting of the SCH Board falls after QMB. The last meeting of the Board was held on 3rd June 2026. A summary of the key issues considered at the Board meeting were included in my report to QMB on 15th June.

3.3 The next meeting of the SCH Board is on the 15th September when it will review the quarter one Performance Report.

3.4 I reported to the last meeting of the Quarterly Monitoring Board that we have appointed six new Board members. They have been through a programme of onboarding and induction.

3.5 We have also now implemented the agreed changes to our committee structure which were reported to QMB in February. The revised governance structure is illustrated in the diagram below:



3.6 Our new Customer Experience Committee is comprised of our tenant board members and five tenant members. I also attend the Committee. The tenant members have been through a training programme and the Committee meets formally for the first time on September 2nd.

3.7 I am pleased to announce the appointment of Mark Pearson as Chief Executive. Mark took over at the beginning of August from Lee Sugden, who served as Interim Chief Executive for six months. Mark brings nearly 30 years of social housing experience to SCH, having previously served as Chief

Executive of Leeds and Yorkshire Housing Association and Managing Director of 54North Homes. Mark is also Vice Chair of the Board at Brighter Futures, a non-profit Registered Provider of Social Housing and Supported Accommodation based in Stoke-on-Trent.

ITEM 4

QUARTERLY MONITORING BOARD

Meeting Date: 25 August 2026

Report Title: Quarter 1, Performance and Assurance Update

Report From: Satnam Kaur, Assistant Director, Housing

1 Purpose

1.1 The purpose of this report is to provide Members with the Quarter 1 2026/27 performance, compliance and resident engagement information submitted by Solihull Community Housing (SCH), together with an update on the Redwood House Legionella incident discussed at the June meeting of QMB.

2 Recommendations

2.1 QMB is asked to note:

a) The attached Quarter 1 2026/27 performance, compliance and resident engagement information submitted by SCH.
b) That no formal Council assessment of Quarter 1 performance is being presented at this stage
c) That a further report will be presented to QMB following consideration of the Quarter 1 information by SCH Board
d) The update provided in relation to the Redwood House Legionella incident and the outcome of the Council's engagement with the Regulator of Social Housing

3 Quarter 1 Performance, Compliance and Resident Engagement Information

3.1 The attached information comprises:

- Strategic Performance Report - Quarter 1 2026/27
- Building Safety and Compliance Dashboard - Quarter 1 2026/27
- Landlord Stock Quality and Safety Reporting - Quarter 1 2026/27
- Voice of the Customer Report - Quarter 1 2026/27.

3.2 The Quarter 1 information has not yet been considered through SCH's governance arrangements, including SCH Board.

3.3 Given that the Quarter 1 information has not yet been considered by the SCH Board and that the Council's review remains ongoing, this report does not seek to provide a formal Council assessment of Quarter 1 performance, compliance or resident outcomes at this stage.

3.4 Following consideration by SCH Board and completion of the Council's review, a further report will be presented to QMB setting out the Council's assessment of the Quarter 1 position and any observations arising from its review.

3.5 Members are invited to note the attached information and identify any areas where they would like further information or clarification.

3.6 Members may also wish to note the continued development of SCH's resident engagement arrangements, including the upcoming inaugural meeting of the new Customer Experience Committee and the ongoing work of the resident SCHape Panel. These arrangements provide additional opportunities for residents to influence and scrutinise services and may provide useful insight into resident priorities and customer experience.

3.7 SCH has also recently retained TPAS accreditation, providing independent assurance that our approach to tenant engagement and resident influence continues to meet nationally recognised good practice standards.

4 Redwood House Legionella Incident

4.1 Members received a verbal update at the June 2026 QMB meeting regarding the Legionella incident at Redwood House.

4.2 Following notification of the incident, the Council worked closely with SCH, the UK Health Security Agency (UKHSA), the Health and Safety Executive and the Regulator of Social Housing (RSH). In line with the Council's responsibilities as landlord, the matter was formally notified to the RSH and a number of subsequent updates were provided as investigations and remedial works progressed.

4.3 Extensive sampling, inspections and precautionary works were undertaken across the building. Follow-up sampling from the original affected flat returned satisfactory results and wider testing did not identify any further suspected or confirmed cases associated with Redwood House.

4.4 The investigation concluded that the most likely source of the Legionella contamination was associated with historic boiler replacement works within the affected flat, which resulted in sections of redundant pipework, commonly referred to as dead legs, being left within the water system. Subsequent inspections identified similar pipework arrangements within a number of other flats, enabling remedial works to be undertaken and associated risks to be removed or appropriately managed.

4.5 Following the investigation, SCH's contractor reviewed its boiler replacement procedures and introduced additional controls to ensure the identification and removal of redundant pipework and dead legs, supported by enhanced quality assurance arrangements. SCH also strengthened its void property procedures and monitoring arrangements.

4.6 Separately, the Council and SCH are actively reviewing the wider learning arising from the incident. This includes consideration of water safety arrangements, assurance processes and outstanding remedial works.

4.7 Following review of the information provided, the Regulator of Social Housing confirmed on 10 August:

"We are satisfied that the Council has provided sufficient assurance that it has investigated the incident appropriately, implemented effective remedial action, identified and addressed the likely root cause, and established appropriate ongoing monitoring and control arrangements. As such, we consider this matter closed."

4.8 The Regulator also encouraged the Council to ensure that lessons learned from the incident continue to inform its wider approach to managing Legionella risks across similar residential buildings within the housing stock.

5 Appendices

- Strategic Performance Report - Quarter 1 2026/27
- Building Safety and Compliance Dashboard - Quarter 1 2026/27
- Landlord Stock Quality and Safety Reporting - Quarter 1 2026/27
- Voice of the Customer Report - Quarter 1 2026/27

Customer & Corporate Services Dashboard

			Apr-26	May-26	Jun-26		YTD		26/27 Target	25/26 Target	Benchmark*	DoT**	Comment
CH01a	Stage 1 complaints per 1,000 properties	TSM MI	5.22	3.69	8.71		17.62		N/A	N/A	46.30	N/A	**Status:** The 85 Stage 1 complaints received in June is the highest number on record (previously 71 in Jan-26). There is no obvious explanation for this spike in complaints, but there was a small increase in homelessness complaints, and the two bank holidays and school half term week in May could also be a factor. **To note:** The numbers relate to complaints that come under the TSM definition. It excludes non-LCRA customers.
CH01b	Stage 2 complaints per 1,000 properties	TSM MI	1.74	1.74	1.90		5.38		N/A	N/A	7.70	N/A	**Status:** There were 19 stage 2 complaints in May, slightly over the 12 month rolling average of 15.
CH02a	Complaints resolved in timescale (Stage 1)	TSM MI	96.23%	98.11%	100.00%		98.05%		90.00%	85.00%	85.90%	↑	**Status:** 63 out of 63 Stage 1 complaints were completed on time, the second highest number resolved in a month **Forecast :** On target.
CH02b	Complaints resolved in timescale (Stage 2)	TSM MI	91.67%	93.33%	63.33%		77.19%		96.00%	96.00%	85.00%	↓	**Status:** 11 Stage 2 complaints were out of time in June. **Issue**: All 11 out of time complaints were due to the Acknowledgment target date not being met. **Mitigation**: Work has been done on Create to ensure that the correct acknowledgement target dates are always correct **Forecast:** The YTD target is achievable.
TP01	Overall satisfaction with services provided by SCH	TSM P			81.08%		81.08%		78.00%	80.00%	71.10%	↑	**Status:** 81.08% if the 2nd highest quarterly overall satisfaction achieved by SCH
TP06	Satisfaction that SCH listens to and acts upon tenants' views	TSM P	-	-	75.89%		75.89%		70.00%	71.00%	59.10%	↑	**Status:** The Q1 satisfaction score is 5% higher than in Q4 25/26 and the highest since Acuity surveys began
TP07	Satisfaction that SCH keeps you informed about things that matter to you	TSM P	-	-	79.49%	-	79.49%	-	77.00%	79.00%	68.50%	↓	**Status:** Satisfaction is over target and slightly lower than the 25/26 Q4 score of 80%
TP08	Satisfaction that SCH treats me fairly and with respect	TSM P	-	-	85.19%	-	85.19%	-	85.00%	85.00%	77.00%	↔	**Status:** Figure is over target and the same as the previous quarter.

TP09	Satisfaction with SCH's approach to handling complaints	TSM P	-	-	47.37%	-	47.37%	-	40.00%	45.00%	34.10%	↑	**Status:** 47% satisfaction is over target and the highest since 24/25 Q1, but the low number of surveys made on this TSM (19 this quarter) mean that this TSM value can very significantly across the year.
WB13	Customer satisfaction (disabled facilities grants)	SCH KPI	92.86%	100.00%	100.00%		96.55%		94.00%	94.00%	N/A	↔	**Status:** Meets target, with just one dissatisfied customer in Q1
CR2	Overall satisfaction (transactional)	SCH KPI	87.25%	80.08%	81.86%		83.19%		87.00%	87.00%	N/A	↑	**Status:** With 8/9 surveys received, transactional survey will finish below target in June **Issue:** Repairs and Contact Centre satisfaction has been below the 25/26 average for the last 2 months and with these containing over 80% of the total surveys, it has a big affect on the overall satisfaction Copilot was used to analyse comments from the previous and current years to investigate reasons for this drop and recommendations to improve customer satisfaction. These reports have been sent to the repsective managers. For repairs the two main themes given for the drop in satisfaction are long repair times and difficulty contacting SCH, the two top themes for Contact Centre are final outcome and wait times. **Mitigating Actions:** The above mentioned reports give a number of recommendations on ways to improve satisfaction. **Forecast**: The target is recoverable is Repairs and Contact Centre satisfaction can be improved to 2025/26 levels. The two main themse for the drop in Contact Centre satisfaction are the final outcome and speed of answer.
CR36	Contact centre ASA	SCH KPI	709	389	354		461		210	210	185	↑	**Status:** ASA improved again in June, despite there being slightly more calls per day than in May. ASA in June was the lowest since Aug-25. **ASA 354 (excluding callback calls)**: 389 seconds **Calls Offered** : 9,209 calls (May 7,868) **% Calls Answered**: 76% (May 77%) **Forecast:** Due to the higher ASA across Q1 it is likely that this KPI is not recoverable, though the recent downward trends are encouraging.

*Benchmark based on median performance from 2024/25 RSH local authority and ALMO and benchmarking
**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

Asset Management Dashboard

			Apr-26	May-26	Jun-26		YTD		26/27 Target	25/26 Target	Benchmark*	DoT**	Comment
RP01	Homes that do not meet the Decent Homes Standard	TSM MI	1.13%	1.21%	1.32%		1.32%		1.75%	2.00%	1.74%	↓	**Status:** Monthly reporting on this KPI reflects a snapshot in time and hence can vary month on month. Works to non-decent properties are being prioritised with the end of year target being maximum 1.75% non-decent.
RP02a	Repairs completed within target timescale (emergency)	TSM MI	89.28%	91.83%	93.95%		91.81%		95.50%	95.50%	95.00%	↑	**Issue:** 93.95% of emergency repairs were completed within target timescales in June. Performance for external emergency repairs was 85.92%, compared to 99.36% for internal repairs. Majority of external jobs relate to OOH, which may be administrative processes affecting performance reporting. **Mitigation:** This has been raised to Dodd Group to further investigate if this is an administrative process issue. A review of the external emergency repairs process is underway to identify the root causes and implement actions to improve performance. **Timescales:** Sept 2026
RP02b	Repairs completed within target timescale (non-emergency)	TSM MI	78.63%	80.63%	78.36%		79.19%		85.00%	85.00%	84.80%	↓	**Status:** 78.36% of non-emergency repairs were completed within target timescales in June. Performance for external non-emergency repairs was 91.68%, while internal repairs achieved 69.49%. **Mitigating Actions:** Temporary additional resources are supporting improvements in internal repairs performance following long term sick impacting on operative resource. A review of the overall service is underway to identify long-term solutions for sustained performance improvement. **Timescales:** Ongoing
TP02	Satisfaction with repair in the last 12 months	TSM P	-		80.21%		80.21%		80.00%	80.00%	72.80%	↑	**Status:** Figure is over target and 3% higher than the previous quarter.
TP03	Satisfaction with time taken to complete the last repair	TSM P	-		80.85%		80.85%		80.00%	76.00%	68.30%	↑	**Status:** Satisfaction is over target.
TP04	Satisfaction that home is well maintained	TSM P	-		77.62%		77.62%		75.00%	80.00%	71.00%	↑	**Status:** The figure is over target for Q1
	Percentage of homes with an EPC rate of C or above	SCH	75.00%	75.00%	75.00%		75.00%		76.00%	76.00%		↔	**Status:** The percentage stock EPC C and above is based upon 5,199 properties with a current EPC, 940 properties with an expired EPC, 3,529 properties with an RdSAP calculation and 7 properties with no SAP calculation.

*Benchmark based on median performance from 2024/25 RSH local authority and ALMO and benchmarking
**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

Solihull Community Housing
Shaping our neighbourhoods

Housing Services Dashboard

			Apr-26	May-26	Jun-26		YTD		26/27 Target	25/26 Target	Benchmark*	DoT**	Comment
NM01	ASB cases per 1,000 properties	TSM MI	2.56	2.46	1.82		6.91		N/A	N/A	43.40	N/A	**Status:** 18 ASB cases were recorded in June, lower than the 12 month average of 23.
NM01a	ASB cases per 1,000 properties (Hate Crime)	TSM MI	0.10	0.00	0.00		0.10		N/A	N/A	0.50	N/A	**Status**: There were 0 Hate Crimes recorded in June.
TP10	Satisfaction that SCH keeps communal areas clean and safe	TSM P	-	-	70.59%		70.59%		72.00%	70.00%	65.80%	↑	**Status:** Satisfaction is slightly below target, though up from 25/26 Q4 (68%).
TP11	Satisfaction that SCH makes a positive contribution to the neighbourhood	TSM P	-	-	72.36%		72.36%		70.00%	74.00%	63.70%	↑	**Status:** Q1 figures are above target and 2% higher than the previous quarter.
TP12	Satisfaction with SCH's approach to handling ASB	TSM P	-	-	58.33%		58.33%		60.00%	60.00%	58.00%	↑	**Status:** ASB Satisfaction for Q1 is slightly below target, but higher than the 25/26 year end figure of 54%
VL13	Percentage of rent loss due to voids(Exc. TA)	SCH KPI	0.89%	0.89%	0.91%		0.91%		1.25%	1.25%	2.34%	↓	**Status:** Meets Target
VL4	Percentage of dwellings vacant but available to let	SCH KPI	0.80%	0.79%	0.76%		0.76%		0.80%	N/A		↑	**Status:** Meets Target
VL1	Average relet time (all)	SCH KPI	54.40	60.20	53.03		56.19		60 days	N/A		↑	**Status:** Meets target. June re-let time was 6 days lower than in May.
WR15	Current tenant arrears as % of rent debit	SCH KPI	3.33%	3.43%	3.75%		3.75%		3.20%	3.50%	2.37%	↓	**Status:** As at June, rent arrears stand at 3.75%, representing an increase of 0.32% compared with May. Whilst this is 0.55% above the year-end target of 3.20%, the overall position should be viewed in the context of several significant operational and environmental factors. These include the annual rent increase, growth in Universal Credit (UC) caseloads, temporary staffing pressures, changes to patch allocations, and the withdrawal of RentSense as part of the transition back to Open Housing. **Mitigation:** To maintain performance and manage risk, the following measures remain in place: • Early intervention and daily arrears monitoring to maximise prevention opportunities and support rent collection. • Proportionate legal enforcement, with 49 notices issued in June, broadly in line with the previous year. A total of 108 notices have been issued during Q1, representing a reduction of 49 notices compared with the same period in 2025/26. • Successful cessation of RentSense (Mobysoft) on 6 June 2026 and transition back to Open Housing. • Balanced weekly collection activity, combining firm enforcement where appropriate with targeted tenant support. • Continued partnership working with SMBC, particularly in relation to the effective application of Housing Payments. • Ongoing focus on system resilience following the MRI health check completed in January 2026. Whilst recommendations have been identified, implementation by MRI remains outstanding. • Continued automation improvements, including the introduction of the UC Bot in April 2026, which is already delivering efficiency gains and creating additional operational capacity **Timeframe / forecast:** Whilst cost of living pressures, seasonal trends, and increasing UC caseloads are expected to remain challenging, arrears performance remains broadly stable and is tracking closely to the position reported during 2024/25. Although the
HO1b	Average stay in temporary accommodation (adult only households) - days	SCH KPI	47	48	88		68		120	N/A	N/A	↓	**Status:** This KPI is within target, although shows an increase from last month. We have some more complex individuals in TA currently and all the move on is additionally impacted by a reduction in void properties suitable for the cohort, as well as staffing pressures in the team. Status: This is having an adverse effect upon the casework as staff are picking up additional duty and tasks. **Mitigating Actions:** We aren't complacent around this KPI despite being within target. Management need to carry out robust case reviews to ensure timely decision and robust well-informed decisions are made around priority need. We need to work in a timely way to avoid the burden of main duty decisions. Not least, we need to be striving for prevention outcomes in the first place. Given the staffing pressures, we cannot deal with presentations as quickly as we would like, but are always working on solutions to address this. **Timeframe:** We are within the KPI, but need to remain committed to this, and avoid slippage as seen this month. **Forecast:** As above, we need to work continually to keep this KPI in target and not let the good work slip back.

HO1a	Average stay in temporary accommodation (families with children) - days	SCH KPI	**346**	**364**	**463**		**379**		250	95	N/A		**Status:** The KPI of under 250 days for households with children remains a challenging one, given the number of households in TA and awaiting move-on. Equally, as this equates to an average stay and we are moving on long staying households – this month is no different. Impacting upon the average stay for families with children there were just 8 vacations, though one of which was 3 ½ years and another 4 over 1 year. Most notably however, year on year the number of households that have been in TA for 1 year or more has dropped from 70 to 59, a 16% decrease. This is a positive message. **Mitigating Actions:** As a result of the changes to the housing allocation scheme, many of these households are being matched to suitable tenancies and there is an increased move on from TA. We need to maximise our ability to prevent homelessness in the first place and consider and promote alternative outcomes of tenure such as the private rented sector. **Timeframe**: Mitigating actions around alternative tenures is ongoing and the hope is that we can, by being involved earlier , prevent more households from becoming homeless. Equally, the additionally priority from the housing allocation scheme will come to fruition with reducing numbers expected in TA over the next 12 months. **Forecast:** I expect a fair amount of fluctuation in this KPI over the next 12 months, particularly as the target is affected by the stay at the point in which they moved on from TA. Given the increased number of families matched to social housing properties, we are additionally managing increasing requests for a review on the basis of suitability, although in the main our decisions are being upheld which is positive.
HO5	Percentage of homeless approaches where prevention or relief achieved	SCH KPI	**47.58%**	**49.41%**	**53.06%**		**50.00%**		58.00%	60.00%	N/A		**Status:** Achieving positive outcomes in the prevention and relief period is more challenging to do. We try all we can through negotiation to prevent homelessness, however one they become homeless, then solutions are more difficult to achieve. Outcomes remain astray from the target of 58%. Looking at this more closely, 61.76% of positive outcomes were in the prevention period, compared to 41.8% in the relief period. Of these, two private sector tenancies were secured in the prevention period and 1 in relief via Solihome. **Mitigating Actions:** This has been and continues to be an area of focus, and the team are encouraged to be innovative, as well as carrying out more robust casework and making negative decisions where it is deemed to be the case. We have an in-house link to supported provision and the private rented sector which helps. The Team leaders carry out detailed case reviews, and this helps to identify solutions. **Timeframe:** All mitigating actions are in place; we just need to keep HO5 as an area of attention to keep the momentum. **Forecast:** We anticipate that throughout the year, and as the service restructure settles this will allow us to concentrate on KPIs and. HO5 , to achieve the target set.
H08	Total households in temporary accommodation (all)	SCH KPI	**204**	**202**	**207**		**207**		-	N/A	N/A		Whilst there is a small increase of 3 households in TA , this is still evidencing that we are focusing on reducing the overall TA numbers. There is a real collaborative effort across the team to move households on. Again, a factor, whilst not an excuse, the staff levels supporting with TA due to team sickness are lower and thus inevitably slowing down processes.
HO8b	Total households in temporary accommodation with children(Hotel not included)	SCH KPI	**178**	**176**	**179**		**179**		-	N/A	N/A		After a reduction last month from 178 (April) to 176 (May), we have an increase of families with children in TA to 179 (3 from the previous month). At the close of May 429 children were in TA, and in the month of June 435 – an increase of 6.

*Benchmark based on median performance from 2024/25 RSH local authority and ALMO and benchmarking
**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

Building Safety & Compliance Dashboard

			Apr-26	May-26	Jun-26		YTD		26/27 Target	25/26 Target	Benchmark*	DoT	Comment
BS01	Percentage of properties with valid gas certificate	TSM MI	99.97%	99.97%	100.00%		100.00%		100.00%	100.00%	99.97%	↑	Meets target.
BS02	Percentage non-domestic assets covered by a valid FRA	TSM MI	100.00%	100.00%	97.35%		97.35%		100.00%	100.00%	100.00%	↓	**Status:** There were 18 fire risk assessment outstanding at the end of June. . **Mitigation:** All Fire Risk Assessment were completed by end of June.We continue to experience delays in the receiving of this data. SLA for provision of reports will continue to be monitored and any intervention required will be made. **Timeframe:** Ongoing
BS03	Percentage known asbestos locations re-inspected within benchmarked period (communal areas)	TSM MI	100.00%	99.27%	94.19%		94.19%		100.00%	100.00%	100.00%	↓	**Status:** There were 40 communal Asbestos re-inspections overdue at the end of June. **Mitigating Actions:** All overdue re-inspection are now complete. 33 of the overdue were completed within 3 days of end of month, with the remaining 8 re-inspections completed on 10/07/2026. **Timeframe:** These have all now been completed.
BS04	Percentage of relevant water installations covered by a risk assessment	TSM MI	100.00%	100.00%	84.62%		84.62%		100.00%	100.00%	100.00%	↓	**Status:** 8 WRAs are overdue at end June 2026. 6 were completed before the end of June but awaiting signoff by contractor. **Oldest Compliance Due Date** : The oldest overdue WRA has a due date of 14/06/2026. **Mitigating Actions**: No significant changes to the water system since the existing WRA was completed with remedial works continuing. **Timeframe**: Both overdue WRA are being completed on 18/07/2026.
BS05	Percentage communal passenger lifts that require a thorough examinations (LOLER)	TSM MI	100.00%	100.00%	100.00%		100.00%		100.00%	100.00%	100.00%	↔	Meets target.
TP05	Satisfaction that home is safe	TSM P	-		81.82%		81.82%		80.00%	81.00%	77.30%	↓	**Status**: Meets target.
AM1b	Percentage domestic properties with a satisfactory Electrical Installation Condition Report	SCH KPI	98.77%	98.90%	98.83%		98.83%		100.00%	100.00%	95.40%	↑	**Status:** There were 113 properties overdue at the time of reporting. Of these 6 were confirmed as completed and awaiting certificates to be issued by the contractor. **Oldest Compliance Due Date:** The oldest overdue EICRs are the 4 properties which do not have record of a previous EICR. The next oldest overdue EICR was due on 08/10/2018 **Mitigating Actions:** All EICRs which are beyond the 5 year re-inspection requirement are part of performance improvement plan overseen by the Building Safety Manager. We have recruited a Legal Enforcement Officer, start date 07/07/2026. Following training, they're priority will be processing outstanding EICRs on a risk based priority. SCH have extended the remit for the Customer Experience team to include access, 2 Customer Liaison Officers have been appointed. They will work along side the Legal Enforcement Officer to gain access.
DM1	Percentage Damp and Mould inspections completed within timescale	Awaab's Law	97.98%	98.55%	89.04%		95.44%		100.00%	100.00%	N/A	↓	**Status:** Performance for damp and mould inspections was 89.04% at the end of June. In total, 74 inspections were completed and 8 were completed outside of timescale. Property 1 & 2 - Tenant requested to rebook Property 3, 4 & 5 - Not been possible to gain access Property 6 & 7 attended but mins/hours over 24 hour target Property 8 - missed job- has been scheduled **Mitigating Actions:** SCH are conducting deepdive into DMC and exploring developing case management software which will help to prevent any oversight and ensure compliance **Timescales:** phase 1 - Oct 26 phase 2 - Jan 27

DM2	Percentage Damp and Mould remedials completed within timescales	Awaab's Law	96.34%	91.67%	89.29%		92.48%		100.00%	100.00%	N/A	↓	**Status:** Performance for damp and mould remedials was 92.48% at the end of June. There were 84 remedial cases completed in the month of June, 9 remedial cases were completed outside of the target. Property 1 & 9 – delayed due to resources Property 2 & 3 - Dodds electrical Property 4 - Delayed roof & loft repair Property 5 & 6 –appointments offered within timeframe, rescheduled to suit tenant Property 7 - Dodds loft survey Property 8 - attended but 50 mins over target cut off **Mitigating Actions:** We are currently undertaking a detailed review of the process for damp and mould cases (DMC) and no access. A Healthy Homes Manager is expected to be in post by the end of July. We are also looking to implement a tracker for all DMC jobs to improve visibility. **Note:** New methodology has been applied as per the requirements of Awaab's Law, to link all required remedial works to one job, rather than measuring them individually. For example, if a case has four jobs linked to it, if any of those jobs are completed outside of the 5/60 day target, it will be considered completed out of target against the case.
AM1k	Percentage of fire safety remedial actions completed to timescale	SCH KPI	74.36%	76.71%	81.18%		77.78%		100.00%	80.00%	N/A	↑	**Status:** 85 actions completed in June, with 16 completed past their action due date. Performance continues to improve month-on-month. Whilst a number of actions were completed after their original due dates, there has been a continued reduction in the overall volume of open and overdue remedial actions on the risk register. This indicates progress in risk reduction. **Mitigating Actions:** All mitigation actions are in place.
AM1ka	Percentage of all follow-on compliance actions completed on time	SCH KPI	94.05%	75.68%	95.58%		92.35%		100.00%	N/A		↑	**Status :** 588 actions completed in June, with 26 completed past their action due date. **Mitigating Actions:** All mitigation actions are in place.

*Benchmark based on median performance from 2024/25 RSH local authority and ALMO and benchmarking
**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

ELT Tracking Indicators

			Apr-26	May-26	Jun-26		YTD		Target	Previous Year	Benchmark*	DoT**	Comment
AM7	Percentage of repairs completed right first visit	SCH KPI	78.80%	78.48%	78.09%		78.43%		91%	80.33%	N/A	↓	Performance stated similar compare to the previous month. The interface has been reviewed by IT with the support of an MRI consultant in relation to issues with OOH emergency jobs. An SCH project team has been assembled to scope out the requirements for MRI to design a new interface.
AM21	Overdue Works in Progress (WIP)	SCH KPI	809	1007	591		591		TBC	Total WIP 6128	N/A	↑	Issue: Overdue WIP has decrease in June . breakdown is as follows: External247 Internal344 A review of Internal resource is underway to ensure DLO has sufficient resource to deliver service. External jobs are being impacted by data transfer issues within the interface. A project is underway with the support of consultants to review the interface with the main aim being the development of a new interface.

*Benchmark based on median performance from 2024/25 RSH local authority and ALMO and benchmarking
**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

Definitions

Recoverable		Front page	Indicators where it is anticipated target can be met by the end of financial year
Non Recoverable		Front page	Indicators where it is not anticipated target can be met by the end of financial year
Downward trend		Front page	Indicators which are within tolerance of target, and performance is worsening
Upward trend		Front page	Indicators which may or may not be meeting target, but are seeing a positive improvement in performance
CH01a	Stage 1 complaints per 1,000 properties	TSM	Number of stage 1 complaints which meet the TSM definition received in month, scaled by stock number
CH01b	Stage 2 complaints per 1,000 properties	TSM	Number of stage 2 complaints which meet the TSM definition received in month, scaled by stock number
CH02a	Complaints resolved in timescale (Stage 1)	TSM	Percentage of stage 1 complaints meeting the TSM definition received in month completed in target timescale
CH02b	Complaints resolved in timescale (Stage 2)	TSM	Percentage of stage 2 complaints meeting the TSM definition received in month completed in target timescale
NM01	ASB cases per 1,000 properties	TSM	Number of Public ASB cases received in month, scaled by stock number
RP01	Homes that do not meet the Decent Homes Standard	TSM	Percentage of stock which fails Decent Homes Standard
RP02a	Repairs completed within target timescale (emergency)	TSM	Percentage of emergency responsive repairs completed in month which have met their target timescale
RP02b	Repairs completed within target timescale (non-emergency)	TSM	Percentage of non-emergency responsive repairs completed in month which have met their target timescale
BS01	Percentage of properties with valid gas certificate (AM1a)	TSM	Percentage of properties on the gas contract which had a valid gas certificate at the end of reporting month
BS02	Percentage non-domestic assets covered by a valid FRA (AM1c)	TSM	Percentage of properties which require an FRA which have a valid assessment at the end of reporting month
BS03	Percentage known asbestos locations re-inspected within benchmarked period (communal areas) (AM1d)	TSM	Percentage of properties which require an asbestos inspection which have a valid inspection at the end of reporting month
BS04	Percentage of relevant water installations covered by a risk assessment (AM1e)	TSM	Percentage of properties which require a legionella check which have a valid assessment at the end of reporting month
BS05	Percentage communal passenger lifts that require a thorough examinations (LOLER) (AM1f)	TSM	Percentage of properties with use of a passenger lift which have a valid examination at the end of reporting month
TP01	Overall satisfaction with services provided by SCH	TSM	Quarterly satisfaction survey completed by Acuity
TP02	Repair in the last 12 months	TSM	Quarterly satisfaction survey completed by Acuity
TP03	Time taken to complete the last repair	TSM	Quarterly satisfaction survey completed by Acuity
TP04	Home is well maintained	TSM	Quarterly satisfaction survey completed by Acuity
TP05	Home is safe	TSM	Quarterly satisfaction survey completed by Acuity

TP06	Landlord listens to and acts upon tenants' views	TSM	Quarterly satisfaction survey completed by Acuity
TP07	Landlord keeps you informed about things that matter to you	TSM	Quarterly satisfaction survey completed by Acuity
TP08	Landlord treats me fairly and with respect	TSM	Quarterly satisfaction survey completed by Acuity
TP09	SCH approach to handling complaints	TSM	Quarterly satisfaction survey completed by Acuity
TP10	Landlord keeps communal areas clean and safe	TSM	Quarterly satisfaction survey completed by Acuity
TP11	SCH makes a positive contribution to neighbourhood	TSM	Quarterly satisfaction survey completed by Acuity
TP12	SCH approach to handling ASB	TSM	Quarterly satisfaction survey completed by Acuity
AM1b	Percentage domestic properties with a satisfactory Electrical Installation Condition Report	SCH KPI	Percentage of properties which have a valid 5 year test certificate at the end of reporting month
AM1k	Percentage of fire safety remedial actions completed to timescale	SCH KPI	Percentage of remedial actions completed in month, within their target timescale
DM1	Percentage Damp and Mould inspections completed within timescale	Awaab's Law	Percentage of damp inspections completed in month which have met their target timescale
DM2	Percentage Damp and Mould remedials completed within timescales	Awaabs Law	Percentage of damp remedial works completed in month which have met their target timescale
VL13	Percentage of rent loss due to voids	SCH KPI	Percentage of rent loss from void properties, excluding non lettable properties
CMR15	Current tenant arrears as % of rent debit	SCH KPI	Snapshot position at the end of the month of current tenant arrears of total rent debit
HO1	Average stay in temporary accommodation (all) - days	SCH KPI	Average stay in TA for households which have left during reporting month
HO1a	Average stay in temporary accommodation (families with children) - days	SCH KPI	Average stay in TA for households with dependents which have left during reporting month
HO5	Percentage of homeless approaches where prevention or relief achieved	SCH KPI	Percentage of relief and prevention cases which have ended in month with a successful outcome
WB13	Customer satisfaction (disabled facilities grants)	SCH KPI	From transactional wellbeing survey
CR2	Overall satisfaction (transactional)	SCH KPI	From all transactional surveys completed in month, overall satisfaction with service provided by SCH
CR36	Contact centre ASA	SCH KPI	Average seconds to answer incoming calls to contact centre

Performance as at: End of June 2026

Description: Building Safety & Compliance Dashboard provides our performance against legislative and best practice cyclical anniversary dates.

Solihull Community Housing
Shaping our neighbourhoods

Building Safety & Compliance Dashboard

Compliance area	Total properties	Properties/assets with compliance requirement	Properties/assets with no compliance requirement	Compliant	%	Not Compliant	%	DoT*	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90 Days	Commentary	Due in next 30 days
Domestic Dwellings												
Gas	9686	7923	1763	7923	100.00%	0	0.00%	↑	**0**	**0**	Meets target.	53
Electric (5-year programme)		9686	0	9573	98.83%	113	1.17%	↓	**40**	**73**	**Status:** There were 113 properties overdue at the time of reporting. Of these 6 were confirmed as completed and awaiting certificates to be issued by the contracor. **Oldest Compliance Due Date :** The oldest overdue EICRs are the 4 properties which do not have record of a previous EICR. The next oldest overdue EICR was due on 08/10/2018 **Mitigating Actions:** All EICRs which are beyond the 5 year re-inspection requirement are part of performance improvement plan overseen by the Building Safety Manager. We have recruited a Legal Enforcement Officer, start date 07/07/2026. Following training, they're priority will be processing outstanding EICRs on a risk based priority. SCH have extended the remit for the Customer Experience team to include access, 2 Customer Liaison Officers have been appointed. They will work along side the Legal Enforcement Officer to gain access.	29
Asbestos surveys (non-statutory)		9698	0	9569	98.67%	129	1.33%	**N/A**			This an internal target to have asbestos management surveys for all property types that are pre 2000 construction. Those with post 2000 construction do not have a compliance requirement.	N/A
Communal blocks/schemes												
Gas	886	6	880	6	100.00%	0	0.00%	↔	**0**	**0**	Meets target.	0
Electric (5-year programme)		657	229	636	96.80%	21	3.20%	↑	**1**	**20**	**Status**: 21 communal EICRs overdue. These communal electrical installations are supplied by adjacent domestic properties, the properties are now privately owned and not the responsibilty of SCH. **Oldest Compliance Due Date :** The oldest overdue communal EICR has a due date of 08/10/2023 **Mitigating Actions:** The Capital Team are reviewing options for installing a communal electrical suppply, which will enable SCH to complete these communal electrical inspections. **Timeframe:** The Programme of work is being planned by the Capital Team	1
Asbestos surveys (re-inspection)		688	198	648	94.19%	40	5.81%	↓	**40**	**0**	**Status**: There were 40 communal Asbestos re-inspections overdue at the end of June. **Mitigating Actions: All overdue re-inspection are now complete**. 33 of the overdue were completed within 3 days of end of month, with the remaining 8 re-inspections completed on 10/07/2026. **Timeframe:** These have all now been completed.	20
Water Risk Assessment (WRA) (2-year programme)		52	834	44	84.62%	8	15.38%	↓	**8**	**0**	Status: 8 WRAs are overdue at end June 2026. 6 were completed before the end of June but awaiting signoff by contractor. Oldest Compliance Due Date : The oldest overdue WRA has a due date of 14/06/2026. Mitigating Actions: No significant changes to the water system since the existing WRA was completed with remedial works continuing. Timeframe: Both overdue WRA are being completed on 18/07/2026.	9

Performance as at: End of June 2026

Description: Building Safety & Compliance Dashboard provides our performance against legislative and best practice cyclical anniversary dates.

Building Safety & Compliance Dashboard

Compliance area	Total properties	Properties/assets with compliance requirement	Properties/assets with no compliance requirement	Compliant	%	Not Compliant	%	DoT*	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90 Days	Commentary	Due in next 30 days
Lifts (passenger and goods)		75	N/A	75	100.00%	0	0.00%	↔	**0**	**0**	Meets target.	26
Fire Risk Assessments (FRA)		680	206	662	97.35%	18	2.72%	↔	**18**	**0**	Status: There were 18 fire risk assessment outstanding at the end of June. . Mitigation: All Fire Risk Assessment were completed by end of June.We continue to experience delays in the receiving of this data. SLA for provision of reports will continue to be monitored and any intervention required will be made. Timeframe: Ongoing	18
Communal Fire Door Inspections		37	849	11	29.73%	27	72.97%	↓	**27**	**0**	Status: There were 27 fire door inspection outstanding at the end of June. Mitigation: All Fire Door inspections were completed by end of June.We continue to experience delays in the receiving of this data. SLA for provision of reports will continue to be monitored and any intervention required will be made. Timeframe: Ongoing	0
Structural Surveys		37	849	37	100.00%	0	0.00%	↔	**0**	**0**	Meets target.	0
							0					

Damp & Mould	Jun-26		YTD		Target	Previous Year	DoT*	Commentary
Percentage Damp and Mould Inspections completed within timescale	89.04%		95.44%		100%		↓	**Status:** Performance for damp and mould inspections was 89.04% at the end of June. In total, 74 inspections were completed and 8 were completed outside of timescale. Property 1 & 2 - Tenant requested to rebook Property 3, 4 & 5 - Not been possible to gain access Property 6 & 7 attended but mins/hours over 24 hour target Property 8 - missed job- has been scheduled **Mitigating Actions:** SCH are conducting deepdive into DMC and exploring developing case management software which will help to prevent any oversight and ensure complaince **Timescales:** phase 1 - Oct 26 phase 2 - Jan 27
Percentage Damp and Mould remedials completed within timescales	89.29%		92.48%		100%		↓	**Status**: Performance for damp and mould remedials was 92.48% at the end of June. There were 84 remedial cases completed in the month of June, 9 remedial cases were completed outside of the target. Property 1 & 9 – delayed due to resources Property 2 & 3 - Dodds electrical Property 4 - Dealyed roof & loft repair Property 5 & 6 –appointments offered within timeframe, rescheduled to suit tenant Property 7 - Dodds loft survey Property 8 - attended but 50 mins over target cut off **Mitigating Actions:** We are currently undertaking a detailed review of the process for damp and mould cases (DMC) and no access. A Healthy Homes Manager is expected to be in post by the end of July. We are also looking to implement a tracker for all DMC jobs to improve visibility. **Note:** New methodology has been applied as per the requirements of Awaab's Law, to link all required remedial works to one job, rather than measuring them individually. For example, if a case has four jobs linked to it, if any of those jobs are completed outside of the 5/60 day target, it will be considered completed out of target against the case.

*Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

**Throughout this report, there has been a change in calculation between November/December to only include socially rented stock

Description: Risk Register Performance Report provides performance on completion of follow-on action identified following compliance service visits. This measured against the recommended time period to complete the actions. High Risk Actions were erronuosly identified using the complete by date given by the contractor - of these none are actually high risk going forward SEVERITY will identify high risk actions.

Risk Register Performance

Compliance Area	Property Type		Total active actions	Total overdue	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90	Total No. of Completed YTD	High Risk		Medium Risk		Low Risk		%	Commentary	DoT	Due in next 30 days
								Overdue	Not Overdue	Overdue	Not Overdue	Overdue	Not Overdue				
Fire Risk Assessments	High-Rise	FRA Action	54	27	23	4	45	1	2	4	0	22	25	50.00%	**Status:** There were **27** overdue FRA actions at the end of the month. This an improved position compared to the last report. **Oldest Action(s) : High-Rise** 25/10/2025 **Low-Rise** 27/11/2025 **Mitigating action:** Most of the actions are historic actions where there has been problems gaining the evidence or in the case of the High Rise action that require access to the customer property, this. Actions relating to housekeeping a process has been developed with Estates to ensure these will be closed in a timely manner. We continue to work with the contractor to ensure actions have evidence directly uploaded to C365 by them directly . Actions were erronously identified as high risk as the incorrect category was used. None of the actions identified as high risk are, they are Trivial and Best Practice. We have reinstated the regular meetings with our estates team and a meeting is being scheduled for the Estates Team, BST, and Customer Engagement to work on the continuing issue of items being stored in communal areas. **Timeframe: N/A** **Forecast:** The number of overdue actions continues to reduce month on month. Our target of having zero overdue action on our risk register will remain unchanged and will be monitored on a monthly basis.	↓	3
	Low-Rise	FRA Action	163	39	36	3	225	1	6	0	1	38	117	76.07%			14
Fire Door Inspections	High-Rise	Fire Door Inspection Action(Communal)	170	1	1	0	544	0	2	0	42	1	125	99.41%	**Status :** There was 1 Overdue actions at the end of June **Mitigation:** There were delays in gaining the data to ensure the completed doors could be closed in C365 and some admin error, which has now been rectified and we continue to close these actions down, a number of duplicate actions have also been identified these are also being managed within C365. **Timeframe :** Ongoing	↑	1
		Fire Door Inspection Action(Domestic)	346	303	303	0	103	5	0	295	43	3	0	12.43%	**Status :** There were 303 Overdue actions at the end of June **Mitigation:** Because of the volume of work required, all actions will be raised as a programme of work with DODDs. **Timeframe:** Ongoing	↓	0
	Low-Rise	Fire Door Inspection Action(Communal)	174	174	174	0	8	0	0	173	0	1	0	0.00%	**Status :** There were 174 Overdue actions at the end of June **Mitigation:**The low rise communal doors form part of a betterment programme - doors that require immediate repair will still be completed under the normal remedial process all other doors will form part of the betterment programme and dates will be amended to reflect the programme dates. The work to update C365 with dates that accurately reflect the programme continues **Timeframe:** N/A	↔	0
		Fire Door Inspection Action(Domestic)	241	225	225	0	56	0	0	225	16	0	0	6.64%	**Status :** There were 225 Overdue actions at the end of June **Mitigation:** Because of the volume of work required, all actions will be raised as a programme of work with DODDs. **Timeframe:** Ongoing	↓	0
Water Risk Assessments	High-Rise		278	194	18	176	3	97	0	88	55	9	29	30.22%	**Status:** There are currently 252 outstanding WRA actions. An increase from 227 since the last report was issued. The oldest action due date is October 2024. Of the overdue actions 186 are in domestic dwellings. The existing project plan is being reviewed to prioritise domestic remedials based on learnig from Redwood House. **Oldest Actions :** 25/10/2024 **Mitigating Actions:** The Project Plan is in place to enable comprehensive oversight of the delivery of works. This is supported by weekly reports submitted to SCH by contractor and regular contract delivery meetings. A programme of water control regime is in place. This includes regular monitoring of temperatures, flushing outlets and cleaning tanks. We have queried if there is a need for further interim measures via a specialist consultant whilst we continue to progress the actions. **Timeframe**: All mitigating measures in place. **Forecast:** Phase 3 works currently underway relates in the main to actions in domestic dwellings. Phase 3 works will now expand from the 10% of properties captured with the WRA, and individual resident profiles, along with knowlegde of the existing water system, now will influence the delivery priorities.	↓	45
	Low-Rise		90	58	8	50	0	26	0	28	29	4	3	35.56%			29
Passenger Lifts (LOLER)	High-Rise		3	0	0	0	7	0	1	0	2	0	0	100.00%	Meets target	↔	0
	Low-Rise		2	0	0	0	4	0	0	0	2	0	0	100.00%	Meets target	↔	0

Risk Register Performance

Compliance Area	Property Type	Total active actions	Total overdue	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90	Total No. of Completed YTD	High Risk		Medium Risk		Low Risk		%	Commentary	DoT	Due in next 30 days
							Overdue	Not Overdue	Overdue	Not Overdue	Overdue	Not Overdue				
Asbestos	**High-Rise**	**0**	**0**	**0**	**0**	**0**	0	0	0	0	0	0	100.00%	Meets target	⇔	**0**
	Low-Rise	**0**	**0**	**0**	**0**	**0**	0	0	0	0	0	0	100.00%	Meets target	⇔	**0**
Structural Surveys	**High rise**	**167**	**37**	**37**	**0**	**37**	0	0	0	0	37	130	77.84%	**Status :** There were 37 Overdue actions at the end of June **Mitigation:** **Timeframe:**	↓	**0**

Compliance Area	Property Type	Total active actions	Total overdue	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90 Days	Total No. of Completed YTD	Code 1 (Danger Present)		Code 2 (Potentially Dangerous)		Further Investigation Required		%	Commentary
							Overdue	Not Overdue	Overdue	Not Overdue	Overdue	Not Overdue		
Electrical	**High-Rise**	**4**	**2**	**2**	**0**	**2**	0	0	2	2	0	0	50.00%	**Status:** There are 17 overdue actions. All actions have been instructed. Completion of the required work has been inhibited by access. **Mitigating actions:** Access issues are being monitored and managed by the Compliance Team and The Customer Experience Access Team. **Timeframe**: N/A **Forecast**: October 2026
	Low-Rise	**30**	**15**	**13**	**2**	**0**	0	0	15	15	0	0	50.00%	

Description: Gas Audit performance provides outcomes from 3rd party audits undertaken on works gas safety checks conducted by SCH's Gas contractor. The purpose of the audits is to give stakeholders assurance that the work undertaken is compliant with relevant regs and manufacturer's recommendations.

Compliance	Property Type	Total Audits Completed	Total Failed	Outcomes	Count	Commentary	DoT*
Gas	Domestic	25	3	Category 1 (At Risk or Immediately Dangerous)	1	**Status**: There was 1 At Risk situations identified in the month of May. This was due to "Flue System" - Air integrity sample point missing where combustion does not enter room. There were 0 Immediately dangerous faults identified. **Mitigating actions**: Engineer Replaced during audit, Test cap could have been removed at any stage since service date. Test caps ordered and issued to all engineers. **Timeframe**: N/A **Forecast**: N/A	
				Category 4 (Certificate Errors or Omissions)	2	**Status**: There were 2 audit findings. **Mitigating actions**: Cert rewrote, Request to remove from audit as service completion date was April. **Timeframe**: N/A **Forecast**: N/A	

Description: Building Safety Concerns dashboard provides performance on addressing fire and building safety related concerns reported by residents. Performance is measured against period allowed to address concerns raised. It also contains performance against Stage 1 complaints regarding compliance.

Building Safety Concerns																					
Detailed Performance	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26		YTD	RAG	Target	Commentary
Total number of building safety concerns reported	23	35	41	44	104	55	48	60	36	28	19	43	46	60	65	91				N/A	
Completed	12	26	28	32	64	30	23	28	10	4	0	12	0	26	24	32					
% Completed in timescale	100.00%	42.86%	68.75%	46.15%	59.00%	55.22%	100%	100%	100%	100%	0%	100%	100%	100%	100%	100%				85.00%	
Open High Priority Concern (Cumulative)	10	3	5	8	15	17	2	0	1	12	7	24	4	5	7	0					
Of which are overdue	9	3	1	6	14	16	0	0	1	12	0	0	0	0	3	0				0	
Open Medium Priority Concern	24	38	44	43	23	51	37	20	16	11	11	5	24	22	40	88					
Of which are overdue	5	7	7	23	12	22	0	0	0	0	0	0	0	0	0	0				0	**Status:** There were no overdue building safety concerns at the time of reporting. Job orders have been issued to complete the required works
Open Low Priority Concern	17	28	37	39	24	41	9	19	19	6	1	6	19	33	16	3					
Of which are overdue	0	10	9	11	10	16	0	0	0	0	0	0	0	0	0	0				0	**Mitigating Actions:** A work in progress report has been in put in place which has resulted in improved performance.
Total open building safety concerns	51	69	85	90	65	107	108	33	26	25	19	43	46	28	42	58					
Of which are overdue	14	20	17	40	36	54	62	0	1	8	0	0	1	0	3	0				0	**Timeframe:** N/A **Forecast:** N/A

Solihull Community Housing **Description:** Damp and Mould dashboard provides performance against timescales in terms of inspections and remedial works relating to damp and mould.

Damp & Mould

	Detailed Performance	Dec-24*	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25 Pre Awaabs law	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26		YTD		Target	Commentary
Damp & Mould Remedial Works	**Number of open remedial works out of target**	**380**	**430**	**411**	**361**	**351**	**366**	**322**	**130**	**115**	**79**	**76**	**68**	**56**	**52**	**66**	**67**	**49**	**76**	**74**		74		0	**Status:** There were 74 remedial works out of target at the end of June. **Oldest overdue remedial works:** There are 5 remedial cases where the works exceed over 6 months- these all relate to access issue, and 1 external contractor case waiting for materials. On investigation there appears to be a mix of access issues and delays with external contractors. **Mitigating Actions:** We have referred the oldest cases and are working with tenancy to try to gain access. We are currently actuoning adeep dive into Damp and Mould, and have appointed a new Healthy Homes Manager to support process and monitoring of cases. Further work is being done to resolve the outstanding external overdue works. **Timeframe:** Healthy Homes manager is due to
	Number of open remedial works in target	98	120	148	136	121	92	84	98	68	70	68	113	217	178	283	341	303	243	211		211		N/A	
	Total of open remedial works	478	550	559	497	472	458	406	228	183	149	144	181	273	230	349	408	352	319	285		285		N/A	
	Remedials raised	114	174	176	174	152	115	101	148	54	135	165	175	201	223	290	256	210	157	175		542		N/A	
Damp & Mould Inspection	**Number of open inspections out of target**	**40**	**54**	**58**	**46**	**33**	**34**	**23**	**15**	**4**	**1**	**1**	**6**	**9**	**3**	**3**	**1**	**1**	**2**	**1**		1		0	**Status:** There was 1 inspection out of target for June. This has been scheduled OOT due to customer availability. Mitigating Actions: N/A Timeframe: N/A
	Number of open inspections in target	59	79	58	60	48	27	31	0	12	34	6	0	32	0	11	50	14	20	42		42		N/A	
	Total Number of open inspections	99	133	116	106	81	61	54	15	16	35	7	6	41	3	14	51	15	22	43		43		N/A	
	Inspections raised	86	155	93	93	74	55	55	52	14	75	63	123	122	156	151	131	74	73	93		240		N/A	
HHSRS/Disrepair	Open HHSRS issues involving damp & mould (cat 1)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0									
	Open HHSRS issues involving damp & mould (cat 2)	290	310	376	451	483	483	498	504	506	508	3	2	2	1	44									
	Open disrepair cases involving damp & mould	72	77	72	71	63	67	69	72	74	73	81	81	90	99	104	130								

Solihull Community Housing

Description: Smoke and CO Alarms dashboard provides performance on installation of smoke alarms in all properties, and CO alarms in properties with gas boilers.

Smoke, CO Alarms and Sprinklers Systems

Detailed Performance	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Nov-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26		YTD		Target	Commentary
Progress on fitting of smoke alarms	99.94%	99.94%	99.96%	99.97%	99.97%	99.99%	99.99%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	97.80%	98.17%	97.28%	96.29%	95.63%		95.63%		100.00%	**Status:** There are 423 properties reported as having failed or missing smoke alarms at the end of the month. **Oldest Actions:** The oldest smoke detector issue was identified on gas record completed on 08/05/2025. **Mitigating Actions:** A programme of works has been developed and jobs have been issued to Dodds on risk based approach. Actions will be closed down when evidence is provided. **Timeframe**: All mitigating measures in place. **Forecast:** All jobs are raised on a 28 day timescales.
Progress on fitting of CO alarms	99.97%	99.97%	99.95%	99.96%	99.96%	99.99%	99.99%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	97.14%	97.42%	96.45%	94.79%	94.26%		94.26%		100.00%	**Status:** There are 455 properties reported as having failed or missing smoke alarms at the end of the month. **Oldest Actions:** The oldest CO detector issue was identified on gas record completed on 08/05/2025. **Mitigating Actions:** A programme of works has been developed and jobs have been issued to Dodds on risk based approach. Actions will be closed down when evidence is provided. **Timeframe:** All mitigating measures in place. **Forecast:** All jobs are raised on a 28 day timescales.
Progress on fitting of Sprinklers	-	-	-	-	-	-	-	-	97.03%	97.19%	97.19%	97.19%	97.24%	97.24%	97.24%	97.24%	97.34%	97.34%		97.34%		100.00%	Out of the 1,919 high-rise flats, 51 dwellings were outstanding from the sprinkler fitting program due to access issues.
Number of Properties without Sprinklers	-	-	-	-	-	-	-	-	57	54	54	54	53	53	53	53	51	51		51		0	

Fire Incidents					
Detailed Performance	Apr-26	May-26	Jun-26	YTD	Commentary
Fire incidents in high rise properties	0	0	0	0	No incidents in June
Fire incidents in low rise properties	0	0	0	0	
Fire incidents in other residential properties	0	0	0	0	
Total fire incidents	0	0	0	0	

Description: Building Safety & Compliance Dashboard (High-Rise) provides our performance against legislative and best practice cyclical anniversary dates associated with high-rise buildings only.

Building Safety & Compliance Dashboard (High Rise)

Compliance area	Total properties	On programme	Off programme	Compliant	%	Not Compliant	%	DoT*
Domestic								
Gas	1894	431	1463	431	100.00%	0	0.00%	↔
Electric (5-year programme)		1894	0	1866	98.52%	28	1.48%	↓
Asbestos surveys (non-statutory)		1895	2	1849	97.57%	46	2.43%	**N/A**
Communal blocks/schemes								
Gas	37	0	37	NA	NA	0	0.00%	↔
Electric (5-year programme)		37	0	37	100.00%	0	0.00%	↔
Asbestos surveys (re-inspection)		37	0	36	97.30%	1	2.70%	↑
Water (2-year programme)		37	0	33	89.19%	4	10.81%	↓
Lifts (passenger and goods)		37	0	37	100.00%	0	0.00%	↔
Fire risk assessments		37	0	37	100.00%	0	0.00%	↔
Communal Fire Door Inspections		37	0	11	29.73%	26	70.27%	↓
Structural Surveys		37	0	37	100.00%	0	0.00%	↔

*Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

Description: Building Safety & Compliance Dashboard (Low-Rise) provides our performance against legislative and best practice cyclical anniversary dates associated with low-rise buildings only.

Building Safety & Compliance Dashboard (Low Rise)

Compliance area	Total properties	On programme	Off programme	Compliant	%	Not Compliant	%	DoT*
Domestic								
Gas	2984	2760	224	2760	100.00%	0	0.00%	↑
Electric (5-year programme)		2984	0	2906	97.39%	78	2.61%	↓
Asbestos surveys (non-statutory)		2851	153	2814	98.70%	37	1.30%	**N/A**
Communal blocks/schemes								
Gas	849	6	843	6	100.00%	0	0.00%	↔
Electric (5-year programme)		620	229	598	96.45%	22	3.55%	↓
Asbestos surveys (re-inspection)		651	198	612	94.01%	39	5.99%	↓
Water (2-year programme)		15	834	15	100.00%	4	26.67%	↓
Lifts (passenger and goods)		5	844	5	100.00%	0	0.00%	↔
Fire risk assessments		643	206	625	97.20%	18	2.80%	↓

*Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

Description: Building Safety & Compliance Dashboard (TSMs) provides our performance against legislative and best practice cyclical anniversary dates reported by the TSM definition outlined by the Regulator of Social Housing. Here when calculating compliance for communal blocks, the number of in scope dwellings are used as opposed to the block as one unit. E.g. for gas the number of properties varies here, as any flats in a communal block served by a communal gas boiler are included.

Technical Requirements

Building Safety & Compliance Dashboard (TSMs)

Compliance area	Total properties	On programme	Off programme	Compliant	%	Not Compliant	%	DoT*
Gas	9686	7923	1763	7923	100.00%	0	0.00%	↑
Electric		9686	0	9548	98.58%	138	1.42%	↓
Asbestos surveys (re-inspection)		4220	5466	4064	96.30%	156	3.70%	↑
Water (2-year programme)		2110	7576	1809	85.73%	301	14.27%	↓
Lifts (All lifting equipment)		1997	7689	2022	100.00%	0	0.00%	↔
Fire risk assessments		4309	5377	4239	98.38%	70	1.62%	↓

*Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units owned for which gas safety checks are required	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
GAS SAFETY	Domestic gas (LGSR)	7923	7923	0	100.00%
	Communal gas (LGSR)	6	6	0	100.00%
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			N/A	
	Dwelling unit has been non-compliant for 3-6 months			N/A	
	Dwelling unit has been non-compliant for 6-12 months			N/A	
	Dwelling unit has been non-compliant for >12 months			N/A	
		No. of capped properties	**No. of capped properties over 3 months**		
	Properties with a capped gas supply	**408**	**195**		
		No of overdue checks			
	Overdue gas safety checks (<1 month)	**0**			
	Overdue gas safety checks (1-3 months)	**0**			
	Overdue gas safety checks (> 3 months)	0			
	Comments:				

Plans to return to compliance:
All properties are in compliance

Current Mitigations:
Robust policy and procedure in place which is followed

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units that require an electrical installation condition report	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
ELECTRICAL SAFETY	Domestic properties on a 5 Year EICR domestic testing cycle	9686	9573	113	98.83%
	Domestic properties on a 10 Year EICR domestic testing cycle	0	0	0	N/A
	Domestic properties that require an EICR but do not have one (Excluded from totall)	0	n/a		n/a
	Total Domestic properties	**9686**	**9573**	**113**	**98.83%**
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			40	
	Dwelling unit has been non-compliant for 3-6 months			25	
	Dwelling unit has been non-compliant for 6-12 months			14	
	Dwelling unit has been non-compliant for >12 months			34	
		Total Number of assets that require an electrical installation condition report	**Number Of Compliant Assets**	**Number of Non-Compliant Assets**	**COMPLIANCE (%)**
	Communal EICRs	657	636	21	96.80%
	For Non-compliant assets:			**Number of Non-Compliant Assets**	
	Asset has been non-compliant for <3 months			1	
	Asset has been non-compliant for 3-6 months			0	
	Asset has been non-compliant for 6-12 months			3	
	Asset has been non-compliant for >12 months			17	
	For both communal and domestic				
	For both communal and domestic	**Overdue high risk - No. of C1 (danger to life)**	**Overdue medium risk - No. of actions C2 (potentially dangerous)**	**Overdue low risk - No. of actions C3 (improvement recommended)**	
	Overdue electrical remedials (< 3 month)	0	21	28	
	Overdue electrical remedials (3-6 months)	0	3	9	
	Overdue electrical remedials (6-12 months)	0	2	14	
	Overdue electrical remedials (12+ months)	0	0	0	
	Comments:				

Plans to return to compliance:
Oldest Compliance Due Date : The oldest overdue EICRs are 4 properties which we do not have record of a previous EICR. The next oldest overdue EICR was due on 19/11/2020.
All EICRs which are beyond the 5 year re-inspection requirement are part of performance improvement plan overseen by the Building Safety Manager. We have recruited a Legal Enforcement Officer, start date 07/07/2026. Following training, they're priority will be processing outstanding EICRs on a risk based priority.
SCH have extended the remit for the Customer Experience team to include access, 2 Customer Liaison Officers have been appointed. They will work along side the Legal Enforcement Officer to gain access.

Communal area non-compliance relates to situations where there is no landlord supply and where power is drawn from adjacent privatley owned homes. A programe of works is being planned by the Capital Team to address and resolved this situaton.

Current Mitigations:
A new access procedure which mirrors the gas compliance procedure is now in place, together with a review of steps (NoSP/NTQ) ahead of seeking injunctions via legal proceses We have seen an increase in performance and access following the implementation of the new process. The team has successfully completed recruitment of two additional positions (Compliance Contract Officer & Legal Enforcement Officers).

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units owned within properties that require a Fire Risk Assessment	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
FIRE SAFETY	Fire Risk Assessments in high risk buildings	37	37	0	100.00%
	Fire Risk Assessments in non-high risk buildings	647	647	0	100.00%
	Overall Fire Risk Assessments	**684**	**684**	**0**	**100.00%**
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			0	
	Dwelling unit has been non-compliant for 3-6 months			0	
	Dwelling unit has been non-compliant for 6-12 months			0	
	Dwelling unit has been non-compliant for >12 months			0	
	Comments: All FRAs completed in the period are Type 1 FRAs. A programme of Type 3 FRAs will be completed across all HRBs before the next tranch of Type 1 FRAs are due in October. The PCFRA project has evolved following customer feedback. Process are in place to ensure that residents are regularly engaged with in line with the new regulations. All PCFRAs for residents who responded have been completed. We have agreed the the Fire Service that all information will be coloir coded and customers who have self identified and not completed an FRA will be placed within the amber category meaning that help MAY be required.				
		No. of high risk actions	**No. of medium risk actions**	**No. of low risk actions**	
	Overdue FRA remedial actions (<3 months)	**2**	**4**	**57**	
	Overdue FRA remedial actions (3-6 months)	**0**	**0**	**1**	
	Overdue FRA remedial actions (6-12 months)	**0**	**0**	**2**	
	Overdue FRA remedial actions (12+ months)	0	0	0	
	Comments: Risk rating are assigned based on a risk matrix with the following options, Trivial and Tolerable Rating = Low Risk, Moderate Rating = Medium Risk and Substantial or Intolerable Rating = High Risk. Previous ratings had been incorrectly categorised, there are no hihg risk actions there are six medium rsk actions. The associated timescales are provided by the risk assessor. Actions relating to fire doors are part of the on-going betterment programme. Delivery of the works has been impacted by access. The remaining action are being progressed through a programme works. The position continues to improve month on month with the exception of those were access has not been provided. Risk Ratings have been identified as wrong as it was based on timescales rather than severity, and is being actioned with C365 to make necessary corrections. Of the 63 total actions, there is no high risk action, the actions that are being identified as high risks are "best practices". There are 6 medium risks, 51 low risks/passive actions, and 9 best practices.				

Plans to return to compliance: A new team has been established to deal with access issues. This will help progress actions which are outstanding due to access issues. An SLA and follow up process is in place to ensure timely receipt of evidence. The issue has been highlighted to the contractor and will be discussed at the next contract meeting.

Current Mitigations:
All locations are subject to regulary fire safety checks. High rise building are also fitted with sprinkler systems. Residents are also provided with information relating to fire safety, through signage, news letters and fire safety leaflets.

Workstream		Total Number of dwelling units in programme	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
SMOKE AND CO ALARMS	Smoke alarms / detectors	9686	9263	423	95.63%
	Carbon monoxide alarms / detectors	7923	7468	455	94.26%
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			368	
	Dwelling unit has been non-compliant for 3-6 months			220	
	Dwelling unit has been non-compliant for 6-12 months			86	
	Dwelling unit has been non-compliant for >12 months			30	
	Comments: Smoke and CO alarms are monitored and tested during the gas safety checks and electrical inspections. Where faults or non-compliance is identified, the findings are logged and monitored in Compliance 365. A programme of remedial works is underway with priority being given to properties based on known vulnerabilities. Work orders have been raised and actions will be completed on receipt of evidence *Note: The tally provided for non-compliant dwelings (423 and 455) is reported at asset level and therefore differs from the tally provided for the breakdown for the period each dwelling has been non-compliant which is reported at property level.*				

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units owned for which a legionella risk assessments is required	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
WATER SAFETY	Legionella risk assessments	52	44	8	85%
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			8	
	Dwelling unit has been non-compliant for 3-6 months			0	
	Dwelling unit has been non-compliant for 6-12 months			0	
	Dwelling unit has been non-compliant for >12 months			0	
		Number of high risk overdue remedial actions	**Number of medium risk overdue remedial actions**	**Number of low risk overdue remedial actions**	
	Overdue water safety remedial actions (< 3 months)	17	0	9	
	Overdue water safety remedial actions (3-6 months)	0	0	0	
	Overdue water safety remedial actions (6-12 months)	0	49	4	
	Overdue water safety remedial actions (12 months+)	106	67	0	
	Comments: *Please include a definition of high, medium and low risks and associated target times for completion*				

Plans to return to compliance: 6 have been completed and awaiting QC while repeat visit following No Access has been arranged for 18/07/2026 to complete the remaining 2 overdue WRA. Project Plan in place to enable comprehensive oversight of the delivery of works. This is supported by weekly reports submitted to SCH by contractor and regular contract delivery meetings. Note: The domestic actions relate to a 10% sample of properties which were assessed during the water risk assessment. We are working on the assumption that the some of the issues exist in all other properties within the same block and a remediation project plan is being produced. Analysing the action data there are 3 repeating action types generated from the sampled properties that we need to extrapolate across the remaining properties in the same blocks. The remedial works project is being planned on the premise that there will be 2,024 additional remedial actions to be completed across a further 1,698 properties. Programme of works and costing from the contractor and we are now reviewing priority order based on resident profile and water systems installed.

Current Mitigations:

A programme of water control regime is in place. This includes regular monitoring of temperatures, flushing outlets and cleaning tanks. The water control specification includes water sampling where our specialist contractor believes the control measures in place are not effective. . We have requested if there is a need for further interim measures via a specialist consultant whilst we continue to progress the actions.

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units owned within properties for which an asbestos management survey or re-inspection is required	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)	Number of properties for which an asbestos management survey or re-inspection is required
ASBESTOS SAFETY	Asbestos re-inspections	688	648	40	94.19%	
	Overdue asbestos re-inspections (< 3 months)	40				
	Overdue asbestos re-inspections (3-6 months)	0				
	Overdue asbestos re-inspections (6-12 months)	0				
	Overdue asbestos re-inspections (12+ months)	0				
	Comments:					

Plans to return to compliance:
All overdue re-inspection are now complete. 33 of the overdue were completed within 3 days of end of month, with the remaining 8 re-inspections completed on 10/07/2026.

Current Mitigations:
N/A

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total number of dwelling units owned within properties with communal passenger lifts	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)	Number of properties with communal passenger lifts
LIFT SAFETY	Passenger lifts (LOLER) servicing	1999	1999	0	100.00%	42
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**		
	Dwelling unit has been non-compliant for <3 months			0		
	Dwelling unit has been non-compliant for 3-6 months			0		
	Dwelling unit has been non-compliant for 6-12 months			0		
	Dwelling unit has been non-compliant for >12 months			0		
		Number of overdue remedial actions				
	Overdue remedial actions (<3 months)	0				
	Overdue remedial actions (3-6 months)	0				
	Overdue remedial actions (6-12 months)	0				
	Overdue remedial actions (12+ months)	0				
	Comments:					

Plans to return to compliance:
Meets target

Current Mitigations:
Meets target

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Number of open D&M cases	Open cases assessed as Category 1 HHSRS	
DAMP AND MOULD	Damp and mould cases	284		55 remedials jobs were raised with no Inspection. Further analysis of these jobs has evidenced that on arrival- there was no Damp or Mould present, so the inspection report is not produced. Works raised off the back of this are not damp and mould related. we are currently reviewing this process and reporting methodology.
		Number of overdue cases	**Number of overdue cases assessed as Category 1 HHSRS**	
	Cases overdue by <1 month	26		
	Cases overdue 1-3 months	12		
	Cases overdue by 3-6 months	5		
	Cases overdue by 6+ months	3		
	Comments:			

Plans to return to compliance:

New methodology has been applied as per the requirements of Awaab's Law, to link all required remedial works to one job, rather than measuring them individually. Target dates for Damp and Mould are Inspection within 24 hours or 10 days depending on level of risk (triaged by contact centre) and full remedial works completed within 60 days.

Current Mitigations:

SCH Board have signed off the extension of the no access pilot scheme which proved successful when trialled to address electrical access. The new team will now be in place by end of August 2026 and will focus on supporting access to ensure timely completion of damp and mould cases. A deep dive into Damp and Mould and the current processes and reporting are currently being produced. We are working with tenancy to try and gain access to the oldest overdue cases- as these all relate to access issues.

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: May 2026

Workstream		Total Number of Assets	Number Of Compliant Assets	Number of Non-Compliant Assets	COMPLIANCE (%)
STOCK CONDITION	Meet the Decent Homes Standard	9690	9562	128	98.68%
		Number of Assets			% of Total Number of Assets
	Assets that have had a stock condition survey within the last 2 years	5051			52.13%
	Assets that have had a stock condition survey within the last 5 years	7486			77.25%
	Assets that have had a stock condition survey within the last 10 years	8729			90.08%
	Assets that have had a stock condition survey over 10 years ago	0			0.00%
	Assets that have no stock condition survey on record	961			9.92%
	Total Number of Assets	**9690**			

Comments:

Alongside the current programme of stock condition surveys we are also prioritising properties that have not yet had a stock condition survey currently at 961, a reduction from 1079 last month.

We have a rolling programme of circa 2000 SCS per year. Through 2026/27 additonal survey will be undertaken in response to bulk SCS undertaken in 2021/22. To address this situation, SCH have commissioned Pennington Choices to undertake an additional 2000 SCS to those that are planned in house, this financial year taking the total number of SCS targeted 2026/27 to circa 4000+ and the target of 85% of SCH managed properties with a SCS within the past 5 years.

Plans to return to compliance:

Capital programmes works during 2026/2027 are prioritising non decent stock and properties with the potential to become non decent.

No access or hard to access homes where SCS are needed will be included in the scope of works via the new No Access team/process.

Current Mitigations:

Additional resources will support the new increased capacity within the inhouse team.

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Overdue WIP : 591			
		Emergency	Urgent	Routine	Standard
REPAIRS	Overdue (< 3 months)	106	17	294	64
	Overdue (3-6 months)	13	0	59	7
	Overdue (6-12 months)	0	0	25	0
	Overdue (12 + months)	0	0	6	0
	Total number of overdue repairs by classification	**119**	**17**	**384**	**71**
	Total number of overdue repairs - DLO	**0**	**1**	**283**	**60**
	Total number of overdue repairs - Contractors	**119**	**16**	**101**	**11**
	Comments: *Please include a definition of Emergency, urgent, routine, standard (and amend classifications where required).*				

Plans to clear backlog: A review of Internal resource is underway to ensure DLO has sufficient resource to deliver service. External jobs are being impacted by data transfer issues within the interface. On investigation, of the 119 overdue emergency jobs, 103 jobs were assigned to Dodd Groups, the majority of these are out of hours jobs. The 17 overdue urgent jobs are again mostly sitting with Dodds Group. This has been raised to them to investigate, and may be a procedural issue for closing down following OOH call outs. Looking at the overdue routine cases, 70 are internal jobs, 18 have abondoned/cancelled since reporting, leaving 52. The breakdown of these isinclude- 25 follow on jobs required. and16 access issues. Factors also affecting WIP are that the additonal backlog funding has been exhausted and we currently have 5 long term sick operatives.

Current Mitigations: A review of process relating to closing OOH call outs which may be impacting the performance indicatiors for external emergency repairs. 3 agency staff have been recruited to back fill sickness within existing budgets.

Regular validation of openhousing and vixen (DODD's system) is undertaken. Early indications link to system and/or administration issues as opposed to service delivery to customers. A project is underway with the support of consultants to review the interface with the main aim being the development of a new interface between SCH and Dodd Group.

Workstream	
INVESTIGATIONS AND ENFORCEMENT ACTION	*N/A*

Solihull Community Housing
Shaping our neighbourhoods

Voice of the Customer

Quarter 1 2026/27

Introduction

Welcome to our latest Voice of the Customer report.



This report is all about listening to what you have to tell us - the good and the bad.

As the person on the SCH Board who looks after complaints, my job is to make sure your voice is heard at the very top of our organisation. When things go wrong, it isn't enough for us to just ‘fix the problem’ and move on. We need to understand why it happened so we can stop it from happening again.

In this Voice of the Customer report, we look at:

- **What you are telling us:** what do you tell us in surveys, engagement activities and through complaints and compliments
- **What we’ve learned:** What has your feedback taught us about how we need to change?
- **Our promise:** To treat every resident with respect and to be honest when we get things wrong.

To make sure we continue to do this as effectively as possible, we have recently set up our new Customer Experience Committee (CX) and I am delighted to share that our very first meeting is scheduled for September. This resident led committee will give us a dedicated space to scrutinise feedback, challenge where we fall short, and keep your experiences at the heart of our decision-making.

In addition, I am incredibly proud that we have once again, officially achieved TPAS accreditation. This is a major milestone for SCH, demonstrating our commitment to meeting the absolute best standards in tenant engagement and ensuring your voice genuinely drives everything we do.

I hope you enjoy this edition of the Voice of the Customer.

Susan Buckley
Tenant Board Member

Quick Overview

Key themes identified this quarter	Communication and coordination when carrying out your repairs. We are carrying out a full review of repairs communication to look at how we can make improvements
Customer Satisfaction	Tenant Satisfaction Measures (TSM) have increased this quarter. We have seen a decrease in satisfaction when you have a repair or call the contact centre. We are reviewing repair communication which is the main driver for your dissatisfaction
Engagement Activity	Lots of work has gone into providing more opportunities to tell us what is working and what isn't, help set priorities and design services. This has been reflected in an increase in satisfaction in this area. Thank you for such positive feedback!
Complaints	We received more complaints this quarter, compared to the same time last year. Stage 1 complaints have improved timeliness. Stage 2 complaints have had more late complaints due to the acknowledgement letter being late, steps are being taken to rectify this in the future.
Other customer contact	We receive lots of compliments as well as complaints. They are really helpful as they tell us where we are doing a good job.
What did we learn and what did we do?	You told us that sometimes we don't do as well as we should when repairs are complicated. As a result, we have produced a toolkit for staff and allocated a single point of contact for complex cases.

Customer Satisfaction

The Regulator of Social Housing (RSH) assesses how well social housing landlords in England are performing in providing quality homes and services. This includes the Tenant Satisfaction Measures (TSMs). We regularly ask a sample of residents what they think of the services. This is what you told us this quarter:

TSM Question	Q1 2025/2	Q2 2025/2	Q3 2025/2	Q4 2025/26	Q1 2026/27
Overall service provided by Solihull Community Housing (SCH)	73.79%	80.00%	79.73%	78.62%	**81.08%**
SCH provides a home that is well maintained	69.93%	76.06%	75.17%	72.03%	**70.59%**
SCH provides a home that is safe	75.18%	80.00%	82.27%	79.56%	**81.82%**
SCH keeps these communal areas clean and well-maintained	65.22%	77.78%	73.85%	67.95%	**70.58%**
Overall repairs service from SCH over the last 12 months	78.26%	83.52%	75.53%	76.74%	**80.21%**
Time taken to complete your most recent repair after you reported it	80.00%	84.44%	76.34%	80.00%	**80.85%**
SCH listens to your views and acts upon them	66.37%	64.04%	69.44%	71.43%	**75.89%**
SCH keeps you informed about things that matter to you	72.65%	72.44%	76.72%	79.51%	**79.49%**
SCH treats me fairly and with respect	79.69%	85.93%	82.71%	84.56%	**85.19%**
SCH's approach to complaints handling	23.53%	45.83%	37.04%	36.67%	**47.37%**
SCH makes a positive contribution to your neighbourhood	65.26%	69.47%	74.71%	71.08%	**72.63%**
SCH's approach to handling anti-social behaviour	57.35%	49.28%	60.38%	52.00%	**58.33%**

We also ask you about your particular experience when we deliver services, such as repairs, when you speak to our customer contact advisors, or if you are a new tenant. These are called transactional surveys. This is what you told us about your overall satisfaction with specific services, this quarter:

Area of Service	Q1 2025/26	Q2 2025/26	Q3 2025/26	Q4 2025/26	Q1 2026/27
Repairs	95.72%	92.92%	87.16%	89.29%	88.98%
New tenants	81.25%	94.29%	85.71%	82.22%	78.57%
Contact centre	81.14%	85.23%	84.17%	80.46%	78.95%
Homelessness service	70.73%	65.91%	71.11%	63.33%	70.21%
Building safety and compliance	95%	87.50%	98.28%	93.33%	93.18%
Aids and adaptations	90.91%	82.61%	94.29%	100%	93.55%
Money advice	90%	100.00%	90.91%	100%	100%
Wellbeing service	93.75%	92.31%	100.00%	100%	84.21%

What did we learn?	What have we done?
There has been an increase in perception satisfaction across most areas. This is great to hear!	This does not mean we will be complacent. We are carrying out further analysis on our TSM results to ensure that all groups are accessing our services fairly
We have seen a decrease in satisfaction when you have a repair carried out by SCH	We have carried out more analysis and can see that this is largely driven by gaps in communication and coordination. We are carrying out a full review of our repairs communication in conjunction with residents.
We can also see that there has been a decrease in your satisfaction when you make a call to the contact centre	We have recently reviewed how we resource the contact centre to reduce call waiting times. We have also introduced a call back facility to make the experience better for customers. Further enhancements to our digital forms of communication are currently being developed.

Engagement Activities

In each edition of this report, we will highlight some of the feedback you have given us, or outcomes from the SCHape Panel reviews. **In this edition, the spotlight is on wellbeing calls**

SCHAPE
Residents Panel
Solihull Community Housing
Achieving Performance Excellence

Residents tell us whether they have vulnerabilities or additional needs and this helps us tailor services to meet those needs.

During the recent heatwave, we used this information to contact over 500 residents who may be more at risk from the hot weather, to check if they were ok, and find out if they needed any additional support

During the calls we were able to assist a resident to access urgent medical help, and a number of others to access support from family or other organisations.

SCHape Panel

The Resident SCHape Panel have reviewed SCH's compliance with the Consumer Standards. They reviewed the SCH self-assessment and asked the resident mystery shoppers to check elements of service delivery this included:

- Review of website accessibility and ease of finding information
- Use of online forms and efficiency of responses
- Various queries through the contact centre
- Review of new SILs service
- Review of Estates and environmental services information

The Panel found that the self-assessment was accurate, and the action plan, when implemented will address gaps in meeting the consumer standards.

The Panel have a forward plan for the next 12 months:

- Engagement framework – August to September
- Void standards – October to December
- Management of ASB - January to March
- Contractor relationships -March to May

If you have any thoughts on areas you would like them to review, please email engagement@solihullcommunityhousing.org.uk

Customer Experience Committee

The new Customer Experience Committee has been appointed. The committee is made up of eight residents and one independent Board member. It is chaired by a tenant Board member. The committee is a subcommittee of the Board and will give a much stronger voice to customers in the decisions SCH make and the services it provides. We have also appointed two new tenants to the Board.

The committee have been busy learning about SCH and getting ready for their first meeting in September. To learn much more about the committee, and what they will be doing, please **click here** .

The **Virtual Improvement Panel (VIP)** is a group of more than 500 residents that regularly work with SCH. The VIP act as a sounding board, test ideas, review changes, get involved in 'Task and Finish' groups and much more. Activities and outcomes this quarter include:

Virtual Improvement Panel

VIP activity	Outputs and Outcomes
Review of pest control policy	Happy with policy, no recommendations.
Review of No Access policy	Repetitions noted – removed **Bold** wording for important information – actioned More clarity on legal costs – they vary from case to case so detail could not be included
Review of decant policy	Concerns raised about pets – revised to be clear that we source temporary accommodation to include pets
Review of recharge policy	VIP welcomed the new policy Suggested that an annual pricing document be published. This is being considered
Review of Garage Policy	Amended policy to include no restrictions on number of garages customers can rent
Mystery shopper	• Website accessibility • Website navigation and information
Empty homes inspectors	Identifying any issues where empty homes are not to the agreed standards, before homes are let. They have reported cleaning issues which

	have been rectified. Satisfaction with cleaning is high.
Review of Wellbeing offer (communications)	Positive feedback, no improvements suggested.

Other engagement activities this quarter include:

- Three estate walkabouts – identifying a number of issues such as fly-tipping, communal cleaning issues and graffiti. All of the issues have been actioned.
- Building Safety Advocates reported 8 issues in high-rises, in between officer inspections. All of them have been actioned.
- 22 drop-in sessions held at Family Hubs across the borough. Assisted 24 residents to access services or support around homelessness and allocations, repairs and mental health.





Complaints

Complaints are one of the most valuable sources of feedback from our customers. When we get things wrong, we want to put it right. We also want to learn from complaints; they help us to make changes to the way we do things, so we can continually improve what we do.

In Quarter 1 2026/27, we investigated 166 complaints. The biggest area of complaints was reactive repairs. This is not surprising as we undertake over 30,000 repairs a year.

Complaints handling is an area of focus for improvement at SCH, and we are working on being a better listening and learning organisation. We have seen an improvement to our performance when looking at completion within timeframes over the last 12 months, and we are working to make further improvements over the coming months.

Indicator	Q2 2025/26	Q3 2025/26	Q4 2025/26	Q1 2026/27
Number of Stage 1 closed	121	149	192	**166**
Percentage of Stage 1 completed on time	93.39%	89.26%	98.96%	**98.19%**
Percentage of Stage 1 upheld	52.07%	51.39%	48.44%	**42.77%**
Number of Stage 2 closed	32	50	43	**72**
Percentage of Stage 2 completed on time	96.67%	92%	97.67%	**68.06%**
Percentage of Stage 2 upheld	50.00%	29.27%	23.26%	**39.56%**

Housing Ombudsman

The Housing Ombudsman Service (HOS) investigate complaints when a tenant escalates their concerns to them after receiving a Stage 2 outcome. During quarter 1, 3 cases have been determined by HOS:

- 1 case regarding boiler repairs found maladministration, orders were issued and complied with
- 1 case regarding ASB and Housing Allocation was not accepted by HOS
- 1 case regarding pest control had the outcome of ‘redress’, meaning HOS found fault but were satisfied appropriate steps had been taken during the complaint investigation.

All cases that reach determination are reviewed and all learning acted upon.

Listening and Learning

When you make a complaint, or the Housing Ombudsman finds failings, we use the information to identify any themes or areas for improvement. This quarter, we have found:

Theme	Service area	Action
Multiple visits & boiler breakdowns	Compliance	- Complaint process improved to monitor follow on action from Complaint investigation - Review of process for repeat repairs

Other customer contact

Compliments

Compliments are a great source of feedback. It shows us where we are doing a good job and where we're making a real difference to your experience as a customer. Most compliments are received via our satisfaction surveys, and as with complaints, the biggest source of compliments is for our repairs service. Some examples of the great feedback you have sent to us include:



'absolutely outstanding job - looks really nice and it makes such a difference and the work is perfect'



'He was so lovely and did a great job'



'The graffiti has now been removed. That's amazing how quickly you sorted it. Excellent customer service.'



He is a real asset to SCH, very knowledgeable and his work was exceptional. He took the time to explain what was being done.

Councillor and MP enquiries

During the first quarter of 2026-27 we received 188 Councillor and MP enquiries. A number of these were converted to a complaint where we could see a customer had expressed dissatisfaction, the others were either service requests or asking for clarification on behalf of customers.

If you would like this report in any other format or language, please scan the QR code or telephone us on **0121 717 1515**

ITEM 5

QUARTERLY MONITORING BOARD

Meeting Date: 25 August 2026

Report Title: Tenant Satisfaction Measures (TSMs) 2025/2026 Outturn

Report Author: Satnam Kaur, Assistant Director, Housing / Becci Youlden, Head of Customer Experience - SCH

1 Purpose of report

1.1 This report provides QMB with the 2025/26 Tenant Satisfaction Measures for the homes managed by Solihull Community Housing on behalf of the Council. It sets out the headline results, the main changes from 2024/25, the areas of stronger performance and those requiring further improvement and the improvement activity required in response.

1.2 The report brings together the tenant perception measures, management information measures, survey methodology and audit findings so that QMB can consider the overall position for 2025/26 and the action being taken to improve services.

2 Recommendations

a) QMB is asked to note the 2025/26 TSM results and their submission to the Regulator of Social Housing.

b) QMB is asked to note the Housemark TSM audit findings, including that three of the ten management measures were rated as providing limited assurance.

c) QMB is asked to note the main areas for improvement, including complaints handling, ASB, home condition, communication, data quality and resident experience.

d) QMB is asked to endorse the approach to bringing the improvement activity into a single consolidated plan.

3 Background

3.1 Registered providers are required to collect, publish and submit Tenant Satisfaction Measures each year. The measures support transparency for tenants and provide insight into how landlords are meeting the Regulator of Social Housing's Consumer Standards. This is the third year of TSM reporting, allowing the 2025/26 results to be considered alongside previous years to identify trends, areas of consistency and areas requiring further improvement.

3.2 The TSM framework includes 22 measures: 12 tenant perception measures collected through survey activity and 10 management information measures drawn from operational

performance data. Together, they provide a picture of both resident experience and reported service performance.

3.3 SCH commissioned Acuity Research & Practice Ltd, an independent research organisation specialising in the social housing sector, to carry out the tenant perception survey for the homes it manages on behalf of the Council. A total of 588 telephone surveys were completed between June 2025 and March 2026. A telephone-based approach was used to support accessibility, provide consistency with previous survey activity, encourage engagement and enable interviewers to clarify questions where needed. The approach also allows feedback to be shared so that follow up action can be taken where appropriate.

3.4 A resident facing summary of the 2025/26 TSM results is included at Appendix A. SCH is also taking a report on the 2025/26 TSM results through its Board governance arrangements.

4 Headline messages

4.1 The 2025/26 results show a slight improvement in overall satisfaction, increasing from 77.2% to 78.0%. While many perception measures remain above the 2024/25 local authority sector median, performance is less strong when compared with the agreed 2025/26 targets and the 2024/25 local authority top quartile. The results also show some clear areas of pressure, particularly complaints handling, ASB handling, home condition, communication and neighbourhood contribution.

4.2 The main points are summarised below, with the detailed results set out in Section 5.

- **Overall satisfaction:** Overall satisfaction increased slightly from 77.2% in 2024/25 to 78.0% in 2025/26. This is above the 2024/25 local authority sector median of 68.5% and the top quartile benchmark of 74.8% but remains below the agreed 2025/26 target of 80.0%.
- **Stronger perception results:** The strongest scores relate to being treated fairly and with respect, time taken to complete the last repair, repairs in the last 12 months, and feeling safe in the home. These measures are generally above the 2024/25 local authority median.
- **Areas requiring further improvement:** The lowest perception score is complaints handling at 34.8%. ASB handling also reduced from 61.3% to 54.3%, and satisfaction with home condition, communication and neighbourhood contribution remain below the agreed targets.
- **Management information:** Statutory health and safety checks remain strong, with gas, fire, asbestos, legionella and lift safety checks reported at, or close to, 100%. The proportion of homes that do not meet the Decent Homes Standard also reduced from 1.8% to 1.2%.
- **Complaints, ASB and repairs:** Complaint volumes increased, and Stage 2 complaint timeliness reduced — mainly reflecting a change in how the measure is calculated following the audit (see Section 6) rather than a fall in service. ASB case volumes increased. Repairs performance improved for non-emergency repairs following audit, but emergency repairs remain below target and below the 2024/25 local authority median.
- **Audit and data quality:** Some repairs and complaints figures were updated following the Housemark audit. The audit also identified data quality, fragmented systems and manual calculations as areas that need to be strengthened.

5 Tenant Satisfaction Measure results

5.1 The table below shows the 2025/26 TSM results alongside the previous year's results, the targets we set for 2025/26 and the latest available local authority sector benchmarks. Many measures are above the 2024/25 local authority median, and overall satisfaction is also above the 2024/25 top quartile benchmark. Some measures were below the targets we set for 2025/26 and below the 2024/25 local authority top quartile, such as complaints handling, ASB handling, home condition and emergency repairs. The 2026/27 targets are set out in the Strategic Performance Report considered earlier on the agenda.

5.2 The benchmark columns show 2024/25 local authority sector median and top quartile figures and are included for context as the latest available sector comparison. The 2025/26 sector comparison data will be published in November 2026.

Table 1: Tenant Satisfaction Measures 2025/26

Tenant perception measure	2023/24	2024/25	2025/26	2025/26 target	2024/25 LA median	2024/25 LA top quartile
Overall satisfaction	80.7%	77.2%	78.0%	80.0%	68.5%	74.8%
Repair in last 12 months	78.7%	77.9%	78.5%	80.0%	71.8%	77.9%
Time taken to complete the last repair	74.9%	80.2%	80.2%	76.0%	67.5%	75.6%
Home is well maintained	76.5%	74.1%	73.3%	80.0%	68.1%	74.3%
Home is safe	80.1%	80.1%	79.2%	81.0%	74.3%	79.9%
Landlord listens to and acts upon tenants' views	68.0%	67.2%	67.8%	71.0%	57.2%	64.7%
Keeps you informed about things that matter to you	75.1%	76.6%	75.3%	79.0%	69.1%	74.3%
Landlord treats me fairly and with respect	84.4%	83.9%	83.3%	85.0%	74.8%	80.3%
Complaints handling	34.2%	37.8%	34.8%	45.0%	31.3%	36.8%
Landlord keeps communal areas clean and safe	62.0%	66.7%	70.9%	70.0%	63.1%	69.6%
Makes positive contributions to neighbourhood	74.6%	74.7%	70.0%	74.0%	62.0%	67.9%
ASB handling	58.3%	61.3%	54.3%	60.0%	57.2%	61.4%

Management information measure	2023/24	2024/25	2025/26	2025/26 target	2024/25 LA median	2024/25 LA top quartile
Gas safety checks completed	99.9%	99.9%	99.9%	N/A	99.9%	100.0%
Fire risk assessments completed	100.0%	100.0%	99.9%	N/A	100.0%	100.0%
Asbestos management surveys or re-inspections completed	100.0%	100.0%	100.0%	N/A	100.0%	100.0%
Legionella risk assessments completed	100.0%	100.0%	100.0%	N/A	100.0%	100.0%
Communal passenger lift safety checks completed	100.0%	100.0%	100.0%	N/A	100.0%	100.0%
ASB cases opened per 1,000 homes	30.4	23.6	31.3	N/A	37.4	23.0
ASB cases involving hate incidents opened per 1,000 homes	0.2	0.4	0.7	N/A	0.6	0.2
Homes that do not meet the Decent Homes Standard	1.9%	1.8%	1.2%	2.0%	3.2%	1.1%
Non-emergency repairs completed within target timescale	81.4%	81.6%	84.2%*	85.0%	84.0%	90.8%
Emergency repairs completed within target timescale	95.5%	91.8%	92.3%*	95.5%	94.9%	98.9%
Stage 1 complaints per 1,000 homes	39.1	43.0	54.2*	N/A	44.8	28.6
Stage 1 complaints responded to within Code timescales	69.8%	73.6%	93.3%*	85.0%	81.8%	93.9%
Stage 2 complaints per 1,000 homes	1.7	5.4	14.0*	N/A	4.8	7.6
Stage 2 complaints responded to within Code timescales	82.4%	84.9%	74.3%*	96.0%	82.7%	97.9%

* Amended following the Housemark audit.

6 Housemark audit

6.1 SCH commissioned Housemark to audit the 2025/26 TSM management information. The audit considered the quality, completeness and robustness of the data and processes used to produce the management measures, including collection, recording, storage, calculation and reporting.

6.2 The audit covered the 10 regulatory management measures, including complaints, ASB, building safety, Decent Homes and responsive repairs, and also considered responsive repairs work in progress. Of the 10 regulatory management measures, three were rated as providing limited assurance and seven were rated as providing reasonable assurance. The limited assurance ratings related to complaints relative to the size of the landlord, complaints responded to within Complaint Handling Code timescales, and repairs completed within target timescale. The full audit report is included at Appendix B.

6.3 Housemark concluded that TSM management information reporting is on a positive trajectory, but remains constrained by data quality issues, fragmented systems and manual calculations. Strengthening controls, improving system integration and reducing manual intervention will be important to improving the reliability and auditability of future reporting.

6.4 The audit does not invalidate the submitted TSM return, but it does identify areas where controls, documentation and evidence need to be strengthened for future reporting.

6.5 Housemark made 28 recommendations. The implementation plan is included at Appendix C and is being progressed alongside the wider improvement activity responding to the 2025/26 TSM results and audit findings.

6.6 The 2025/26 TSM results were submitted to the Regulator at the end of June 2026, following the audit and updates to the relevant repairs and complaints figures.

7 Equality and resident experience

7.1 The survey results show variation in satisfaction by demographic group, property type and area. Overall satisfaction was lower among Black residents at 68% and residents of mixed ethnicity at 65%, compared with Asian residents at 83% and White residents at 79%. Residents aged 25 to 64 reported lower satisfaction at 73%, compared with 89% for residents under 25 and residents over 65. Lower satisfaction was also identified in low-rise flats, maisonettes and some neighbourhoods, particularly Smith's Wood.

7.2 The data does not identify a single causal factor linked directly to ethnicity, age or other protected characteristics. Some sub-group figures are based on small numbers of responses and should be treated as indicative rather than precise. However, the results do point to groups, property types and areas where further analysis and targeted engagement are needed to understand residents' experiences and whether changes are required to service delivery, communication or access arrangements.

7.3 Further analysis of satisfaction differences by age and ethnicity will be considered through the SCH Customer Experience Committee, alongside wider resident engagement and service improvement activity.

8 Main areas for improvement and planned activity

8.1 The TSM results and Housemark audit reinforce a number of themes already emerging through wider performance reporting, customer feedback and service reviews. In particular, repairs, complaints handling, communication, resident experience and data quality continue to be recurring areas for improvement. Whilst responsibility for delivery sits across a number of service areas, these themes are interconnected. A consolidated improvement

plan will provide a clearer view of how activity across individual workstreams contributes to improving overall resident experience and future TSM performance.

8.2 The 2025/26 results and Housemark audit identify areas where improvement activity is being focused:

- **Repairs, home condition and complex case management:** Repairs remain central to overall satisfaction. Although repairs satisfaction is comparatively strong, views on home condition and communication show the repair journey needs to be considered in full, including quality, first time completion, repeat visits, resident updates and complex cases. SCH has advised that it will undertake a review of repairs communication and coordination, commencing in Quarter 3 with the resident SCHape Panel. This will need to include clear scope, timescales and reporting of outcomes. This will sit alongside damp and mould prevention and preparation for Awaab's Law.

- **Complaint handling and learning:** Complaint handling remains the lowest satisfaction measure. Complaint volumes have increased, Stage 2 timeliness reduced following the change in calculation applied after the audit, and satisfaction remains low. Root cause analysis of the increase in complaints is expected through the Quarter 2 complaints report.

- **ASB case handling and resident communication:** Satisfaction with ASB handling declined while case volumes increased. SCH has commissioned an independent review by Resolve, with further review by the SCHape Panel. The scope and timetable will need to be confirmed through the consolidated improvement plan.

- **Communication and contact:** Communication is a recurring theme across repairs, complaints and case handling. The improvement work will focus on clearer updates, reducing the need for residents to chase progress, better coordination between teams and contractors, and Contact Centre accessibility and waiting times.

- **Neighbourhood, area and property specific issues:** Satisfaction varies by service area, property type and neighbourhood. SCH has identified area and property-specific improvement plans, using the TSM results to target activity where satisfaction is lower.

- **Data quality and reporting controls:** The Housemark audit identified the need to strengthen the reliability and auditability of TSM management information. The improvement work will focus on delivering the 28 recommendations, reducing manual workarounds, improving system integration, evidence retention, clear calculation methods and quality checks before future submissions.

9 Risk implications

9.1 The main risks relate to resident confidence, regulatory reporting, data quality and delivery of improvement activity. Continued lower satisfaction in complaints handling, ASB, home condition and communication may affect resident trust if improvement is not visible or sustained.

9.2 The Housemark audit also highlights risks around data quality, fragmented systems and manual calculations. These issues need to be addressed to strengthen the reliability and auditability of future TSM reporting.

9.3 There is also a delivery risk if improvement activity sits across several plans and workstreams without a consolidated view of actions and progress. This will be managed through the 2026/27 performance reporting cycle

10 Appendices

Appendix A TSM Annual Report 2025/26

Appendix B Housemark Audit TSMs 2025/26

Appendix C Improvement Plan

Solihull Community Housing
Shaping our neighbourhoods

Annual Report 2025/26

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1. Introduction

This annual report shares the results of the Tenant Satisfaction Measures (TSMs) for 2025/26 and forms an important part of our commitment to listening to you and acting on what you tell us. Your feedback is central to how we shape and improve our services, and the TSMs give us a consistent and independent way of understanding your experience across key areas such as repairs, communication, home condition, neighbourhood services, and feeling safe.

TSMs are set by the Regulator of Social Housing and are used by all housing providers across the country. They help the Regulator check that landlords are meeting required standards and ensure that your voice is at the heart of how social housing is monitored. Every year, around 600 SCH households take part in the survey. The questions are the same for every landlord, which means your responses can be compared fairly with other organisations and help us understand where we are performing well and where we need to improve.

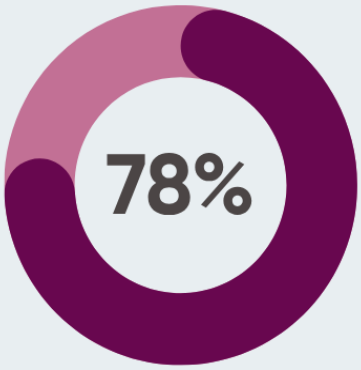
This report brings together your feedback, our performance results, and the themes you raised in your comments. It is structured around the main areas the Regulator requires us to report on: overall satisfaction, keeping your home in good condition, customer experience, neighbourhood services, and differences in satisfaction across age, ethnicity, property type, and geographical area. Each section explains what you told us, how our performance compares to our targets and other organisations, and what we are doing next to improve.

We want this report to be clear, open, and useful. Most importantly, we want it to show how your voice directly shapes the way we work. Thank you to everyone who took part in the survey this year – your feedback continues to guide our focus and helps us deliver services that better meet your needs.



2. TSM results at a glance

Overall Satisfaction



Customer Experience

- Listens and acts — 67.8%
- Kept informed — 75.3%
- Fairly and with respect — 83.3%
- Complaints handling — 34.8%

Keeping Your Home In Good Condition

- Well maintained home — 73.3%
- Safe home — 79.2%
- Repairs - Last 12 months — 78.5%
- Repair times — 80.2%

Neighbourhood Services

- Communal areas — 70.9%
- Neighbourhood Contribution — 70.0%
- Approach to ASB — 54.3%

3. Overall satisfaction

Overall satisfaction for 2025/2026 was 78%. Our target was to achieve 80%.



3.1. Drivers of satisfaction

Across all comments, four themes consistently stand out as the biggest contributors to positive experiences.

Speed of repairs and "fixed first time"

You repeatedly told us how much you value repairs being completed quickly and correctly the first time. When a repair is handled efficiently, without repeat visits or long waits, it creates a strong sense of trust and reassurance. This "fixed first time" experience is one of the clearest drivers of satisfaction across all groups and areas.

Staff behaviour (polite, empathetic)

You consistently praise SCH staff for being polite, friendly, and understanding. Comments show that even when services are not positive, positive interactions with staff help maintain confidence and reduce frustration. Empathy, patience, and clear communication from frontline teams are central to you feeling respected and valued.

Feeling safe and regular checks

Safety is a major contributor to satisfaction. When you feel secure in your home and neighbourhood, supported by regular checks, you report much higher satisfaction.

Visible cleaning and maintenance

You notice and appreciate when communal areas are clean, tidy, and well looked after. You told us that regular cleaning and visible caretaking presence make you feel your environment is cared for and that SCH is actively looking after your neighbourhood. This is one of the most consistent positive themes across all property types.

3.2. Drivers of Dissatisfaction

Your comments also show clear and recurring themes that drive dissatisfaction. These issues have a strong impact on how you feel about your home, your neighbourhood, and SCH services overall.

Repeat repairs or delays to repairs

The most common source of frustration is repairs that take too long or require multiple visits. You told us that it is frustrating where issues are not resolved, appointments are missed, or repairs fail shortly after being completed. This leads

to a sense of being “stuck” with ongoing problems and significantly reduces trust in the service.

Damp, mould and leaks

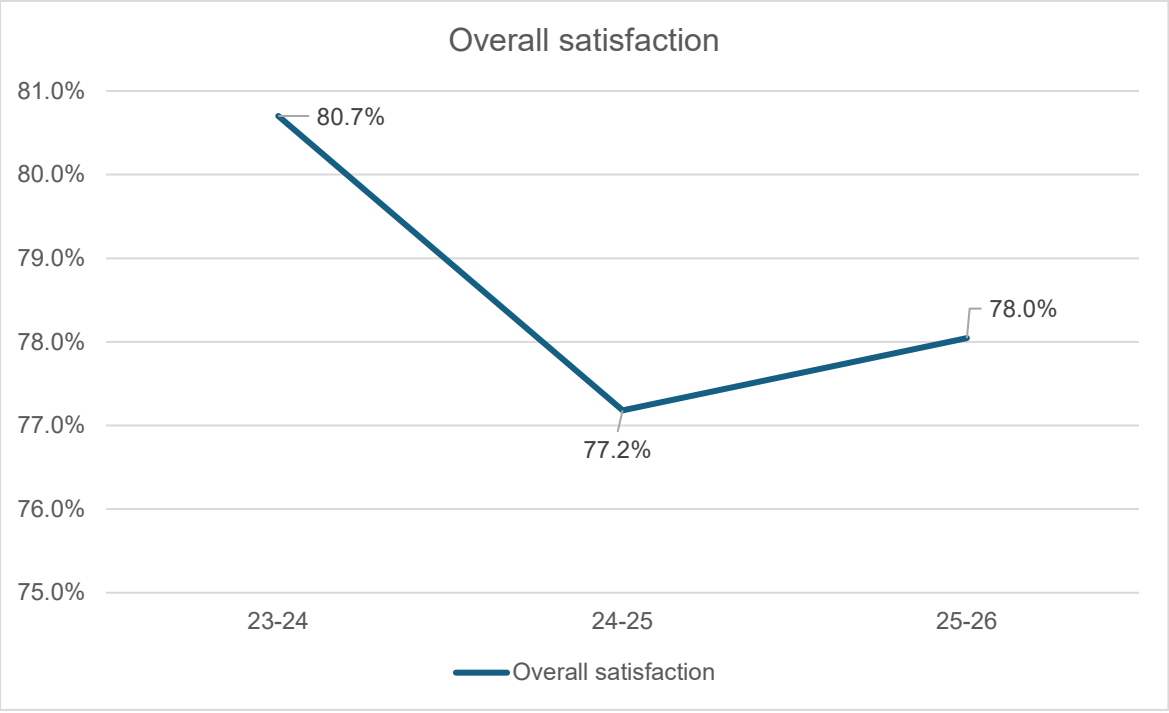
Damp and mould are among the most frequently mentioned high-impact issues. These issues strongly influence overall satisfaction.

Poor repairs communication / having to chase

You told us that not being kept informed about repair progress, delays, or next steps and having to chase for updates creates frustration and can make you feel ignored. This theme appears across all groups and areas and is one of the clearest drivers of dissatisfaction.

3.3. Year on year trends

Overall satisfaction showed a small drop last year (2024-25), followed by a modest recovery this year (2025-26).



4. Keeping your home in good condition

4.1. Performance summary

Satisfaction measure	Result	SCH Target	Compared to other similar organisations
Well maintained home	73.3%	80%	Above average
Keeping you safe in your home	79.2%	81%	Above average
Satisfaction with last repair	78.5%	80%	Above average
Satisfaction with the speed of repair	80.2%	76%	Above average

4.2. Themes from comments

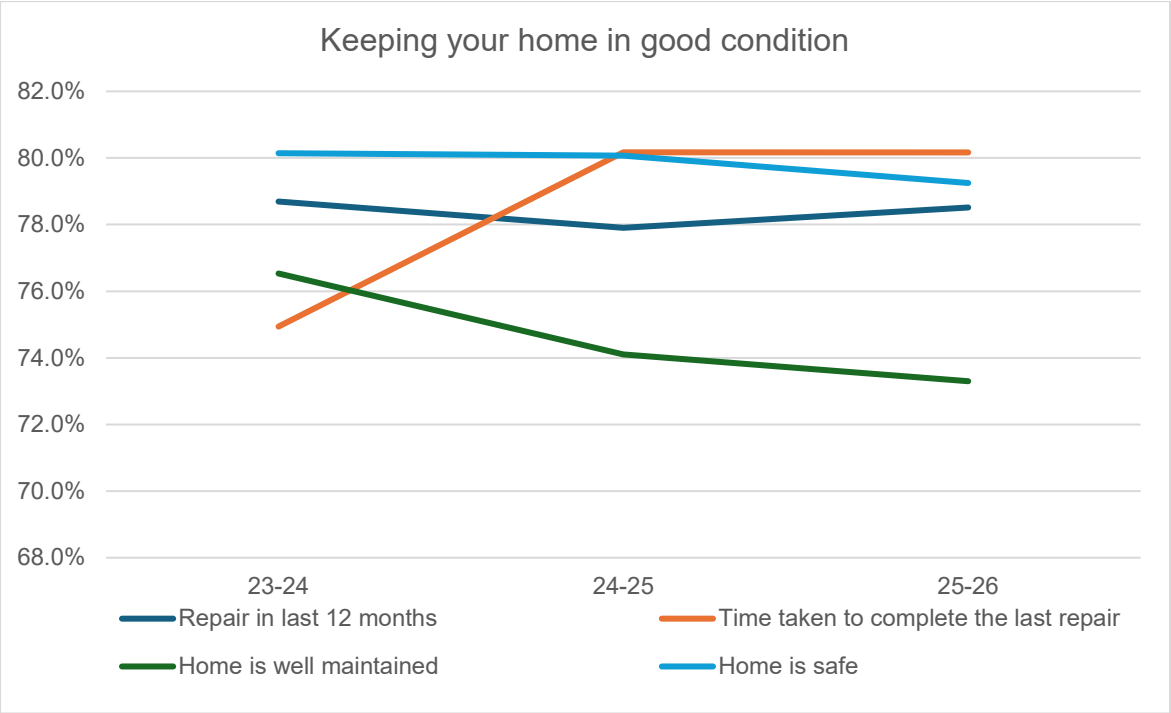
Home / communal areas are safe and well-maintained:

Positive themes	Negative / Neutral themes
Safe home / feeling secure	Damp & mould
Clean communal areas	Poor cleaning standards
Regular safety checks	Broken doors/windows/security issues
Grass cutting / grounds maintenance	Litter / fly tipping
Well-maintained property	Cold homes / insulation

Repairs:

Positive themes	Negative / Neutral themes
Quick response to repairs	Long waiting times
Issues resolved first time	Repeat visits / unresolved
Professional contractors	Poor quality workmanship
Emergency response good	Jobs not completed
Easy to report repairs	Lack of follow-up

4.3. Year on year trends



Key takeaways:

- Home well maintained: Showing a 3% decline over the last 3 years
- Home is safe: Remained stable
- Repairs in last 12 months: Remained stable
- Repair time: Has shown a significant improvement

4.4. Summary

Your feedback this year shows that while many of you feel safe in your homes and appreciate the visible upkeep of communal areas, there are still important areas where your experience isn't as consistent as it should be. Satisfaction with home condition sits at 73%, below our 80% target, even though it remains *above average* compared with similar organisations. You told us that feeling secure, seeing regular safety checks, and having clean shared spaces make a real difference; these were some of the strongest positive themes in your comments.

At the same time, issues like damp and mould**,** poor cleaning standards, and broken doors or windows continue to affect how comfortable and cared-for some of you feel. Repairs remain a mixed picture: satisfaction with the speed of repair is high at 80%, above target and improving year on year, and many of you praised quick responses and repairs completed first time. But delays, repeat visits, and having to chase for updates remain some of the biggest drivers of dissatisfaction. Over the past three years, repair time has improved significantly, but satisfaction with home maintenance has gradually declined. Overall, the results show that while core safety and repair responsiveness are strong, we need to focus more ensuring repairs are completed fully and reliably so your home feels consistently well looked after.

5. Customer Experience

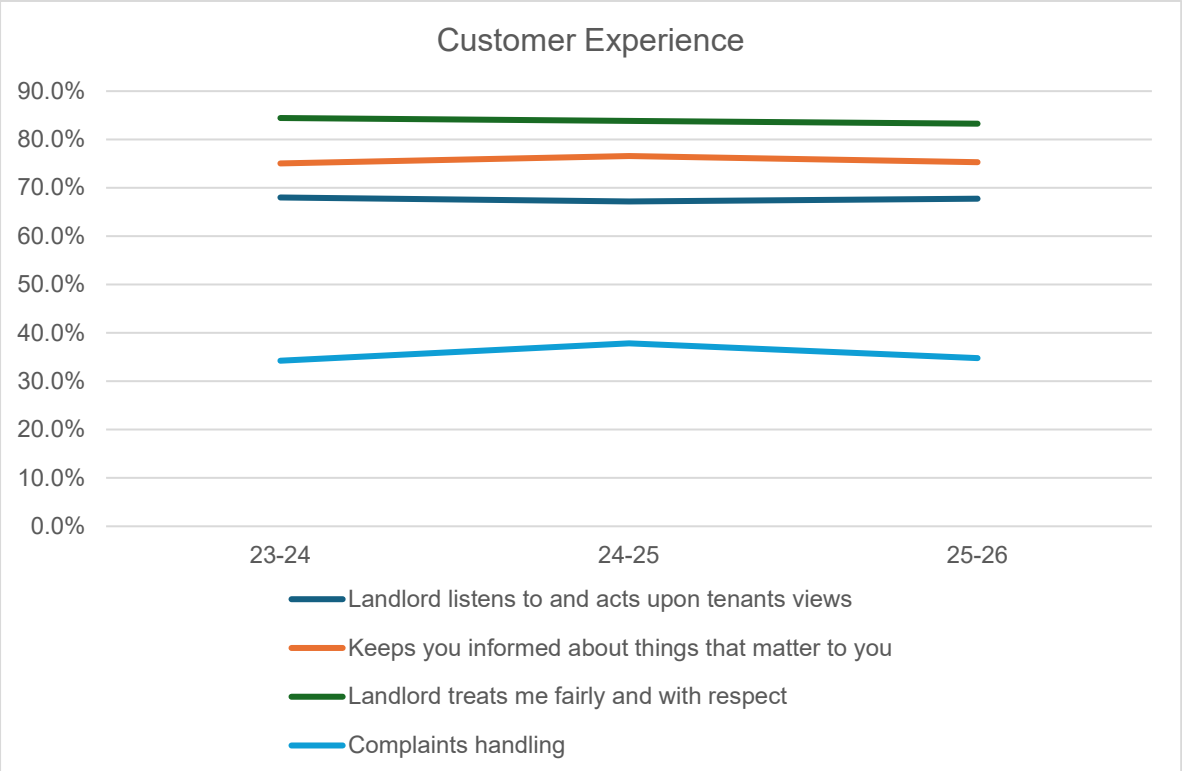
5.1. Performance summary

Satisfaction measure	Result	SCH Target	Compared to other similar organisations
Listens and acts	67.8%	71%	Above average
Kept informed	75.3%	79%	Above average
Treated fairly and with respect	83.3%	85%	Above average
Complaint handling	34.8%	45%	Above average

5.2. Themes from comments

Positive themes	Negative / Neutral themes
Polite and friendly staff	Longer call wait times
Helpful and supportive	Poor communication / no updates
Clear information / newsletters	Having to chase repeatedly
Easy to contact	Inconsistent responses
Empathy (esp. vulnerable tenants)	Rude or dismissive staff

5.3. Year on year trends



Key takeaways:

- Listens and acts: Remained stable
- Kept informed: Remained stable
- Treated fairly and with respect: Remained stable
- Complaint handling: Decline compared to last year, more reflective of performance in 2023/2024

5.4. Summary

Many of you told us that your interactions with SCH staff are one of the strongest parts of your experience, and this is reflected in the results. Satisfaction with being treated fairly and with respect is high at 83%, and comments frequently mention polite, friendly, and supportive staff. Communication also performs well overall, with 75% of you saying you feel kept informed, above average compared with other similar organisations, though still below our 79% target**.**

You told us that you were less satisfied with listening and acting, where satisfaction is 68%, and complaint handling**,** which remains low at 35%**,** though both are above average compared to other similar organisations. Your comments make the reasons clear: longer call wait times, examples of inconsistent responses, and having to chase for updates all reduce confidence and make it harder for you to feel heard. Year-on-year, most customer experience measures have remained stable, but complaint handling has dipped back to levels seen in 2023/24.

Overall, the results show that while staff interactions and day-to-day communication are strong, we need to improve follow-through, reduce the need for chasing, and strengthen how we respond when things go wrong so you feel listened to and supported throughout.

6. Neighbourhood services

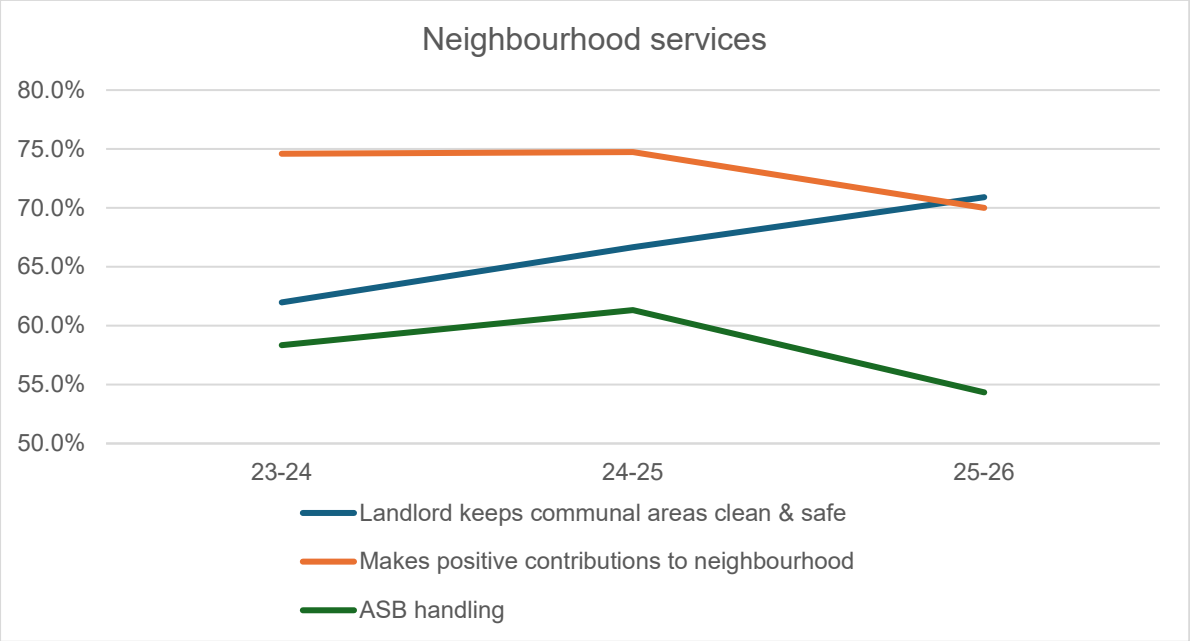
6.1. Performance summary

Satisfaction measure	Result	SCH Target	Compared to other similar organisations
Communal areas	70.9%	70%	Above average
Positive contribution to neighbourhood	70%	74%	Above average
Approach to ASB	54.3%	60%	Above average

6.2. Themes from comments

Positive themes	Negative / Neutral themes
Clean environment	Litter / rubbish
Grass cutting / maintenance	Lack of upkeep
Fly-tipping cleared	Neglected areas
Improvements (parks, roads)	Poor visibility of services
Regular presence (caretakers)	Limited investment / uneven service

6.3. Year on year trends



Key takeaways:

- Communal areas: Clear improvement of 9% over the three years
- Neighbourhood contribution: A 5% decline noted for this year
- Approach to anti-social behaviour: A 7% decrease compared to last year

6.4. Summary

This year’s results show that many of you are seeing real improvements in how communal areas are looked after, with satisfaction rising to 71%, above target and showing a clear upward trend over the past three years. You told us that clean environments, regular caretaker presence, and visible grounds maintenance make a big difference to how you feel about your neighbourhood.

At the same time, satisfaction with SCH’s contribution to neighbourhoods has fallen to 70%, below our 74% target, and many of you highlighted issues such as litter, neglected areas, uneven upkeep, and limited visibility of services.

The biggest challenge remains anti-social behaviour (ASB), where satisfaction is 54%, below target and showing a decline compared with last year. Comments point to concerns about noise, rubbish, and slow responses to ASB issues, particularly in areas where tenants report feeling less safe.

Overall, the results show that while communal areas are improving and many neighbourhoods feel well cared for, we need to strengthen ASB responses, ensure estate services are more consistent across all areas, and make our presence more visible so you feel supported and confident in your local environment.

7. Demographics

7.1. Ethnicity

Across all ethnicity groups, most tenants report positive experiences with their home and with SCH services. However, the results show some important differences that help us understand where experiences are strongest and where improvement is needed.

Groups with the highest satisfaction:

Asian tenants report the highest overall satisfaction (83%). Their scores are consistently strong across almost every indicator, including repairs, feeling safe, being treated fairly and communication. This suggests that Asian tenants generally experience services as reliable, respectful and responsive.

White tenants (79%) are close to the overall average and show steady satisfaction across most indicators. Their scores reflect a broadly positive experience, with particular strengths in feeling informed and treated fairly.

Groups with lower satisfaction:

Black tenants (68%) and **Mixed ethnicity tenants (65%)** report lower satisfaction overall. This pattern is visible across several indicators, including repairs, communication and feeling listened to. These groups are more likely to report delays, repeat repairs, or needing to chase for updates, issues echoed in tenant comments.

Mixed ethnicity tenants show the lowest satisfaction across several individual measures, including communal areas and communication. Black tenants report stronger scores for safety and estates, but lower scores for being listened to and repairs.

Tenants identifying as 'Other' (67%) also show mixed satisfaction, though the small number of responses means results should be interpreted with caution.

7.2. Satisfaction by age

Satisfaction levels differ across age groups, and the results show some clear patterns in how tenants of different ages experience their home and SCH services. While most tenants report positive experiences, older tenants consistently show the highest satisfaction, and middle-aged tenants report more mixed experiences.

Highest satisfaction: Older tenants (65+)

Tenants aged **65 and over report the highest overall satisfaction (89%)**, and this strong performance is reflected across almost every indicator. They report high levels of feeling safe, homes being well maintained, and being treated fairly and with respect. Communication scores are also strong, with many older tenants saying they feel informed and find SCH easy to deal with.

This group also reports the highest satisfaction with repairs, including repair quality and timeliness. Their feedback suggests that services feel reliable, consistent, and supportive.

Younger tenants (Under 25)

Tenants aged **under 25 also report high overall satisfaction (89%)**, though their scores vary more across individual indicators. They rate customer service highly, especially staff helpfulness and empathy, and feel well supported when contacting SCH. They also report strong satisfaction with fairness and respect.

However, younger tenants give lower scores for home maintenance and communal areas, suggesting that while their interactions with SCH are positive, the physical condition of homes and shared spaces may not always meet expectations.

Lower satisfaction: Tenants aged 25–64

Tenants aged **25 to 64 report the lowest overall satisfaction (73%)**, and this pattern is consistent across several indicators. This group is more likely to report issues with repairs taking too long, repeat visits or needing to chase for updates. Satisfaction with communication is lower, particularly around being kept informed and feeling listened to.

Scores for communal areas, neighbourhood upkeep and complaint handling are also lower for this group, suggesting that day-to-day service consistency has a bigger impact on their experience.

This age group often represents working households and families, and the feedback suggests that delays, lack of follow-through and inconsistent communication affect satisfaction more strongly.

7.3. Geographical area

Satisfaction levels vary across different areas of Solihull, and the results show some clear patterns in how tenants experience their homes, neighbourhoods and SCH services. While most areas report positive experiences overall, some neighbourhoods show consistently higher satisfaction, while others highlight areas where services need to be more consistent.

Areas with the highest satisfaction:

Castle Bromwich reports the highest overall satisfaction (85%). Tenants here give strong scores across most indicators, particularly home maintenance, feeling safe, and ease of dealing with SCH. Satisfaction with repairs is also high, and tenants report feeling well-treated and respected.

Shirley also performs strongly (87%). Tenants in Shirley report excellent satisfaction with home safety, communal areas and repairs. Several indicators reach 100%, including communal areas and repairs satisfaction.

Olton and Kingshurst show strong and steady satisfaction (81-82%), with positive experiences across repairs, communication and feeling safe. Tenants in these areas generally feel supported and well-informed.

Areas with mixed satisfaction:

South Solihull & Meriden (75%) shows a balanced picture. Tenants report good satisfaction with home maintenance, safety and repairs, but lower scores for complaints and neighbourhood contribution. This suggests that while core services are working well, tenants would like to see more visible upkeep and quicker resolution of issues.

Chelmsley Wood (76%) shows broadly positive satisfaction, though slightly lower than the borough average. Tenants report good experiences with repairs and feeling safe, but lower satisfaction with communal areas and neighbourhood upkeep. ASB scores are also lower, reflecting concerns about noise, litter and local environment.

Areas with lower satisfaction:

Smith's Wood (74%) reports the lowest overall satisfaction among the larger neighbourhoods. Tenants here give lower scores for home maintenance, communal areas and communication. Repairs satisfaction is mixed, with some tenants reporting good experiences and others highlighting delays or repeat visits. ASB and neighbourhood contribution scores are also lower, suggesting that environmental issues and local behaviour impact satisfaction more strongly in this area.

7.4. Property Type

Satisfaction varies across different types of homes, and the results show some clear patterns in how tenants experience their property, repairs, neighbourhood and SCH services. While most tenants report positive experiences overall, some property types show consistently higher satisfaction, while others highlight areas where satisfaction is lower.

Highest satisfaction: Bungalows

Bungalow tenants report the highest overall satisfaction (87%). Their scores are strong across almost every indicator, including home maintenance, feeling safe, repairs and communication. Tenants in bungalows also report the highest satisfaction with fairness and respect, and strong experiences with ease of dealing with SCH.

These results suggest that bungalow tenants experience services as reliable, timely and supportive, with fewer issues around repairs or communal areas. This is strongly related to age, as the average age of residents in bungalows is higher than any other property type.

Houses: Strong and steady satisfaction

Tenants living in houses report high overall satisfaction (81%), close to the borough average. Scores are particularly strong for feeling safe, repairs and fairness and respect. Communication and ease of dealing with SCH also perform well.

Lower scores appear around communal areas and neighbourhood contribution, which is expected as houses often rely more on wider estate services rather than shared internal spaces.

Overall, house tenants report a stable and positive experience.

High-rise flats: Mixed but generally positive

Tenants in high-rise flats report good overall satisfaction (78%), with strong scores for safety, repairs and communication. Repair time and ease of dealing with SCH are also positive, suggesting that many tenants feel supported and informed.

Lower scores appear around communal areas and neighbourhood contribution, reflecting concerns about shared spaces, cleaning standards and ASB in some specific blocks.

Lower satisfaction: Low-rise flats / maisonettes

Tenants in low-rise flats / maisonettes report lower overall satisfaction and this pattern is consistent across several indicators. Scores for home maintenance, communal areas and neighbourhood contribution are lower, suggesting that upkeep of shared spaces and estate services has a bigger impact on satisfaction in these properties.

Communication and repairs are more mixed, with some tenants reporting good experiences and others highlighting delays or repeat visits.

8. Next steps

We are using your feedback to make improvements to the way our services are delivered. The actions SCH has committed to this year are:

1. Reviewing the way we communicate with residents when carrying out repairs and our internal communication when dealing with complex jobs. This will help to reduce delays and ensure you know what is happening when repairs are taking place. This is being undertaken in conjunction with the resident SCHape Panel.

2. Continuing to improve how we manage damp and mould issues, ensuring we adhere to Awaab's Law and using data to predict where damp and mould may become a problem and dealing with it before it becomes a significant issue.

3. Improving the ways you can get in touch with us to help reduce call waiting times.

4. Reviewing the way we handle cases of anti-social behaviour. This is being undertaken by an external organisation, and then this will be built on through a review by the resident SCHape Panel.

5. Looking at area and property specific improvement work where residents have told us satisfaction was lower. This will be developed by the new resident led Customer Experience Committee.

6. Carrying out a number of data deep dives to understand the key drivers of differences in satisfaction by ethnicity and age. This will also be overseen by the new Customer Experience Committee.

Appendix A

Data tables

Overall	Overall Satisfaction	Home Well Maintained	Safe Home	Communal Areas	Repair Last 12 Months	Overall Estates	Repair Time	Easy to Deal With	Listens and Acts	Informed	Fairly & Respect	Complaints	Neighbourhood Contribution	ASB
All tenants	78.0%	73.3%	79.2%	70.9%	78.5%	75.6%	80.2%	81.1%	67.8%	75.3%	83.3%	34.8%	70.0%	54.3%

Ethnicity	Overall Satisfaction	Home Well Maintained	Safe Home	Communal Areas	Repair Last 12 Months	Overall Estates	Repair Time	Easy to Deal With	Listens and Acts	Informed	Fairly & Respect	Complaints	Neighbourhood Contribution	ASB
Asian	83.3%	66.7%	90.0%	75.0%	90.0%	87.5%	80.0%	83.3%	88.9%	100.0%	100.0%	66.7%	100.0%	75.0%
Black	67.7%	67.7%	79.3%	80.0%	78.9%	81.3%	78.9%	87.1%	54.5%	70.8%	82.8%	14.3%	64.3%	63.6%
Mixed	64.7%	56.3%	66.7%	36.4%	40.0%	66.7%	50.0%	66.7%	50.0%	66.7%	69.2%	0.0%	71.4%	25.0%
Not known / given	82.0%	74.5%	87.0%	73.7%	85.7%	73.7%	96.3%	89.4%	75.0%	65.9%	81.8%	53.8%	78.6%	54.5%
Other	66.7%	66.7%	33.3%	100.0%	100.0%	100.0%	100.0%	33.3%	66.7%	100.0%	33.3%	33.3%	0.0%	0.0%
White	78.7%	74.4%	78.9%	71.4%	78.6%	75.0%	79.7%	80.6%	68.0%	76.1%	83.8%	33.3%	69.2%	54.3%

Geographical Area	Overall Satisfaction	Home Well Maintained	Safe Home	Communal Areas	Repair Last 12 Months	Overall Estates	Repair Time	Easy to Deal With	Listens and Acts	Informed	Fairly & Respect	Complaints	Neighbourhood Contribution	ASB
Castle Bromwich	85.2%	85.2%	85.2%	75.0%	89.5%	50.0%	83.3%	85.2%	78.9%	78.9%	84.0%	0.0%	81.3%	66.7%
South Solihull and Meriden	75.0%	79.3%	77.2%	81.3%	73.7%	80.0%	84.2%	82.5%	60.5%	75.5%	83.3%	30.0%	79.4%	63.6%
Chelmsley Wood	75.7%	71.3%	78.7%	65.7%	77.1%	77.9%	77.0%	79.6%	65.7%	78.2%	83.7%	42.0%	67.2%	56.9%
Smith's Wood	73.6%	58.0%	69.1%	61.1%	74.4%	66.7%	78.0%	78.3%	62.0%	65.0%	84.1%	40.0%	56.8%	53.1%
Kingshurst	80.7%	74.7%	81.0%	80.0%	75.9%	74.5%	79.3%	83.7%	74.2%	74.7%	81.3%	41.2%	72.7%	57.8%

Olton	81.3%	74.6%	79.0%	72.2%	82.4%	63.2%	88.2%	79.0%	67.3%	76.9%	81.7%	9.1%	66.0%	36.1%
Shirley	87.0%	87.0%	93.3%	100.0%	90.3%	100.0%	83.3%	86.4%	76.9%	74.4%	85.7%	25.0%	83.3%	52.6%

Property Type	Overall Satisfaction	Home Well Maintained	Safe Home	Communal Areas	Repair Last 12 Months	Overall Estates	Repair Time	Easy to Deal With	Listens and Acts	Informed	Fairly & Respect	Complaints	Neighbourhood Contribution	ASB
House	81.2%	73.6%	83.1%	66.7%	79.2%	66.7%	83.6%	79.8%	70.7%	75.5%	81.3%	44.4%	69.9%	59.7%
Bungalow	86.8%	86.7%	88.7%	84.0%	91.2%	84.6%	81.2%	89.4%	78.2%	80.9%	88.1%	23.5%	70.9%	51.1%
Low Rise	69.7%	66.5%	72.6%	61.2%	71.3%	69.8%	72.0%	75.1%	56.8%	68.1%	83.2%	26.1%	60.4%	47.1%
High Rise	78.1%	71.2%	74.5%	82.4%	77.6%	81.4%	84.6%	85.3%	69.9%	80.2%	82.5%	50.0%	82.9%	61.0%
Manisonette	50.0%	50.0%	50.0%	0.0%	0.0%	100.0%	100.0%	50.0%	50.0%	100.0%	50.0%	0.0%	50.0%	50.0%

Age Group	Overall Satisfaction	Home Well Maintained	Safe Home	Communal Areas	Repair Last 12 Months	Overall Estates	Repair Time	Easy to Deal With	Listens and Acts	Informed	Fairly & Respect	Complaints	Neighbourhood Contribution	ASB
Under 25	88.9%	55.6%	83.3%	84.6%	81.8%	92.3%	81.8%	83.3%	80.0%	86.7%	100.0%	80.0%	90.9%	50.0%
25 to 64	73.0%	68.5%	74.5%	66.2%	73.9%	71.8%	76.7%	77.9%	63.0%	71.6%	79.7%	32.9%	66.4%	50.0%
65 and over	89.1%	86.6%	89.7%	82.8%	89.3%	83.9%	88.2%	88.3%	77.3%	82.9%	89.7%	32.0%	76.2%	65.3%

Data tables

TSM Question	23-24	24-25	25-26	26-27 Q1
Overall satisfaction	80.7%	77.2%	78.0%	81.0%
Repair in last 12 months	78.7%	77.9%	78.5%	80.2%
Time taken to complete the last repair	74.9%	80.2%	80.2%	80.9%
Home is well maintained	76.5%	74.1%	73.3%	77.6%
Home is safe	80.1%	80.1%	79.2%	81.8%
Landlord listens to and acts upon tenants' views	68.0%	67.2%	67.8%	75.9%
Keeps you informed about things that matter to you	75.1%	76.6%	75.3%	81.2%
Landlord treats me fairly and with respect	84.4%	83.9%	83.3%	85.2%
Complaints handling	34.2%	37.8%	34.8%	47.4%
Landlord keeps communal areas clean & safe	62.0%	66.7%	70.9%	70.6%
Makes positive contributions to neighbourhood	74.6%	74.7%	70.0%	72.6%
ASB handling	58.3%	61.3%	54.3%	58.3%

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Housemark

Solihull Community Housing

TSM Assurance Management Information

June 2026

housemark.co.uk

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About this report

Background

Solihull Community Housing (SCH) has commissioned Housemark to perform an in-depth audit to carry out a holistic end-to-end audit of the 10 regulatory TSM management metrics, including Works In Progress (WIP).

SCH have previously benefitted from Housemark support in terms of providing data quality assurance, alongside both system improvements and staff development.

A full Housemark TSM audit provides a thorough assessment of compliance by looking at all three stages of reporting:

- How TSM data is collected and recorded.
- How TSM data is stored and managed.
- How TSM measures are calculated and reported.

This report presents Housemark's findings for the audit, based on documentation provided by SCH as well interviews with staff from within the business.

Further information on TSMs and the requirements for the NROSH+ return can be found at:

- https://nroshplus.regulatorofsocialhousing.org.uk/documents.

Notes

The findings in this report are confidential to SCH and follow a unique Housemark methodology. This report should therefore not be shared outside of the organisation without prior consent from both parties.

Note the findings have been provided by Housemark in good faith based on the data and information provided. They represent the views and perceptions of Housemark based on the documents we have reviewed and the people we have spoken to.

Authors

The report is co-authored by Jonathan Cox, Chief Data Officer at Housemark and Tom Pepper, Associate Consultant.

For further information please email: data@housemark.co.uk or telephone the Housemark data helpline on: 024 7647 2707

Thanks

Housemark would also like to recognise the energy and effort put into this review by Becci Youlden, David Dalrymple, Ayodeji Bamidele and Nika Dicker with whom we have engaged throughout the project.

Scope

Indicators audited

- CH01 Complaints relative to the size of the landlord.
- CH02 Complaints responded to within Complaint Handling Code timescales.
- NM01 Anti-social behaviour cases relative to the size of the landlord.
- RP01 Homes that do not meet the Decent Homes Standard.
- RP02 Repairs completed within target timescale.
- Responsive Repairs WIP.
- BS01 Gas safety checks.
- BS02 Fire safety checks.
- BS03 Asbestos safety checks.
- BS04 Water safety checks.
- BS05 Lift safety checks.

Periods covered

- Financial year 2025-26

Data audited

- Draft TSM return 2025-26
- All responsive repairs raised, completed and abandoned 2025-26
- ASB and Hate Incident Cases 2025-26
- Asbestos Compliance
- Complaints Stats – 2025-26
- Decent Homes Failures 31 March 2026.
- Electrical Compliance
- Fire Compliance
- Gas Compliance
- Lifts LOLER Inspections
- Property Analysis
- Responsive Repairs Policy
- Water Compliance.xlsx
- ASB Policy
- Complaints Policy

Staff interviewed

- Abel Phiri
- Alan Williams
- Amanda Badman
- Ayodeji Bamidele
- Becci Youlden
- Claire Albrighton
- David Dalrymple
- Kayleigh O'Toole
- Kenny Dalglish
- Nika Dicker
- Sarah Hunter
- Stuart Baxter

Methodology

Approach

- Collate the data
- Based on raise date and priority code, calculate a target date
- Import all data into Power BI for analysis
- Raise queries with staff in interviews
- Rate compliance against all regulatory requirements for the metrics.
- Quantify discrepancies.

Gradings

For each relevant criteria, we have graded on the below four-point scale:

Assurance	Description
None	No assurance, major concerns that are, or likely to be, non-compliant.
Limited	Limited level of assurance, some concerns that may result in non-compliance.
Reasonable	Reasonable level of assurance with only minor concerns of non-compliance.
Full	Full level of assurance, there are no concerns with non-compliance.

Recommendations

Where concerns over compliance are identified, we make recommendations to address them.

Our recommendations are given a priority of: high; medium; or low, depending on the impact.

Executive summary

This audit assesses the quality, completeness and robustness of the data and processes underpinning the Tenant Satisfaction Measures (TSM) Management Information across complaint handling, anti-social behaviour (ASB), building safety, the decent homes standard and responsive repairs.

Interviews highlighted knowledgeable teams who were able to provide valuable operational insight, supported by a strong data function capable of effectively extracting, cleansing, analysing and interpreting underlying data that informs the management information. This capability is evident in the level of understanding displayed during the audit and the ability to respond to queries with clarity and detail.

Key policies related to the TSMs were reviewed against the technical standards. Whilst we found general alignment with the intent of the TSM requirements, we identified some areas that could be strengthened or that they are not fully aligned with the requirements. Clarity around key definitions, such as the distinction between service requests and complaints, and the definition of hate crimes could be improved and increase assurance that definitions align with the wider sector.

The focus of the review involved a detailed desktop analysis, where the underlying data behind all of the TSMs was reviewed. A reliance on manual spreadsheets and the need for offline data manipulation introduced inconsistencies and duplication within key datasets, and data quality issues were evident across multiple TSM areas. Common themes were consistent with off-system record keeping, including missing or invalid dates, duplicate records and inconsistencies in classifications and target timescales. These issues required additional cleansing to derive reportable metrics and, in many cases, led to adjusted figures. While these issues have often been identified and corrected through manual intervention during the audit process, they increased operational effort and unfortunately reduced confidence in the accuracy and repeatability of reporting outputs. However, the recent introduction of Netcall will likely lead to significantly improved data collection for complaint handling and ASB management, and C365 promises more automation and timely metrics for compliance data as processes embed themselves.

Integration between the housing system and C365 led to the creation of manual lookups to link communal components to individual dwellings, and the absence of property or tenancy identifiers on some spreadsheets restricted the ability to confirm that metrics relate to the appropriate stock types. The TSMs must be reported against relevant social housing stock, and so gaps reduce transparency and make independent verification more challenging.

Executive summary

Decent homes reporting is usually a lengthy, data-heavy process as properties are tested against four criteria. Whilst there is a reliance on spreadsheets at SCH, interviewees were knowledgeable and worked in a way that up to date reporting can be completed quickly – with garnering high levels of trust in the data. Whilst we have recommended that a fuller test of criterion D is undertaken in future, we aim not to detract from recognising the impressive approach to decent homes reporting at SCH.

Repairs data was presented in a uniform manner, extracted directly from the housing system, including all contractor jobs. Jobs are categorised as emergency and non-emergency jobs and data-types are consistent. However, differences between policy-defined timescales and those applied in practice introduce inconsistencies. We recommend a data cleanse and consistency in recording target timescales going forward.

In conclusion, SCH is on a positive trajectory, but current reporting remains constrained by data quality issues, fragmented systems and manual calculations. Strengthening system controls and integration and reducing the requirement for manual intervention is critical to enhancing the reliability and auditability of reported metrics. By prioritising these areas, SCH can transition towards a more automated, accurate and efficient reporting regime, supporting improved regulatory compliance.

Code	Measure	Overall Assurance
CH01	Complaints relative to the size of the landlord	Limited
CH02	Complaints responded to within Complaint Handling Code timescales	Limited
NM01	Anti-social behaviour cases relative to the size of the landlord	Reasonable
RP01	Homes that do not meet the Decent Homes Standard	Reasonable
RP02	Repairs completed within target timescale	Limited
BS01	Gas safety checks	Reasonable
BS02	Fire safety checks	Reasonable
BS03	Asbestos safety checks	Reasonable
BS04	Water safety checks	Reasonable
BS05	Lift safety checks	Reasonable

CH01 Complaint Handling

Type	Code	Criteria	Assurance
REQ	CH01-REQ-A	The provider follows the definition of 'complaint' set out in the Housing Ombudsman's Complaint Handling Code	Reasonable
REQ	CH01-REQ-B	Every complaint is allocated to a single reporting year, based on the date the complaint was made	Limited
REQ	CH01-REQ-C	Number of stage one complaints made by tenants in the relevant stock type during the reporting year can be calculated	Limited
REQ	CH01-REQ-D	Number of stage two complaints made by tenants in the relevant stock type during the reporting year can be calculated	Limited
REQ	CH01-REQ-E	Number of dwelling units owned of the relevant stock type at year end can be calculated accurately	Full
E2E	CH01-E2E-F	Complaints data enters the system in an accurate, complete, timely and consistent manner	Limited
E2E	CH01-E2E-G	Complaints data is stored within the system in an accurate, complete, timely and consistent manner	Limited
E2E	CH01-E2E-H	Complaints data is reported in an accurate, complete, timely and consistent manner	Limited

CHO2 Complaint Handling

Type	Code	Criteria	Assurance
REQ	CHO2-REQ-A	The provider follows the definition of 'complaint' and the maximum timescales for responses set out in the Housing Ombudsman's Complaint Handling Code	Reasonable
REQ	CHO2-REQ-B	Every complaint is allocated to a single reporting year, based on the date the complaint was made	Limited
REQ	CHO2-REQ-C	Number of stage one complaints made by tenants in the relevant stock type during the reporting year can be calculated	Limited
REQ	CHO2-REQ-D	Number of stage two complaints made by tenants in the relevant stock type during the reporting year can be calculated	Limited
REQ	CHO2-REQ-E	Number of dwelling units owned of the relevant stock type at year end can be calculated accurately	Full
E2E	CHO2-E2E-F	Complaints data enters the system in an accurate, complete, timely and consistent manner	Limited
E2E	CHO2-E2E-G	Complaints data is stored within the system in an accurate, complete, timely and consistent manner	Limited
E2E	CHO2-E2E-H	Complaints data is reported in an accurate, complete, timely and consistent manner	Limited

Complaint Handling

Complaint Handling Findings

- Solihull Community Housing defines a complaint as "*an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the Landlord its own staff, or those acting on its behalf, affecting an individual resident or group of residents*". This definition aligns with the Housing Ombudsman's Complaint Handling Code, however landlords must also recognise the difference between a service request and a complaint in their complaints policy. A service request is a request from a resident to the landlord requiring action to be taken to put something right. We recommend that service requests are defined and set out in SCH's policy with examples to support understanding to increase alignment with the Code. The maximum target timescales for stage 1 and stage 2 complaints align with the timescales set out in the Complaint Handling Code.

- Complaint data for 2025-26 is recorded in spreadsheets, with adequate fields to derive the reporting year. A new system has recently been introduced (Netcall) which integrates with the housing management system and will simplify analysis. Manual spreadsheet entry has led to extensive data quality issues within original datasets that required improvement, with instances of dates missing, erroneous or in the future, historical complaints appearing, and some duplication of cases. The implementation of Netcall should improve overall case management and reporting for the period 2026-27 and should enable our recommendation to retire spreadsheet-based reporting with metrics derived from this new system directly. We recommend introducing a reporting tool, such as Power BI, that can calculate complaints metrics directly from the Netcall system.

- During the period, contact centre staff would pass complaints to the complaints team via email before being triaged, recorded and acknowledged. Performance information shows that about 6% of complaints are acknowledged after the 5-day target timescale set by the Ombudsman, indicating delays in recording and acknowledging some complaints. The Netcall system will allow call centre staff to record complaints immediately which should help improve the timeliness of complaints data, however, we recommend more visibility in this area to enable performance to align more closely to policy and the Code.

- Property IDs have not been recorded for the 2025-26 period, and so tenure types cannot be audited, however leaseholder and owner occupiers have been manually identified within the spreadsheet. The recording of property or tenancy reference numbers within spreadsheets would increase the usability of the data and enable each tenure type to be looked up against the relevant stock type (LCRA) to increase assurance.

Complaint Handling

CH01 Complaints relative to the size of the landlord

- Extensive cleansing has been completed by SCH due to inconsistencies in stage 1 and 2 complaint handling data. Following these activities, we found that 54.2 complaints were made per 1,000 homes (526/9701*1000).
- We found that 14.0 stage 2 complaints were made per 1,000 homes (136/9701*1000).

CH02 Complaints responded to within Complaint Handling Code timescales

- Landlords must acknowledge complaints within 5-working days of receiving stage 1 complaints or of the stage 2 escalation being received to meet complaint handling timescales. They must also issue a full response to stage 1 complaints within 10 working days, or stage 2 complaints within 20 working days of the complaint being acknowledged. Operational focus has been on responding to complaints within target timescales, but more complaints were handled outside of the maximum target timescales because they were acknowledged late. We also found that stage 1 and 2 complaints had been given inconsistent targets owing to manual calculation. In future, Netcall should calculate the complaint response times dynamically, however a small number of Netcall complaints have also been found to show an incorrect timescale. It is unclear if the issues have arisen due to manual data transfer errors or timescales calculated by the Netcall system. We recommend SCH reviews the methodology for calculating target timescales to ensure compliance with the Code.
- Following cleansing undertaken by SCH, we would recommend reporting 93.3% stage 1 complaints (491/526*100) and 74.3% for stage 2 complaints (101/136*100) were completed within timescale.

Additional Metrics

- Out of the number of stage 1 complaints made by tenants during the reporting year, 393 were responded to within Complaint Handling Code timescales without the use of the 10 day extension, and 98 were responded to with the use of the 10 day extension.
- Out of the number of stage 2 complaints made by tenants during the reporting year, 65 were responded to within Complaint Handling Code timescales without the use of the 10 day extension, and 36 were responded to with the use of the 10 day extension.

NMO1 ASB Cases

Type	Code	Criteria	Assurance
REQ	NMO1-REQ-A	The provider follows the definition of anti-social behaviour as per the Anti-Social Behaviour, Crime and Policing Act 2014	Reasonable
REQ	NMO1-REQ-B	Number of ASB cases opened by or on behalf of the provider during the reporting year can be calculated	Reasonable
REQ	NMO1-REQ-C	Number of ASB cases that involve hate crime opened by or on behalf of the provider during the reporting year	Reasonable
REQ	NMO1-REQ-D	Number of dwelling units owned of the relevant stock type at year end can be calculated	Full
REQ	NMO1-REQ-E	Local authority registered providers must only include ASB cases where they have undertaken activity in their capacity as a registered provider of social housing in response to a report of ASB.	Reasonable
E2E	NMO1-E2E-F	ASB data enters the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	NMO1-E2E-G	ASB data is stored within the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	NMO1-E2E-H	ASB data is reported in an accurate, complete, timely and consistent manner	Reasonable

ASB Cases

NM01 Anti-social behaviour cases relative to the size of the landlord

- Anti-social behaviour (ASB) cases are reported via the contact centre, online, or staff referrals, then triaged before being assigned to patch-based officers. A case is only formally opened once it meets the defined ASB threshold. Not all reported issues are recorded as ASB cases as many enquiries (e.g. low-level complaints or service issues) are redirected or resolved without being logged. As mentioned earlier in this report, we recommend outlining in policy how service requests, such as a first report or allegation of ASB, are recorded, monitored and reviewed regularly.
- Historically, cases were recorded in Open Housing, but Netcall has recently been implemented to improve case handling, efficiency and reporting, not affecting reported volumes, but only how cases are managed. Since September 2025, only cases involving SCH tenants have been handled, as responsibility for private sector cases has transferred back to the council.
- Interviews highlighted that management information for ASB is supported by robust reporting, with dashboards for case volumes, status and trends, enabling effective oversight, performance monitoring and quality assurance. The supplied dataset contains all anti-social behaviour cases opened by SCH during the reporting year (including any ASB cases that involve hate incidents) but included limited details due to sensitivity, therefore no issues were identified within the dataset. There was, however, no identifier against each case and no text relating to the issues being handled and so the audit was unable to confirm that cases were linked to LCRA or LCHO properties only, or that cases met the TSM definition of ASB and hate as set out in policy. We recommend evidencing this in future so that assurance can be improved, ensuring that cases are recorded against the relevant stock type and in SCH's capacity as the registered provider of social housing.
- The ASB policy's definition of anti-social behaviour is as per the Anti-Social Behaviour, Crime and Policing Act 2014 but the definition of hate does not fully align with the TSM definition. Whilst it correctly reflects perception-based reporting, it is broader in scope than the technical requirements as it includes additional protected characteristics including age, sex, pregnancy and maternity, marriage and civil partnerships. As a result, it captures more cases than the TSM definition, creating a risk of inconsistency in reporting. To ensure alignment with TSM requirements, reporting should be narrowed to match the specified characteristics and wording used in the TSM standard.

ASB Cases

- Interviews indicate strong governance, robust quality assurance processes and good awareness within the team in relation to identifying and recording hate-related cases. However, there is an acknowledgement that the seven recorded cases may still reflect a degree of underreporting. In addition, the current approach to theming restricts cases to a single category, meaning the responsibility sits with the case handler to prioritise 'hate' over other concurrent themes, such as vandalism, which may lead to some cases not being captured as hate-related.
- We agree that 31.3 cases of ASB have been opened per 1,000 homes (306/9765*1000) however the 7 cases reported that involve hate incidents were opened (0.7 cases per 1,000 homes) could be slightly inflated due to a different definition of hate crime being used, however might have little material impact on performance.

BSO1 Gas Safety

Type	Code	Criteria	Assurance
REQ	BSO1-REQ-A	The provider ensures that all statutory obligations in relation to carrying out gas safety checks relating to their units are met and appropriately recorded	Full
REQ	BSO1-REQ-B	Number of dwelling units owned for which all required gas safety checks were carried out and recorded as at year end can be calculated accurately	Reasonable
REQ	BSO1-REQ-C	Number of dwelling units owned for which gas safety checks were required to have been carried out as at year end can be calculated accurately	Limited
E2E	BSO1-E2E-D	Gas safety data enters the system in an accurate, complete, timely and consistent manner	Limited
E2E	BSO1-E2E-E	Gas safety data is stored within the system in an accurate, complete, timely and consistent manner	Full
E2E	BSO1-E2E-F	Gas safety data is reported in an accurate, complete, timely and consistent manner	Reasonable

BSO2 Fire Safety Checks

Type	Code	Criteria	Assurance
REQ	BSO2-REQ-A	The provider ensures that all statutory obligations in relation to FRAs are met and appropriately recorded	Reasonable
REQ	BSO2-REQ-B	Number of dwelling units owned within properties that required an FRA for which all required FRAs were carried out and recorded as at year end can be calculated accurately	Reasonable
REQ	BSO2-REQ-C	Number of dwelling units owned within properties for which an FRA was required to have been carried out as at year end can be calculated accurately	Limited
E2E	BSO2-E2E-D	FRA data enters the system in an accurate, complete, timely and consistent manner	Limited
E2E	BSO2-E2E-E	FRA data is stored within the system in an accurate, complete, timely and consistent manner	Full
E2E	BSO2-E2E-F	FRA data is reported in an accurate, complete, timely and consistent manner	Reasonable

BSO3 Asbestos Safety Checks

Type	Code	Criteria	Assurance
REQ	BSO3-REQ-A	The provider ensures that all statutory obligations in relation to asbestos management surveys or re-inspections are met and appropriately recorded	Full
REQ	BSO3-REQ-B	Number of dwelling units owned within properties that required an asbestos management survey or re-inspection for which all required asbestos management surveys or re-inspections were carried out and recorded as at year end.	Limited
REQ	BSO3-REQ-C	Number of dwelling units owned within properties for which an asbestos management survey or re-inspection was required to have been carried out as at year end can be calculated accurately	Reasonable
E2E	BSO3-E2E-D	Asbestos management data enters the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	BSO3-E2E-E	Asbestos management data is stored within the system in an accurate, complete, timely and consistent manner	Limited
E2E	BSO3-E2E-F	Asbestos management data is reported in an accurate, complete, timely and consistent manner	Reasonable

BSO4 Water Safety Checks

Type	Code	Criteria	Assurance
REQ	BSO4-REQ-A	The provider ensures that all statutory obligations in relation to carrying out water safety checks relating to their units are met and appropriately recorded	Reasonable
REQ	BSO4-REQ-B	Number of dwelling units owned for which all required legionella risk assessments (LRAs) were carried out and recorded as at year end can be calculated accurately	Reasonable
REQ	BSO4-REQ-C	Number of dwelling units owned for which an LRA was required to have been carried out as at year end can be calculated accurately	Reasonable
E2E	BSO4-E2E-D	Water safety data enters the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	BSO4-E2E-E	Water safety data is stored within the system in an accurate, complete, timely and consistent manner	Full
E2E	BSO4-E2E-F	Water safety data is reported in an accurate, complete, timely and consistent manner	Reasonable

BSO5 Lift Safety Checks

Type	Code	Criteria	Assurance
REQ	BSO5-REQ-A	The provider ensures that all statutory obligations in relation to carrying out lift safety checks relating to their units are met and appropriately recorded	Full
REQ	BSO5-REQ-B	Number of dwelling units owned within properties with communal passenger lifts for which all Lifting Operations and Lifting Equipment Regulations (LOLER) inspection reports were carried out and recorded as at year end can be calculated accurately	Reasonable
REQ	BSO5-REQ-C	Number of dwelling units owned within properties with communal passenger lifts as at year end can be calculated accurately	Reasonable
REQ	BSO5-REQ-D	The calculation reflects LOLER inspection reports on all communal passenger lifts in properties in which there are one or more relevant dwelling units owned by the provider	Reasonable
E2E	BSO5-E2E-E	Lift safety data enters the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	BSO5-E2E-F	Lift safety data is stored within the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	BSO5-E2E-G	Lift safety data is reported in an accurate, complete, timely and consistent manner	Reasonable

Building Safety

Building Safety Findings

- Compliance data is recorded on C365 and external contractors can update the system using an interface. Potentially, a template can be agreed with contractors to allow C365 to automatically read, validate and update compliance data directly from certificates, removing the need for manual data entry, although many areas still require this to be set up. Overall, feedback around the system is positive and its data is largely trusted.

- For building safety TSMs, checks relating to a dwelling unit include all checks required both inside the dwelling and on any communal or relevant part that serves the dwelling. For example, if a gas safety check is required on a communal boiler that serves a number of relevant dwelling units, providers must ensure that this check is carried out to be able to report compliance for these units. The C365 system does not record which dwelling units are served by a communal component, but this can be derived using the block and property reference numbers. This lookup approach can work when technology such as Power BI can simplify this process, and when all units are served by the same communal component (e.g. gas boiler, lift), but complications could arise with manual calculations or different components feed dwellings within the same block and so a more robust approach would be to configure C365 to mirror the TSM requirements. We found discrepancies on the number of dwellings served by communal components which affected building safety metrics, owing to the complexity of manual reporting.

- Data exported from C365 enables the data team to compile the return. As the dataset is outside of Open Housing, it is not possible to identify relevant social housing stock from the as is data. Therefore, manual intervention is necessary to remove non-social housing stock. Overall improvement to integrate C365 data with that held in Open Housing is important to improve the accuracy of reporting.

BSO1 Gas Safety

- The supplied dataset contained all properties for which gas safety checks were required to have been carried out as at year end. This dataset required manual cleansing and sorting to ensure that reporting included the dwellings that aligned with the stock type requirements.

Building Safety

- Problems with the contractor interface have resulted in intermittent data loss, affecting completions. Interviewees described this as having no effect on safety but creates gaps in the system records, so teams must manually make corrections. The team monitor expected vs completed servicing, run daily macros to check for appointments and have a billing arrangement with the contractor to ensure that inaccuracies in the system are corrected. Put simply, significant manual work is necessary to ensure that errors are corrected and to ensure that C365 is up to date when the issue occurs.
- Our analysis shows that 4 gas safety checks affecting 4 dwellings had overdue gas safety inspections – all of which were due between 19-28 March 2026, against 7,967 dwelling units (99.9% compliance).

BSO2 Fire Safety

- The supplied dataset contained all properties for which an FRA was required to have been carried out as at year end. This dataset required manual cleansing and sorting to ensure that reporting included the dwellings that aligned with the stock type requirements.
- Within the dataset there were 41 FRAs for 121 dwellings labelled as suspended. The Building Safety Team have advised that SCH had suspended checks at those addresses and were now subject to physical site visits to confirm by independent consultants. SCH are awaiting confirmation if a Fire Risk Assessment is required under the Regulatory Reform (Fire Safety) Order. The outcome of these site visits would confirm whether all statutory obligations in relation to FRAs are met. Our audit is reasonably assured that external advice is being sort for this matter.
- Although the Building Safety Manager interviewed was unable to provide detailed insight into Fire Risk Assessments, as their role was project focused, they were able to offer useful perspectives on general approaches to FRAs and how C365 operates. We later clarified that the recording of completed FRAs was completed manually albeit some automation creates remedial actions.
- Our analysis shows that 1 FRA affecting 4 dwellings was overdue (due on 31 March 2026) against 4,321 dwelling units (99.9% compliance).

Building Safety

BSO3 Asbestos

- The supplied dataset contained all properties or which an asbestos management survey or re-inspection was required to have been carried out as at year end. This dataset required manual cleansing and sorting to ensure that reporting included the dwellings that aligned with the stock type requirements.
- When an inspection is completed, an email is sent to the Building Safety team. A portal is checked and details are updated on Open Housing, with a file sent typically sent to C365 to update the records on a monthly basis. The team are in the process of creating a loader to enable checks to be automatically updated on C365.
- The underlying data (from C365) showed that 65 annual checks that serve 356 properties were compliant, but the latest annual check was recorded as over 12 months ago. Interviewees have highlighted that checks had been completed in time and have been recorded on Open Housing but only the due date seemed to have been updated on C365. 20+ of these checks have been reviewed and show inspections in the last 12 months on Open Housing. We recommend updating the dataset to show the complete inspection/reinspection record and ensure data is not duplicated across systems.
- Our analysis shows that all required checks were completed within timescale across 4,226 dwellings (100% compliance).

BSO4 Water Safety Checks

- The supplied dataset contained all properties for which legionella risk assessments (LRA) were required to have been carried out as at year end. This dataset required manual cleansing and sorting to ensure that reporting included the dwellings that aligned with the stock type requirements.
- LRAs relating to a dwelling unit include all LRAs or re-inspections required both within the dwelling and on any communal or other relevant parts of the property that serve the dwelling. The supplied dataset only contains LRAs for communal water supplies, however, individual properties are not included within the dataset. Interviews highlighted that a 10% check of domestic water systems served by a communal system is completed during LRAs and there are plans to introduce some domestic LRAs this year.

Building Safety

- When a risk assessment is completed, an email is sent to the Building Safety team. A portal is checked and details are updated on C365 and Open Housing. There is a slight time lag in updating the system after an LRA due to the contractors QC processes.
- Our analysis shows that no communal LRAs were overdue at 2,106 dwellings at the end of the period (100% compliance).

BSO5 Lift Safety Checks

- The supplied dataset contained all properties with communal passenger lifts as at year end. The dataset only contained properties that were aligned with the stock type requirements, however 2 domestic stairlifts were included, which needed to be manually removed.
- The programme is held on C365, but due to issues with uploading certificates and the lack of a templated, automated reporting process, these compliance records are updated manually.
- Our analysis shows that no passenger lifts serving 1,999 dwellings were overdue at the end of the period (100% compliance)

RP01 Decent Homes

Type	Code	Criteria	Assurance
REQ	RP01-REQ-A	The provider follows the Decent Homes Standard Guidance	Reasonable
REQ	RP01-REQ-B	Number of dwelling units owned to which the Decent Homes Standard applied which failed the Decent Homes Standard at year end can be calculated accurately	Reasonable
REQ	RP01-REQ-C	Number of dwelling units owned to which the Decent Homes Standard applied at year end can be calculated accurately	Full
E2E	RP01-E2E-D	Decent homes data enters the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	RP01-E2E-E	Decent homes data is stored within the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	RP01-E2E-F	Decent homes data is reported in an accurate, complete, timely and consistent manner	Reasonable

Decent Homes

RP01 Homes that do not meet the Decent Homes Standard

- Decent homes standard metrics are generated using insight reports and spreadsheets. The standard consists four criteria:
  - A – It meets the current statutory minimum standard for housing
  - B – It is in a reasonable state of repair
  - C – It has reasonably modern facilities and services
  - D – It provides a reasonable degree of thermal comfort
- The overall approach to reporting component age and condition for the decent homes standard is good, with features within Open Housing utilised to enable reporting. Some functionality linked to criteria A and D is more limited and the calculation process requires off system manipulation. The safety and quality standard requires RPs to have a record of stock condition at an individual property level, based on a physical assessment. Interviewees highlighted that around 90% of stock has been surveyed and surveyors have the ability to add missing components to the system, so data quality constantly improves.
- Criterion A is calculated by identifying those properties with a category 1 (severe) Housing Health and Safety Rating System (HHSRS) hazard. These hazards are identified during stock condition surveys, monitored using a spreadsheet, and a flag in Open Housing is selected to indicate a hazard. Whilst it is typical practice for RPs to identify hazards during stock condition surveys, the process could be strengthened by including HHSRS hazards identified though different workstreams (e.g. severe cases of damp and mould).
- Criterion B and C is calculated using age and condition component records which are kept updated in Open Housing. Stock condition surveyors update the condition of components using a fully-digital end to end process enabling prompt updates to the system and enabling reporting to be completed quickly, relative to many other landlords. Data captured for newly acquired properties and legacy data (i.e. component ages) are largely trusted, however, some manual preparation of data is necessary e.g. removing duplicate components although reports are run monthly to keep on top of the data quality. There is a small gap in components listed on the system (lintels, brickwork and wall finish) but they are visually assessed during surveys and assessed from the lens of HHSRS.

Decent Homes

- Criterion D is calculated using SAP/EPC records. The team receive EPC certificates and record the findings on a spreadsheet and any with a SAP score below 35 are added to Open Housing as a component so that they can be reported as non-decent. Interviews highlight that improvements can be made to properties, but a new survey wouldn't be automatically triggered. Therefore, improvement to internal procedures could help keep energy performance data up to date and connection to online EPC data would reduce reliance on manual recording. Our QA process helped to update the status of three properties, where SAP score were inconsistent with lodged certificate scores.
- The decent homes standard also requires a dwelling to have efficient heating and varying minimum levels of loft insulation and cavity wall insulation but SCH does not factor these into their calculations. For example, dwellings with gas heating require cavity wall insulation or at least 50mm of loft insulation, whereas dwellings with storage heaters required at least 200mm of loft insulation (if there is a loft), and cavity wall insulation (if there are cavity walls that can be insulated effectively). We recommend incorporating this calculation going forward.
- Where an individual tenant does not want work carried out on their home to bring it up to the Decent Homes standard, then the home can remain below the standard until the property is vacated, at which point the necessary work can be undertaken. Exceptions to this are where works are required to maintain the structural integrity of the dwelling or to prevent other components within the dwelling from deteriorating, or where a category 1 hazard must receive early attention. The team have taken steps to strengthen their record keeping and evidence all cases of tenant refusals.

RPO2 Responsive Repairs

Type	Code	Criteria	Assurance
REQ	RPO2-REQ-A	The provider is reporting responsive repairs only (no planned or cyclical works)	Full
REQ	RPO2-REQ-B	The completion time for each responsive repair measures the end-to-end time	Limited
REQ	RPO2-REQ-C	Emergency and non-emergency repairs are classified correctly	Full
REQ	RPO2-REQ-D	All responsive repairs are included, regardless of whether completed by the provider, a contractor or a 3rd party	Reasonable
REQ	RPO2-REQ-E	The provider has set timescales for emergency and non-emergency repairs	Limited
REQ	RPO2-REQ-F	The number of non-emergency responsive repairs completed within the provider's target timescale during the reporting year can be calculated accurately	Limited
REQ	RPO2-REQ-G	The number of non-emergency responsive repairs completed during the reporting year can be calculated accurately	Full
REQ	RPO2-REQ-H	The number of emergency responsive repairs completed within the provider's target timescale during the reporting year can be calculated accurately	Reasonable
REQ	RPO2-REQ-I	The number of emergency responsive repairs completed during the reporting year can be calculated accurately	Full
E2E	RPO2-E2E-J	Responsive repairs data enters the system in an accurate, complete, timely and consistent manner	Limited
E2E	RPO2-E2E-K	Responsive repairs data is stored & managed within the system in an accurate, complete, timely and consistent manner	Reasonable
E2E	RPO2-E2E-L	Responsive repairs data is reported in an accurate, complete, timely and consistent manner	Limited

Responsive Repairs

RPO2 Repairs completed within target timescale

- Responsive repairs are manually logged onto Open Housing when customers call in. Some jobs are completed in house, however a large proportion of jobs are completed by Dodds and other contractors. A contractor interface is available to provide a digital job acquittal process, although it is not fully adopted by smaller contractors. An issue affecting Dodds' interface results in an estimated 20% of their jobs not being acquitted on Open Housing. The team are working with MRI to resolve the issue. Insight reports are the main source for reporting which is satisfactory for the operation, but manual calculation of data is required for TSM reporting.
- All jobs are labelled as emergency or non-emergency. All cyclical or planned works are filtered out of the report by using set parameters which aligns with the TSM standards. Data includes date and time data to confirm when jobs were logged, their initial target given and when the job was completed/abandoned. A spot check found jobs to be accurately recorded as responsive repairs and emergency/non-emergency categories were reflective of nature of the jobs recorded.
- The responsive repairs policy states that emergency repairs will be completed within 24 hours, urgent jobs will be completed within 5 working days, and routine jobs will be completed within 28 days. The dataset labels these types of repairs clearly but one of 19 priority codes ranging from 2 hours to 12 months are associated with each job. Interviews have highlighted that priorities are sometimes SLAs for contractors and so those timescales are used for contract management. Interviewees stated that some priority codes should be cleansed, and some target timescales are genuine but not reflected in the policy. Around three quarters of jobs (excluding abandoned jobs) have a target date that conforms with the policy, and so for the purpose of this audit, results have been compared against the stated and recalculated targets based on the current repairs policy.
- Contractors do not have the ability to abandon jobs directly within the system, as this functionality is not enabled through the interface due to a centrally-made decision. As a result, cancelled jobs must be manually processed by internal teams, which can introduce delays and can lead to temporary inaccuracies in performance reporting and WIP statuses.

Responsive Repairs

- Data quality issues appear within the dataset including jobs completed before they were reported, and a higher proportion of emergencies showing completed on Mondays during 2025-26 (3,206) compared to Saturdays (703) and Sundays (672) – suggesting that jobs may be logged retrospectively but not backdated. We recommend ensuring procedures are in place to backdate emergency repairs if they are recorded retrospectively.

Suggested submission metrics for RP02

- The following TSMs have been calculated using the recorded timescales that have been labelled against each job:

➢ RP02 pt 1 Proportion of **non-emergency** responsive repairs completed within the landlord's target timescale: 20,355/24,173*100 = 84.2%

➢ RP02 pt 2 Proportion of **emergency** responsive repairs completed within the landlord's target timescale: 12,222/13,558*100 = 90.1%

- Please note that the stated figures are subject to change whilst ongoing validation and cleansing is completed by SCH and Dodd Group.

WIP calculation

- In last year's return, 3,461 repairs were reported as incomplete (work in progress) at year end. Formulae within the submission uses this number, adds the number of repairs raised during the year (42,597) and then deducts the number of jobs abandoned and completed during the year (6,307 and 37,731 respectively) to calculate the number of outstanding responsive repairs that had not been completed at year end – which is 2,020 repairs.

- Our current records show that 2,167 repairs were open at the end of the period, meaning a discrepancy of 147 repairs that cannot be accounted for, and so the WIP for last year's return (2024-25) has been recalculated. Colleagues within the data team have now identified 3,620 open repairs as at the end of 31 March 2025 , likely caused by raising repairs retrospectively or changes in reporting parameters. This new figure closes the discrepancy to only 12 repairs. We recommend documenting the reporting process to enable consistent results each time the calculation is made.

Responsive Repairs

- The return states "*We anticipate this response will, in general, be in line with your reporting of Sect 3 Q6d of your 2025 TSM return, accessible through NROSH+ surveys dashboard. Please provide supporting information if this number is materially different to what was supplied last year*". We therefore suggest that the recalculated WIP for 2024-25 is submitted and a supporting document is added to NROSH+ explaining the small difference in WIP size.

Recommendations

Priority	Description
High	High risk of non-compliance with TSM technical requirements, recommend it is addressed urgently.
Medium	Medium level of risk of non-compliance with TSM technical requirements and/or recommend it is addressed before submission.
Low	Low risk of non-compliance, or a best practice for consideration.

Ref	Recommendation	Priority
1	Service requests are defined and set out in SCH's policy with examples to support understanding to increase alignment with the Code.	Low
2	The complaint handling spreadsheets should be retired, and metrics should be derived from the Netcall system.	Medium
3	Complaint metrics should integrate with Open Housing using an effective reporting solution (e.g. Power BI) to ensure consistent reporting aligning to the TSM technical requirements.	Low
4	Increase visibility of complaints acknowledgement performance.	Medium
5	All complaint target timescales should align with the Housing Ombudsman's Complaint Handling Code, and extensions must not exceed the permitted allowance.	High
6	ASB metrics should be derived from the Netcall system and integrate with Open Housing using an effective reporting solution (e.g. Power BI) to ensure that cases involving relevant tenure and stock types can be accurately reported.	Low
7	Ensure that 'hate' can be reported that aligns with the TSM technical requirements: For the purposes of calculating this TSM, a hate incident is any incident which is perceived by the victim or any other person, to be motivated by hostility or prejudice, based on a person's disability or perceived disability; race or perceived race; or religion or perceived religion; or sexual orientation or perceived sexual orientation or transgender identity or perceived transgender identity.	High
8	Enable reporting of multiple ASB themes to ensure that concurrent themes still enables reporting of hate incidents.	Low

Recommendations

Ref	Recommendation	Priority
7	Align all building safety metrics to the TSM technical requirements, so the number of dwelling units owned for which building safety checks were required for communal components is included. Rather than counting one communal component against the single block, the record needs to be recorded against all the individual properties that are supplied by the component. This is to include all tenanted and void LCRA and LCHO units.	Medium
8	Resolve legacy issues affecting the contractor interface preventing the acquittal of contractor works.	Medium
9	Set up template completion documents for all remaining TSM compliance workstreams to enable the C365 system to update automatically.	Low
10	Building safety metrics should integrate with Open Housing using an effective reporting solution (e.g. Power BI) to ensure that relevant properties are accurately reported (i.e. only LCRA and LCHO). No leaseholder properties should be reported.	Medium
11	Confirm whether suspended FRAs should recommence and be included in future reporting.	Medium
12	Avoid duplication of building safety data across Open Housing and C365 to ensure one source of truth.	Low
13	Update C365 to show latest asbestos checks where records are missing.	Low
14	Ensure statutory obligations against legionella testing are met, either through desktop assessments or testing programmes. If SCH are required to test water supplies to individual properties, programme this in with immediate effect and ensure the relevant properties are included within this calculation.	Medium
15	Ensure that only communal passenger lifts for which all Lifting Operations and Lifting Equipment Regulations (LOLER) inspection reports are reported when calculating BS05 Lift Safety Checks. Domestic stairlifts or hoisting equipment would not fall into this category.	Low
16	Appraise options to migrate HHSRS data to an on-system solution and retire spreadsheet.	Low
19	Consider adding missing decent homes standard key components to Open Housing (lintels, brickwork and wall finish).	Low

Recommendations

Ref	Recommendation	Priority
20	Ensure that criterion D of the decent homes standard is calculated in full so that heating type and levels of insulation are also considered.	Medium
21	Integrate EPC data from the *Get energy performance of buildings data service* national database.	Low
22	Devise procedure for reassessing energy performance of properties when improvements are made.	Low
23	Devise reporting method of the decent homes standard to account for all criterions and negate the use of spreadsheets.	Low
24	Responsive repairs policy to be updated to reflect current target timescales.	Medium
25	Review all priority codes held in the system and retire any that are no longer required.	Medium
26	Devise procedures to improve contractor job abandon process to ensure that the WIP does not contain works that are no longer required.	Low
27	A dedicated reporting method should be used (Insight report, Power BI) to enable consistent reporting of responsive repairs performance and supplementary information (e.g. WIP).	Medium
28	Submit a supporting document with the return acknowledging the different in the WIP size for 2024-25.	Medium

Ref	Recommendation	Priority	Action	deadline	Progresss
1	Service requests are defined and set out in SCH's policy with examples to support understanding to increase alignment with the Code.	Low	Update policy	Sep-26	Completed
2	The complaint handling spreadsheets should be retired, and metrics should be derived from the Netcall system.	Medium	Systems running concurrently until end of Q3 whilst product is embedded. Parellel Reporting from both systems to ensure Netcall reporting is accurate and identify any amends needed to the system	Dec-26	In progress and on target
3	Complaint metrics should integrate with Open Housing using an effective reporting solution (e.g. Power BI) to ensure consistent reporting aligning to the TSM technical requirements.	Low	Power BI dashboard in development	Oct-26	In progress and on target
4	Increase visibility of complaints acknowledgement performance.	Medium	Included on dashboard from August 2026	Aug-26	Completed
5	All complaint target timescales should align with the Housing Ombudsman's Complaint Handling Code, and extensions must not exceed the permitted allowance	High	Automated timeframes now calculated through Netcall, rather than a manual calculation being needed. Monthly spotchecks undertaken as part of data validation process.	Jun-26	Completed
6	ASB metrics should be derived from the Netcall system and integrate with Open Housing using an effective reporting solution(e.g. Power BI) to ensure that cases involving relevant tenure and stock types can be accurately reported.	Low	Power BI dashboards to be developed	Dec-26	To be completed
7	Ensure that 'hate' can be reported that aligns with the TSM technical requirements: For the purposes of calculating this TSM, a hate incident is any incident which is perceived by the victim or any other person, to be motivated by hostility or prejudice, based on a person's disability or perceived disability; race or perceived race; or religion or perceived religion; or sexual orientation or perceived sexual orientation or transgender identity or perceived transgender identity.	High	Methodology calculation now excludes any hate crime reports to SCH that is not included in the TSM definition.	Jun-26	Completed
8	Enable reporting of multiple ASB themes to ensure that concurrent themes still enables reporting of hate incidents.	Low	Explore capability through Netcall	Dec-26	To be completed
7	Align all building safety metrics to the TSM technical requirements, so the number of dwelling units owned for which building safety checks were required for communal components is included. Rather than counting one communal component against the single block, the record needs to be recorded against all the individual properties that are supplied by the component. This is to include all tenanted and void LCRA and LCHO units.	Medium	Review currently being undertaken with BI and Building safety teams. Proposal to be brought forward.	Oct-26	In progress and on target

8	Resolve legacy issues affecting the contractor interface preventing the acquittal of contractor works.	Medium	Forms part of the work to improve the interface with Dodd and Open Housing.		In progress and on target. Scoping of work required undertaken with MRI. Awaiting timeframes for consultation.
9	Set up template completion documents for all remaining TSM compliance workstreams to enable the C365 system to update automatically.	Low	Review to be undertaken with BI and Building safety teams. Proposal to be brought forward.	26-Nov	To be completed
10	Building safety metrics should integrate with Open Housing using an effective reporting solution (e.g. Power BI) to ensure that relevant properties are accurately reported (i.e. only LCRA and LCHO). No leaseholder properties should be reported.	Medium	Power query now being used to integrate with Open housing and C365 to ensure relevant properties are accurately reported.	Jul-26	Completed
11	Confirm whether suspended FRAs should recommence and be included in future reporting.	Medium	Determinations are being reviewed by BSM to confirm exclusion or recommencement of suspended FRAs	Oct-26	In progress and on target
12	Avoid duplication of building safety data across Open Housing and C365 to ensure one source of truth.	Low	Power query now being used to integrate with Open housing and C365 to ensure relevant properties are accurately reported	Jul-26	Completed
13	Update C365 to show latest asbestos checks where records are missing.	Low	Related to one asbestos check where information was available, but hadn't been updated in C365. Deadlines for updating of information now in place on a monthly basis.	Jul-26	Completed
14	Ensure statutory obligations against legionella testing are met, either through desktop assessments or testing programmes. If SCH are required to test water supplies to individual properties, programme this in with immediate effect and ensure the relevant properties are included within this calculation.	Medium	New processes and programmes now in place.	Jul-26	Completed
15	Ensure that only communal passenger lifts for which all Lifting Operations and Lifting Equipment Regulations (LOLER) inspection reports are reported when calculating BS05 Lift Safety Checks. Domestic stairlifts or hoisting equipment would not fall into this category.	Low	Power query now being used to integrate with Open housing and C365 to ensure relevant lift assets are accurately reported.	Jul-26	Completed
16	Appraise options to migrate HHSRS data to an on-system solution and retire spreadsheet.	Low	Process now in place to capture HHSRS data on-system. Insight reporting is available to capture and report against this data.	Jul-26	Completed
19	Consider adding missing decent homes standard key components to Open Housing (lintels, brickwork and wall finish).	Low	Review of data and processes to be undertaken	Oct-26	To be completed
20	Ensure that criterion D of the decent homes standard is calculated in full so that heating type and levels of insulation are also considered.	Medium	Review of data and processes to be undertaken	Oct-26	To be completed
21	Integrate EPC data from the *Get energy performance of buildings data service* national database.	Low	Review of data and processes to be undertaken	Oct-26	To be completed
22	Devise procedure for reassessing energy performance of properties when improvements are made.	Low	Review of data and processes to be undertaken	Oct-26	To be completed

23	Devise reporting method of the decent homes standard to account for all criterions and negate the use of spreadsheets.	Low	Review of data and processes to be undertaken	Oct-26	To be completed
24	Responsive repairs policy to be updated to reflect current target timescales.	Medium	A further review of timescales is underway following the introduction of Awaab's Law phase 2.	Sep-26	In progress and on target
25	Review all priority codes held in the system and retire any that are no longer required.	Medium	Initial review undertaken in May 2026. Further review now underway as above.	Sep-26	In progress and on target
26	Devise procedures to improve contractor job abandon process to ensure that the WIP does not contain works that are no longer required	Low	To be developed	Nov-26	To be completed
27	A dedicated reporting method should be used (Insight report, Power BI) to enable consistent reporting of responsive repairs performance and supplementary information (e.g. WIP).	Medium	Insight reports reviewed and in place	Jun-26	Completed
28	Submit a supporting document with the return acknowledging the different in the WIP size for 2024-25.	Medium	Explanation provided within the submission	Jul-26	Completed

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ITEM 6

QUARTERLY MONITORING BOARD

Meeting Date: 25 August 2026

Report Title: Asset Management and Capital Programme Update

Report From: Darren Baggs

Report Author: Darren Baggs

1. Report overview/purpose

This paper provides Quality Management Board (QMB) with a summary of the Asset Management and Capital Programme update that was presented to the Performance & Safety Committee on 11 May 2026. The report provided assurance on delivery of the capital investment programme, progress with stock condition surveys and the proposed capital programme for 2026/27.

2. Recommendations

2.1 QMB are asked to:

(i) Note the contents of this report.

3. Executive Summary

The update covers:

- The 2025/26 Capital Programme outturn, including delivery against planned investment programmes across heating, kitchens and bathrooms, roofing, windows and doors, fire protection, energy efficiency and other planned maintenance activities.
- The proposed 2026/27 Capital Programme, which has been developed using stock condition survey information, repairs intelligence and building safety requirements, with investment prioritised according to health and safety, Decent Homes compliance, energy efficiency and property condition.
- Progress in improving stock condition survey (SCS) coverage, with 77% of homes having received a survey within the previous five years. The report also outlined

actions to reduce the number of "no access" properties through a coordinated corporate approach and additional survey resource.

- Progress towards improving energy efficiency, including plans to strengthen EPC data to support delivery of the EPC Band C target by 2030 and maximise future investment planning.
- Key programme risks, including survey capacity, EPC data availability, delivery of the capital programme and dependencies on funding and Building Safety Regulator approvals, together with mitigating actions to manage these risks.

The report also included the detailed 2026/27 Capital Programme Dashboard, setting out the planned investment programmes, budgets, delivery status and risks across all major capital workstreams.

Performance and Safety Committee

Report title:	Asset Management and Capital Programme Quarterly Update (Revised Version – Issued 8 May 2026)	
Meeting date:	11 May 2026	
Report from:	Andy Duke, Head of Asset Management and Development	
Report author/ lead officer:	Amanda Badman 07880 085972	Capital Investment Manager amandabadman@solihullcommunityhousing.org.uk
Report type:	Confidential ~~Open~~	Reports to SCH committees are not available to the public.
Decision type:	Assurance	~~Approval~~ Information

1. Report overview/purpose

1.1 Quarterly update on the SCH Capital Programme including:

- 2025/26 capital programme outturn
- Proposed Capital Programme for 2026/27
- An update on stock condition survey (SCS) data including an analysis of no access properties

2. Recommendations

2.1 The Committee is asked to:

(1) Note the outturn position on the Capital Programme.
(2) Note the position with respect to stock condition survey data.
(3) Note the Capital Programme proposals for 2026/27.
(4) Note the approach being used to obtain stock data to inform investment decisions.

3. Background/context

3.1 SCH has an annual Capital Programme of works to undertake improvements to the housing stock. The focus of these improvement programmes is:

- To resolve and prevent health and safety issues including Housing Health and Safety Rating System (HHSRS) hazards.
- To maintain the Decent Homes Standard.

- To undertake general improvements to maintain the overall standard of the homes we manage.
- To undertake improvements to the energy efficiency of the homes we manage.
- To improve neighbourhoods.

3.2 August 2024, 51% of the housing stock had received a SCS within the previous five years. These surveys were undertaken through a combination of the in-house survey team and external survey provision.

3.3 Early 2026, capacity within the in-house SCS team was increased to support a five-year rolling programme of surveys. (see Appendix 1).

3.4 As a result of a high volume of SCSs completed in 2021, there is a high number of surveys also required in 2026/27. To address this situation, we have agreed additional resource though Pennington Choices.

4. Energy Efficiency and EPCs

4.1 The Regulator of Social Housing Consumer Standards Code of Practice recommends landlords use data from EPCs to provide a rounded view of the condition of their homes. Up-to-date EPC data will also help inform the requirement for achieving EPC band C by 2030 (or having a valid exemption in place).

4.2 Current legal requirement is for a valid EPC to be in place when a property is let and that a property should have an EPC band E or higher to meet the Decent Homes Standard.

4.3 Current data shows 75% of the stock as being in EPC band C or above. This is based upon 54% current EPCs and 46% expired EPCs or an RdSAP calculation.

4.4 EPCs are valid for a period of 10 years, and we have examples where EPCs relating to our properties contain out of date information (i.e. we have completed works to improve properties but not then undertaken a new EPC or EPC assessors have made assumptions e.g. no cavity when there is a cavity with insulation). To improve this position and noting a revised methodology of calculating EPCs from June 2025, we are reviewing options for implementing a programme of EPCs and potential incorporation with SCSs. This EPC data will then provide SCH with essential information regarding investment needs ahead of the EPC band C target by 2030.

5. Current Stock Survey Position and Review of Proposals to Address No Access Properties

5.1 As at end March 2026, 77% of the stock benefitted from a SCS within the last 5 years. Of the remaining 23%, around half currently have no record of a SCS and are being prioritised. Looking at the five-year survey programme, the no access properties are spread across all survey years, as set out in the below table.

		Number of No Access	Total Stock in Category	% Per Group NA
2026/2027	**Group 1**	162	1979	**8%**
2027/2028	**Group 2**	289	1928	**15%**
2028/2029	**Group 3**	254	1962	**13%**
2029/2030	**Group 4**	263	1942	**14%**
2030/2031	**Group 5**	225	1909	**12%**
Total		**1193**	9720	12%

5.2 Only a small number of residents have refused a survey.

5.3 There aren't any easily identifiable archetype property groups, or other demographics. When considering the age of the properties, the no access properties are fairly evenly spread; aside of the period 2000-2014 which may be higher due to the properties being newer and potentially the residents not feeling the need for a survey due to the condition of their homes still being satisfactory. See below table for the full breakdown:

Year Built	No Access	Total of Stock In Category	% of No Access
2015+	4	125	**3%**
2000-2014	27	116	**23%**
1980-1999	45	643	**7%**
1960-1979	945	7415	**13%**
1940-1959	144	1183	**12%**
Pre 1940	28	238	**12%**
	1193	9720	12%

5.4 All 'no access' properties are being prioritised, through a targeted and wider corporate approach via the newly established 'no access' team. The process will include reviewing customer profiles, looking at trends and considering whether there are any particular risks we need to overcome, as well as trying to facilitate access alongside other visits required to achieve compliance and customer safety or complete reported repairs.

6. Capital Programme Outturns 2025/26

6.1 Stock investment needs are primarily identified through SCSs. In addition to SCSs, data feeding into the Capital Programme also comes from the following sources.

- Repeatedly reported repairs issues from the Property Services Team, including those creating revenue pressures.
- Issues raised by the Building Safety Team following compliance checks and safety inspections.
- Requirements for energy efficiency improvements through EPCs and retrofit surveys.
- Resident feedback considered through the VIP and SCHape panels, complaints, and customer satisfaction surveys.

6.2 All stock data is then reviewed and Capital Programme priorities developed. The 2025/26 Capital Programme delivery key outturns have been set out in Appendix 2.

7. Future Plans for 2026/27 and Beyond

7.1 The approved 2026/27 Capital and Planned Works Programme is included in Appendix 3. This work programme has been developed from stock survey data and repairs issues, prioritised to budget constraints on basis of health and safety, decent homes, energy efficiency and other property improvement needs. Flexibility within the programme delivery will accommodate urgent issues arising during the year.

7.2 Review of SCS programme and resource to incorporate communal areas of flatted accommodation. Whilst these areas are surveyed for other purposes, this doesn't include a robust collection of stock survey data for Capital Programme planning purposes and hence is an area for development of future survey programmes.

7.3 Review of EPC data and resourcing to facilitate work programmes to achieve EPC band C by 2030.

8. Supporting the SCH Delivery Plan

8.1 The Capital Programme is developed to support the business needs as set out in the SCH Delivery Plan 2026-2031.

9. Voice of the Customer

9.1 Customer consultation and engagement will be introduced throughout the delivery of all work streams and wider programme of capital improvements.

10. Financial implications

10.1 Budgets relating to the 2026/27 Capital Programme have been approved by SMBC Cabinet. Budget monitoring is reported to ELT, Board and SMBC throughout the year.

11. Legal implications

11.1 Nothing specific relating to this report.

12. Risk implications

12.1 The following table sets out a summary of the key programme areas which pose risk either due to deliverability, staff resourcing or budget restrictions.

Programme Area	**Risk / Issue**	**Proposed Mitigation**	**Rectification Timescale**	**Residual Risk** (High / Medium / Low)
Stock Condition Surveys	During transition to the 5-year rolling programme of surveys, there will be a significant drop in % of homes surveyed by end March 2027.	Undertake a short-term contract arrangement, direct award to Pennington Choices to complete a batch of surveys. Budget available from balance of 2024/25 budget.	Target completion Sept 2026	Low
	Insufficient capacity to survey communal areas.	Review staffing levels within the Team to facilitate the additional requirements.	Subject to budget approval	Medium
Energy Efficiency	Absence of EPC data for all properties hinders ability to forecast investment needs to achieve EPC band C target by 2030.	EPCs to be completed alongside enhanced programme of stock condition surveys (surveying capacity within the team to be reviewed).	Subject to budget approval	Medium
		Enhanced programme of EPCs to be facilitated to provide required EPC data in time to plan and undertake works to achieve EPC band C by 2030.	Subject to budget approval	High
	Flats over garages – many cannot achieve EPC band C without insulating the garage ceiling	Pilot project included in the 2026/27 programme to review potential solutions to these properties.	Review Q4 2026/27 following pilot project	Medium

Programme Area	Risk / Issue	Proposed Mitigation	Rectification Timescale	Residual Risk (High / Medium / Low)
Capital Programme Delivery	Failure to deliver capital programme	Delivery of work streams through the SPMP contract will negate procurement delays. Rolling programmes allowing continuation and impact associated with onboarding/mobilisation. Regular monitoring to address shortfalls and resolve issues. Where delivery issues arise, discuss with Finance through monthly meetings to allow for potential slippage to be used for other schemes or moved into the following financial year.	Monitor progress throughout the year	Low

13. Equalities implications

13.1 Nothing specific relating to this report.

14. Data

14.1 Data sources: Management information from Open Housing.

15. List of appendices

Appendix 1 – Stock Survey Programme.
Appendix 2 – Capital Programme Outturns 2025/26
Appendix 3 – Proposed 2026/27 Capital Programme

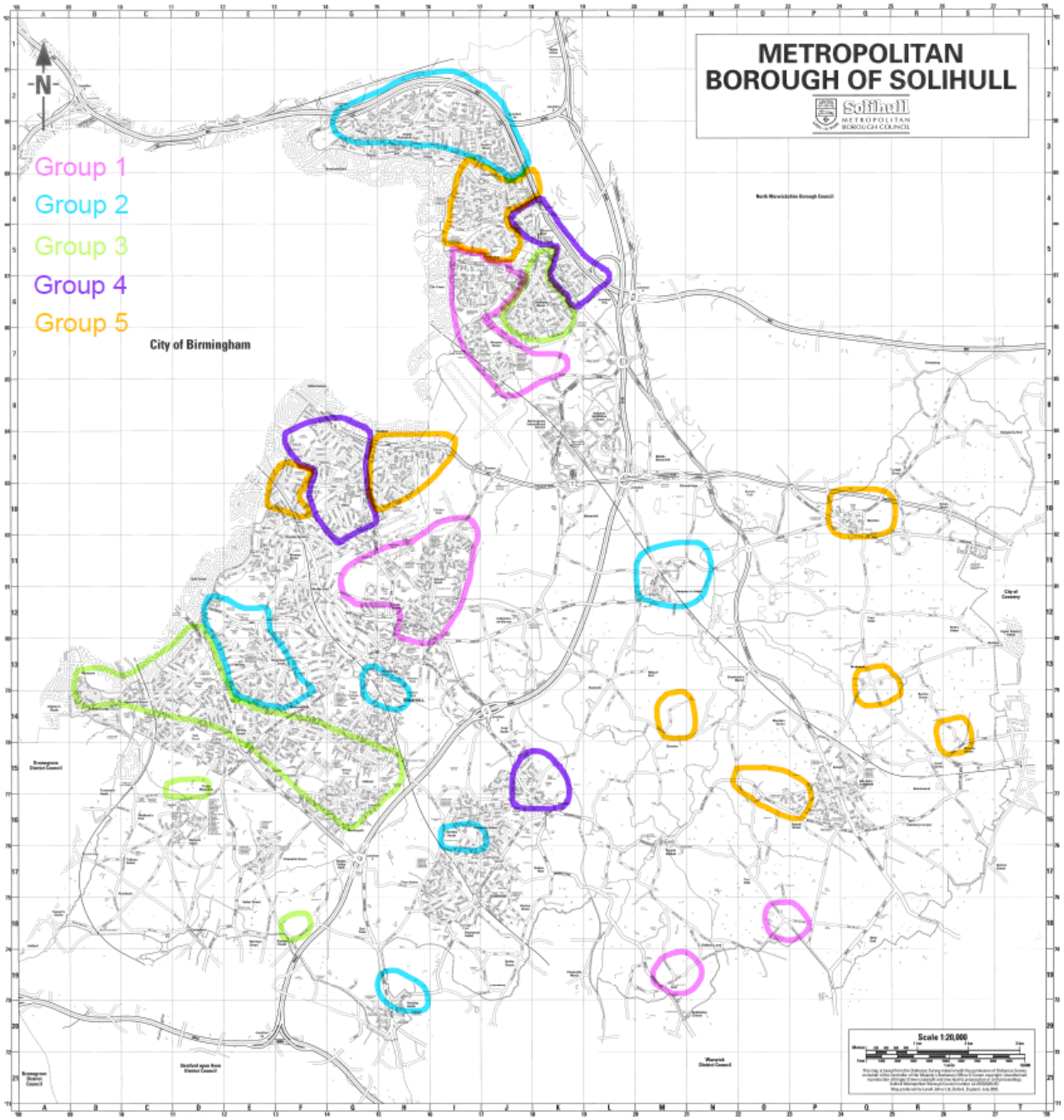
16. Background documents

16.1 None.

Appendix 1 – Stock Condition Survey Programme

Group	Programme Year	Number of Properties in the Group*
Group 1	**2026/27**	1,981
Group 2	**2027/28**	1,931
Group 3	**2028/29**	1,967
Group 4	**2029/30**	1,952
Group 5	**2030/31**	1,916
	Totals	**9,747**

Note: Property numbers based upon September 2025 stock analysis



Appendix 2 - Capital Programme Outturns 2025/26

Programme	Budget £	Targets Numbers	Actual Numbers	Notes
Central Heating Upgrades	2,000,000	450	721	Focus on boiler only upgrades to help maximise reduction in Revenue expenditure, hence completions significantly higher than start of year target. Original budget increased to accommodate additional works.
Communal Decorating	166,660	48	47	Revenue programme spend to improve communal areas through redecoration. Last block finished off at start of 2026/27.
Cyclical Maintenance	1,000,000	350	305	Includes external improvement works to houses and bungalows including fencing, slabbing, paths, sheds, outhouses, porches, steps. Difficult to assess actual costs in advance. Balance of properties will be completed 2026/27.
Energy Efficiency Improvements	Delivery over 3 years – budget carried forward to 2026/27 and 2027/28 when project will be delivered	245	-	Warm Homes: Social Housing Fund: 3-year agreement £1.86m grant funding to improve 245 properties. Working with SMBC re WH:LG for 22 leaseholders at Elmdon Park flats. Stage 1 and Stage 2 applications approved by West Midlands Combined Authority (WMCA). Delivery commencing 2026/27. Planned works: EPC D and below improved to EPC C on place-based approach. 4 high-rise blocks – flats to have upgraded, more energy efficient, electric heating and hot water systems (circa 160 properties). Remainder project external building fabric improvements (subject to EPC). Delivery through the Dodd Group SPMP contract.
Environmental & Estate works	20,000	n/a	n/a	Neighbourhood improvements (small scale). This year's work included improvements around Merton House and overgrown pathways to rear alleyways off Guernsey Drive, Chelmsley Wood. 2025/26 programme completed.
Garage Strategy	120,000	40	-	Budget to address urgent garage works as many garages in blocks are unutilised, and beyond end of life. 2 unutilised garage blocks identified as in very poor condition, past end of life, and beyond repair and are to be demolished – work in progress.

Programme	Budget £	Targets Numbers	Actual Numbers	Notes
Kitchens and Bathrooms	1,100,000	190	235	Priority for decent homes fails - kitchen and bathroom in poor condition and other poor condition kitchens and bathrooms either identified through stock condition surveys or referrals from the Repairs Team. 2026/27 programme delivery via Dodd Group SPMP contract.
Low Rise Envelope programme	1,200,000	16	17	Essential improvements to the communal areas of the low-rise blocks. 2025/26 programme completed.
Roofing Works - Flat	450,000	3	82	3 communal block flat roof renewals plus general small flat roofing works progressing as and when identified
Roofing Works - Pitch	600,000	85	84	Priority for decent homes fails, roof replacement from stock condition surveys and full roof re-tiling and associated works from Repairs Team.
Kingshurst House bridge	£105k	1	1	Kingshurst House bridge replacement works completed.
Tarmac & Resurfacing works	150,000	n/a	n/a	Tarmac projects included: - footpaths on Highfield, Meriden; - resurfacing in front of mews blocks at Bracken Croft, Cornfield Croft & Clover Avenue
Window and Door Replacements	800,000	70	235	Focus on poor windows and decent homes fails identified from stock condition surveys and referrals from the Repairs Team. Original target reflected whole house windows and doors. Numbers increased due to isolated doors being included. Budget increased during the year due to scale of repairs referrals.
Biomass Plant Replacement - Plant Rooms, Pipework, Internal radiator valves in flats	910,000	3 plant rooms 8 blocks	n/a	Balance project completion from 2024/25 – grant funding to support project. Plantroom 1 - Bangor, Keele, Westham & Wedgewood Plantroom 2 - Woodbrooke, Cheshunt & Dillington Plantroom 3 - Newnham
High Rise Pipework (HNES)	2,123,000	n/a	n/a	Linked to above
CCTV	220,000	tba		Highrise CCTV upgrade under review. Delivery will be deferred to 2026/27.
Electrical improvement works	200,000	tba	91	Electrical improvements following EICRs and void electrical rewires / upgrades as required. Budget requirement reviewed and budget reduced from £500k to £200k, balance budget used to fund fire door improvement programme works.

Programme	Budget £	Targets Numbers	Actual Numbers	Notes
Fire Protection	2,450,000	tba	tba	Passive fire works + fire doors and building safety works, total estimated cost £2.45m. Works progressing well. Completion anticipated in 2026/27
Spandrel Replacement Project Phase 2a	432,000			Total estimated cost £1.4m, however only £432k forecast this financial year. BSR Gateway 2 application submitted, finances will be reprofiled upon GW2 determination.
Spandrel Replacement Project Phase 2b	6,500,000			Balance project completion from 2024/25 SMBC Cabinet approved increased budget in Sept 25, reprofile upon receipt of GW2 approval, expected Q1/2 26/27

Appendix 3

2026-27 Capital Programme Dashboard

Updated: 17/03/2026

Cost code	Programme	Lead HOS	Target			Gateways		Progress to Date			RAG Rating			Notes
			Draft Budget £	Numbers	Av. Cost per Unit	Gateway Approved	Next Gateway	Comple-tions	Work in Progress	Total Units to Date	Delivery	Finance	Risk	
542142	Central Heating Upgrades (incl. gas, warm air, back boiler, & storage heater conversions)	AD	2,000,000	380	5,263	1	4	-	-	-	On Track	On Track	No significant project risks identified	Adequate heating is a primary requirement for decent homes. Data for this budget was reviewed in 2025/26 whereby an annual £2m budget was identified as necessary to meet obligations. Data for the programme is based upon old boilers and boiler breakdowns where beyond economical repair. Also includes full heating replacements, where identified as necessary following survey.
New Code	Central Heating Upgrade - Ipswich House	AD	100,000	n/a	n/a	1	3	n/a	n/a	n/a	Detailed design proposal required	On Track	Boiler failure may require project to proceed before optimum solution developed	Data reported from Building Safety Team regarding the need to replace the boilers to the communal heating system. Residents have also complained about overheating in communal areas, so this will be reviewed alongside boiler replacement as there may be scope to improve controls and reduce energy consumption and running costs.
531200	Communal Decorating (Revenue spend but delivered by Capital Team so reported on this dashboard)	AD	166,660	48	3,472	1	4	-	-	-	On Track	On Track	No significant project risks identified	Works progressing well on site, on target for completion by end of financial year. Current contract arrangement ends March 2026. Next year's work will be delivered through the SPMP contract.
542099	Cyclical Maintenance	AD	1,000,000	325	3,077	1	4	-	-	-	On Track	On Track	No significant project risks identified	General improvements to maintain stock and reduce health and safety risks identified. Works to individual properties includes fencing, slabbing, paths, sheds, outhouses, porches, steps.
542167	Energy Efficiency Improvements	AD	1,700,000	262	6,489	1	3	-	-	-	On Track	2-year programme - budget to include grant funding from WMCA	Tenant refusals may impact delivery although additional properties identified. Design solutions subject to retrofit assessments	Majority of the funding is to provide co-funding to the 245 properties identified for energy efficiency improvements through the Warm Homes Social Housing grant funding. + energy efficiency improvements to 17 properties which fail decent homes due to EPC levels. Warm Homes: Social Housing Fund: 3-year agreement £1.86m grant funding to improve 245 properties. Working with SMBC re WH:LG for 22 leaseholders at Elmdon Park flats and linking into Birmingham University Air Quality Monitoring project. Stage 1 application approved. Stage 2 submission submitted to WMCA on 23.1.2026. Proposal: 3x areas focus on external building fabric - Piggots Croft area (2026), Shirley Park area (2026 & 2027), Elmdon Park area (2027). Upgrading electric heating and hot water - Balliol House, Linacre House, Oriel House & Greyfriars House.
542167	Energy Efficiency Improvements - High-Rise Blocks	AD	150,000	180	833	1	4	-	-	-	Preferred delivery through Balcony project	On Track	Project start may be delayed due to balcony project delays	Programme to improve energy efficiency of bedroom walls in 5x high rise blocks where the bedroom wall backs onto the unheated stairwell - damp mould and condensation issue highlighted through the repairs team as an identified archetype issue (180 flats).
542102	Environmental & Estate works	AD	20,000	n/a	n/a	1	4	-	-	-	Actual Works to be agreed	On Track	No significant project risks identified	Identified small scale neighbourhood improvements reported through Estates Teams. Although small scale, the output generally makes a localised impact to improve the local area.
542056	Environmental - Cesspool & Drainage (capitalised from day to day repairs)	AD	50,000	n/a	n/a	n/a	n/a	-	-	-	Ad hoc	Currently within scope	Reactive based upon demand	Replacement drainage runs and manholes where beyond end of life. Requirements identified from Repairs data.
542149	Garage Strategy	AD	120,000	n/a	n/a	1	3	-	-	-	Actual garages to be agreed	On Track	Only scope to address most urgent garages	Data from inspections, surveys and Repairs Teams. Budget to cover essential works due to a significant health and safety risk however many garages require investment beyond the scope of this budget. Solution is either: - major repairs for garages still in use, or - demolition where the structure is beyond end of life and unutilised.
New Code	Garage Flats Pilot Project	AD	50,000	n/a	n/a	1	2	n/a	n/a	n/a	Detailed design proposal required	On Track	Potential time delays for design solution	Issue raised from Building Safety with regard access to communal electricity supplies in flats above garages. Pilot solution being developed.
542157	Kitchen and Bathroom Upgrades	AD	1,850,000	300	6,167	1	4	-	-	-	On Track	On Track	No significant project risks identified	Primary focus is decent homes fails, however all kitchen and bathroom component fails are a priority. Data is from stock condition surveys and referrals from the Repairs Team where a full kitchen or bathroom upgrade has been identified. Programme focus also includes a review of the electrical installation, kitchen and bathroom ventilation, and damp, mould and condensation issues. By reviewing all elements at the same time reduces disruption for the residents and helps resolve and prevent damp, mould and condensation issues.

Draft 2026-27 Capital Programme Dashboard

Cost code	Programme	Lead HOS	Target			Gateways		Progress to Date			RAG Rating			Notes
			Draft Budget £	Numbers	Av. Cost per Unit	Gateway Approved	Next Gateway	Comple-tions	Work in Progress	Total Units to Date	Delivery	Finance	Risk	
542146	Low Rise Envelope programme	AD	1,200,000	15	80,000	1	4	-	-	-	On Track	On Track	No significant project risks identified	Essential improvements to the communal areas of the low-rise blocks as identified through survey data and referrals from Building Safety Team.
542053	Roofing Works - Flat	AD	150,000	100	1,500	1	4	-	-	-	Ad hoc	Currently within scope	Reactive based upon demand	Replacement of small flat roof areas to porches, outhouses and garage, referred to Capital Team by the Repairs Team, highlighted from issues reported by residents relating to leaking flat roofs. No large flat roofs to blocks identifed for replacement this year.
542053	Flat roofing (capitalised from day to day repairs)	AD	included above	100		n/a	n/a	-	-	-	Ad hoc	Currently within scope	Reactive based upon demand	
542049	Roofing Works - Pitch	AD	1,200,000	120	10,000	1	4	-	-	-	On Track	On Track	No significant project risks identified	Data from stock condition surveys, component lifecycles and referrals from the Repairs Team where repairs issues also exist. Focus on decent homes fails and potential fails plus an archetype issue with box gutters which form part of the pitched roof on many 1960's terrace blocks. Workstream also addresses issues to loft insulation, rainwater goods, fascias, soffits and chimneys.
542036	Structural Works	AD	310,000	n/a	n/a	1	4	-	-	-	Ad hoc	On Track	Budget allocation allows resolution of general structural issues	General allowance for floor heave, underpinning and lintel issues Slater Road loft conversion - £142k current cost for Slater Road (50% contribution from SMBC), total budget including all costs, plus cost to fully replace the roof and windows, decant removal and utility bills plus carpet and curtains for decant, including cooker etc +£20k
542055	Capitalised Damp, Mould and Condensation Works	AD	-	n/a	n/a	n/a	n/a	-	-	-	Ad hoc	Ad hoc	Reactive based upon demand	Most improvement works to rectify damp, mould and condensation issues are Revenue costs so no budget allocated, however the cost code exists so that the impact can be monitored where relevant.
542145	Tarmac & Resurfacing works	AD	150,000	n/a	n/a	1	3	-	-	-	Actual Works to be agreed	On Track	No significant project risks identified	Essential resurfacing of 2-3 areas of tarmac, as identified from Repairs data and Neighbourhoods teams. Resolves health and safety issues with respect to slips, trips and falls.
542052	Window Replacements	AD	500,000	70	7,143	1	4	-	-	-	On Track	On Track	No significant project risks identified	Requirement for window and external door replacements identified through stock condition surveys and referrals from Repairs Team. Identified works include decent homes failures properties where windows in poor condition or beyond end of life and deemed likely to fail.
Building Safety Works														
542xxx	Bin Chute Pilot Project - replacement / alternative refuse provision + decommissioning existing	AP	50,000	n/a	n/a	1	2	n/a	n/a	n/a	Pilot project - design proposal to be developed	On Track	Potential time delays for design solution	Issues reported from Building Safety Team with respect existing bin stores across the high-rise blocks. This budget is to fund a pilot project at Bedford House.
542037	Biomass Plant Phase 1	AP	150,000	n/a	n/a	3	4	474	62	n/a	Ad hoc	On Track	Access not facilitated and works remain outstanding	Biomass Phase 1 - no access balance properties for HIU replacement / upgrade works
542038	Biomass Phase 2 - High Rise Pipework (HNES)	AD	4,400,000	3 plant rooms 8 blocks		0	2	-	-	-	Progress dependent on funding	Progress dependent on funding	Progress dependent on funding	Awaiting outcome of HNES bid for Biomass Phase 2 pipework replacement.
542034	CCTV	AP	200,000	n/a	n/a	1	4	-	-	-	Actual Works to be agreed	On Track	No significant project risks identified	CCTV upgrade under review. Delivery will be deferred to 2026/27. Original budget £100k
542153	Electrical improvement works	AP	250,000	n/a	n/a	1	4	-	-	-	Ad hoc	n/a	n/a	Electrical improvements following EICR's and void electrical rewires / upgrades as required. Not a quantified programme of work, so no progress to measure.
542174	Electrical Sub-Mains	AD	600,000	3	200,000	1	2	-	-	-	Detailed design proposal required	On Track	Potential time delays for design solution and BSR approval	Replace/ refurbishment of electrical infrastructure and associated works to 2 high-rise blocks. Identified through the EICR.
542175	Fire Protection	AP	520,000	tba	n/a	1	4	tba	tba	tba	In progress	In progress	Higher risk due to potential access issues	Passive fire works & capital replacement/ refurbishment of fire doors identified by Building Safety Team through fire risk assessment recommendations and actions. Low rise blocks still to do. Completion anticipated Q1/Q2 so circa £600k slippage to be added to 2026/27 budget (once value confirmed)
542033	Lift Replacements / Refurbishments	AP	20,000	n/a	n/a	1	n/a	tba	tba	tba	n/a	n/a	n/a	Estimate of potential capital improvement identified as a result of lift inspections, servicing and breakdowns. No lift replacements anticipated within next 12 months.
542079	Spandrel Replacement and Balconies Project Phase 2b	AD	8,404,000	n/a	n/a	1	3	-	-	0	Agreed start date pending BSR approval	On Track	Project progression subject to BSR approval	Project design progressing through Building Safety Regulator Gateway process. Kingshurst 5 and Redwood for balconies. Spandrels and Louvres - Kingsgate, Fircroft, Avoncroft, Woodbrook, Dillington

Draft 2026-27 Capital Programme Dashboard

Cost code	Programme	Lead HOS	Target			Gateways		Progress to Date			RAG Rating			Notes
			Draft Budget £	Numbers	Av. Cost per Unit	Gateway Approved	Next Gateway	Comple-tions	Work in Progress	Total Units to Date	Delivery	Finance	Risk	
542080	Sprinklers	AD	26,000	5	5,200	1	4	-	-	0	Ad hoc	On Track	Risk low due to majority of properties already benefitting from sprinklers	Nominal budget to pick up balance of sprinkler 'no access' properties (57 properties still outstanding)
			16,906,660											

Other Programmes

531115	Pennington's Stock Condition Surveys & EPC's	AD	130,000	2,000	55	n/a	n/a	-	-	-	Reviewing	Current underspend to be retained to support required programme of surveys in 2025/27	Not to increase the number of surveys in 2026/27 will cause a reduction in the current level of surveys achieved.	

RAG Rating Key

	Delivery		Risk
Complete	Project complete	Project co	Project complete
On Track	In progress and on track	On track	Only low project risks
Reviewing	Under review / Some slippage but mitigations	Some issu	Medium project risks
Off Target	Off target / Slippage but no mitigations	Budget iss	High project risks
Not Started	Not Started / Timescale to be Agreed	No budge	Risks not yet assessed
n/a	Outside scope of this dashboard	Outside d	Outside dashboard scope

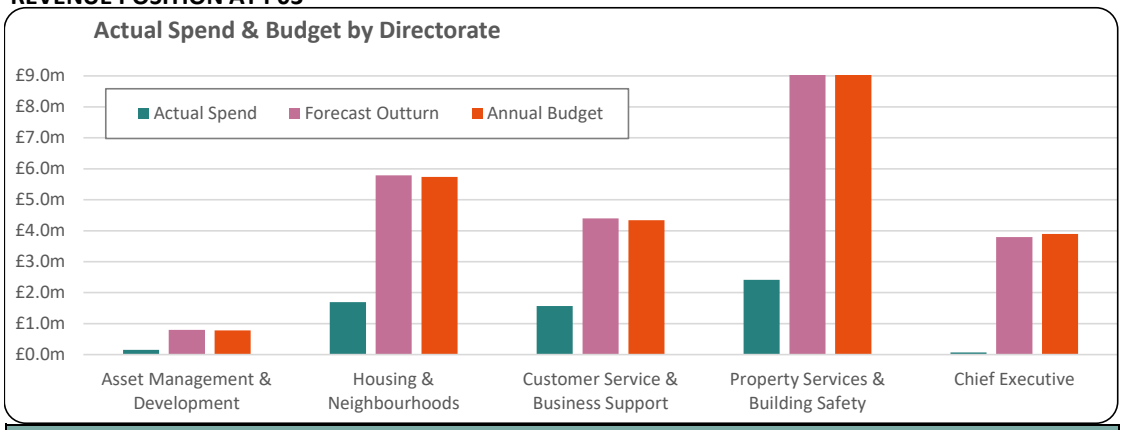
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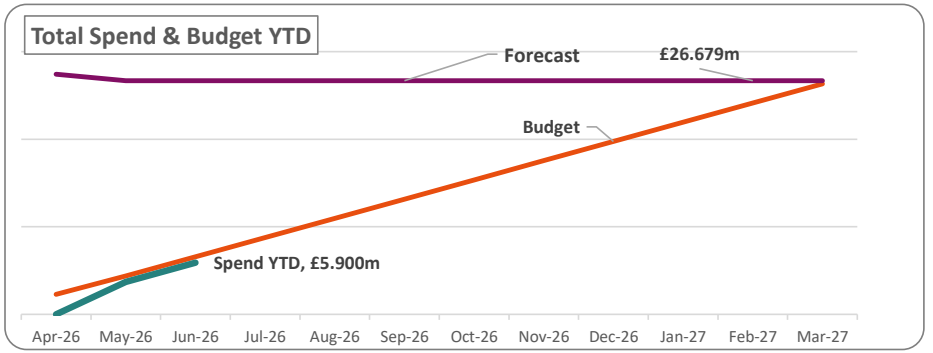
FINANCIAL DASHBOARD AS AT JUNE 2026

ITEM 7

Solihull Community Housing
Shaping our neighbourhoods

REVENUE POSITION AT P03





Service Area	Annual Budget	Actual Spend	Forecast Outturn	Forecast Variance
	£000	£000	£000	£000
Asset Management & Development	784	153	800	16
Housing & Neighbourhoods	5,735	1,693	5,788	53
Customer Service & Business Support	4,343	1,565	4,398	55
Property Services & Building Safety	11,559	2,418	11,899	340
Chief Executive	3,899	71	3,794	(105)
Revenue sub-total	**26,320**	**5,900**	**26,679**	**359**
Revenue Management fee	(26,339)	(6,600)	(26,339)	-
Contributions to/ (from) SCH Reserves	332	-	332	-
Contributions to/ (from) HRA Reserves	(313)	-	(313)	-
Net Revenue Position	**-**	**(700)**	**359**	**359**

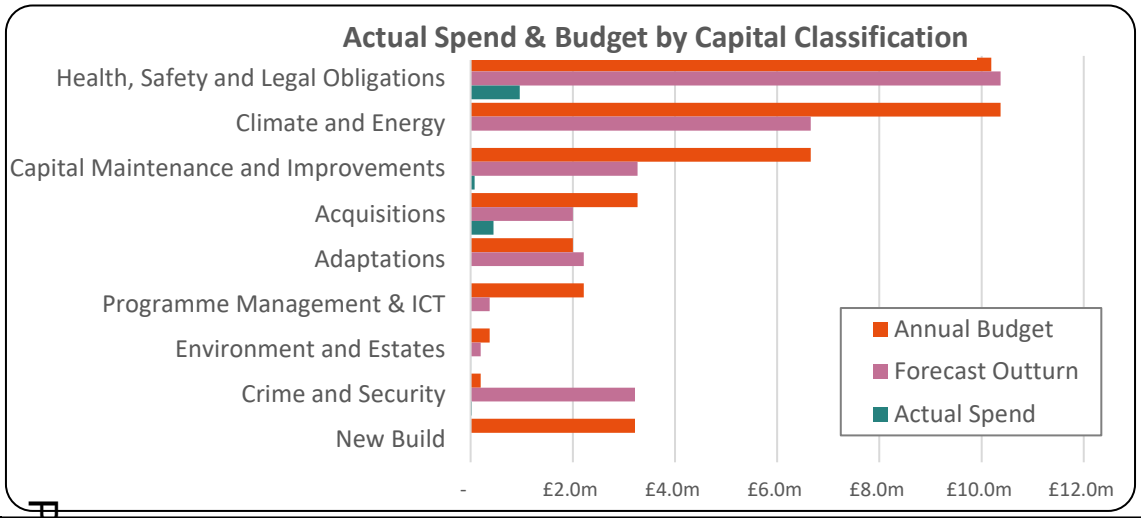
Variance Split Between		
Payroll	Non-Pay	Income
£000	£000	£000
-	16	-
(59)	124	(12)
(64)	83	36
(20)	360	-
-	(105)	-
(143)	**478**	**24**
-	-	-
-	-	-
-	-	-
(143)	**478**	**24**

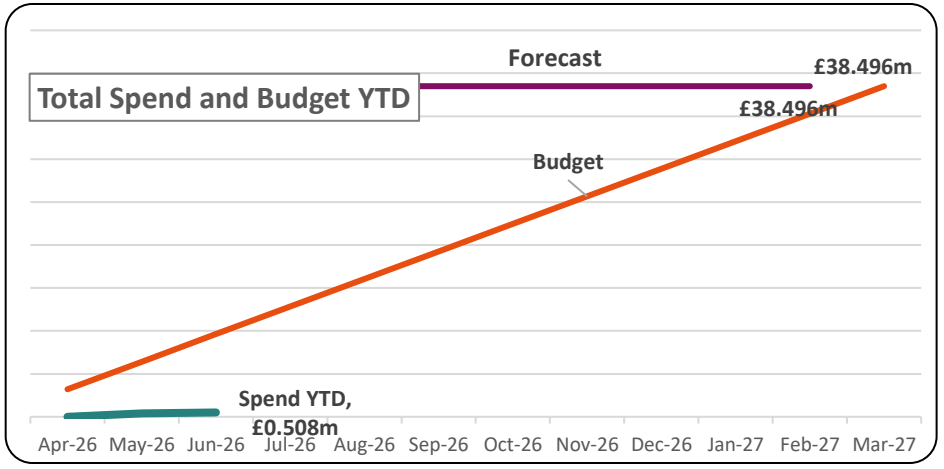
Forecast Variance P02	Movement from Forecast
£000	£000
-	16
-	53
-	55
-	340
-	(105)
-	**359**
-	-
-	-
-	-
-	**359**

Service Area	Variance £000	Explanation of Variances
Asset Management	16	+£16,000 Savings target rated RED
Housing & Neighbourhoods	53	+£83,000 Communal cleaning follows addition of ex-GNA and Mews blocks to the contract (income received into HRA to offset), +£48,000 Savings targets rated RED and +£22,000 utility costs in Temporary Accommodation. Part offset by (£59,000) payroll underspends, (£39,000) additional RTB Administration income based on 40x sales in year and (£2,000) Other.
Customer Service Transformation & Business Support	55	+£29,000 IT Licences, +£18,000 Wellbeing non-pay and income position and +£17,000 Savings target rated RED. Part offset by (£9,000) other minor net variances.
Chief Executive	(105)	(£55,000) balance of uncommitted budget available to offset pressures, (£50,000) Support Services SLA initial estimate (awaiting confirmation from Council).
Building Safety & Compliance	340	+£178,000 Electrical and +£176,000 Gas day to day repairs, forecast in line with 2025/26 activity levels. Part offset by (£14,000) other minor variances.
Revenue sub-total	**359**	
Management fee/ Use of Reserves	-	no variance
Net Revenue Position	**359**	

FINANCIAL DASHBOARD AS AT JUNE 2026

CAPITAL POSITION AT P03





Capital Classification	Annual Budget £000	Actual Spend £000	Forecast Outturn £000	Forecast Variance £000	Explanation of Significant Variances
Health, Safety and Legal Obligations	10,190	(385)	10,190	-	YTD credit position from 25/26 accruals reversed but not yet paid.
Climate and Energy	10,369	962	10,369	-	
Capital Maintenance and Improvements	6,659	(633)	6,659	-	YTD credit position from 25/26 accruals reversed but not yet paid.
Acquisitions	3,270	79	3,270	-	
Adaptations	2,000	451	2,000	-	
Programme Management & ICT	2,218	1	2,218	-	
Environment and Estates	370	(2)	370	-	
Crime and Security	200	11	200	-	
New Build	3,220	24	3,220	-	
Capital Total	**38,496**	**508**	**38,496**	**-**	Overall budget of £33.225m as approved by Cabinet 12-Feb-26. Further net carry forwards of £5.271m added, follows approval by Cabinet 25-Jun-26.

FINANCIAL DASHBOARD AS AT JUNE 2026

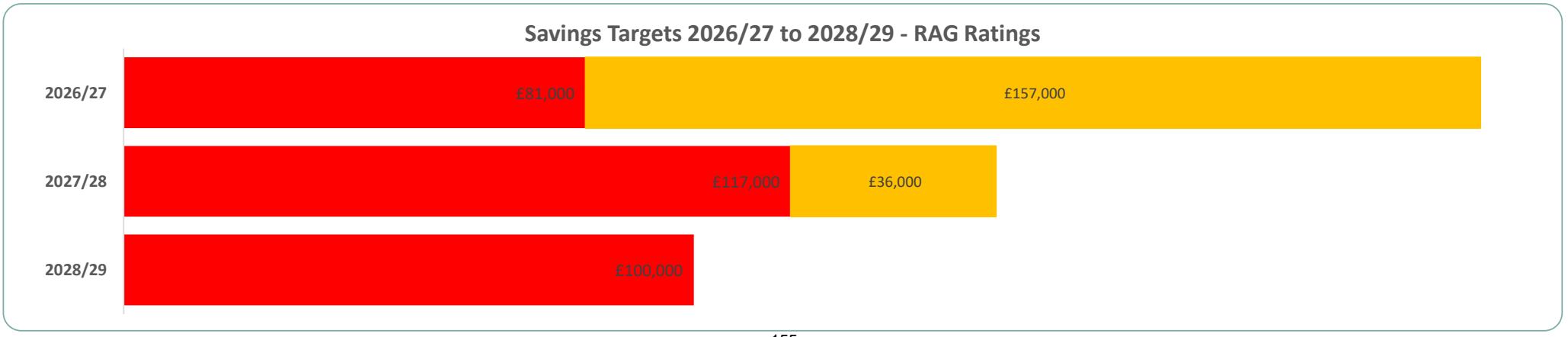
RESERVES

Solihull Community Housing Reserves (excluding Pension Reserve)	Balance 1-Apr-26 £000	Expected Use 2026/27 £000	Balance 31-Mar-27 £000	Committed/ Earmarked £000	Comments/ Notes on committed & earmarked use	Available Balances £000
Minimum Working Balance	1,500	-	1,500	(1,500)	Minimum requirement agreed with Auditor.	-
Budget Strategy Reserve (BSR)	3,011	741	3,752	-		3,752
BSR: Earmarked for Restructures	490	-	490	(490)		-
BSR: Other Earmarked Sums	1,572	(768)	804	(804)	Board approved use of SCH Reserves	-
Total SCH Reserves	6,573	(27)	6,546	(2,794)		3,752
Any under-achievement of savings targets (see below) may result in a further call on reserves.						

Housing Revenue Account Reserves REVENUE	Balance 1-Apr-26 £000	Expected Use 2026/27 £000	Balance 31-Mar-27 £000	Committed/ Earmarked £000	Comments/ Notes on committed & earmarked use	Available Balances £000
HRA Balances/ General Reserves	8,166	(2,615)	5,551	(3,921)	£2.0m working balance required, £3.758m Earmarked/ committed use of reserves.	1,630
Future Capital Investment	5,057	2,135	7,192	(300)		6,892
CAPITAL						
Major Repairs Reserve	3,493	(2,336)	1,157	-		1,157
Capital Receipts Reserves (inc.RTB)	18,213	3,239	21,452	(3,336)		18,116
Capital Receipts Unapplied	256	-	256	-		256
Total HRA Reserves	35,185	423	35,608	(7,557)	Council HRA Reserve Balances	28,051

SAVINGS TRACKER

RED & AMBER Rated Savings Targets 2026/27:		
Customer Services & Business Support	£ 50,000	CS04 - Business Processes and Support Review a. implementing 'one person one device' to make savings on telephone budgets b. centralising administration functions
Asset Management	£ 30,600	AM01 - Increase income from solar panels (or even wind turbines)
Property Services & Building Safety	£ 157,000	AM12 - Increased capital investment to replace components on lifecycle and condition rather than on asset failure, such as Boilers



FINANCIAL DASHBOARD AS AT JUNE 2026

RENT & CHARGES DEBT

HRA Income	
Overall Income Due	£13,414,198
HRA Income	£12,518,062
Rent Roll	£13,075,355
Percentage rent collected of rent due	93.32%
Percentage rent collected of rent due excl. arrears b/fwd	95.74%

SCH Income	
SCH Rents collectable	not available
SCH income of rent due	
SCH Collection percentage	

HRA Arrears	Total HRA Debt £	Impairment Required £
05-Apr-26	4,897,466	3,859,024
03-Jul-26	5,513,253	4,152,711
Increase/ (Decrease)		**293,687**
Add: Net Write offs YTD		-
TOTAL CHARGE TO DEBT IMPAIRMENT		**293,687**
Budget available (revised per draft 26/27 HRA MTFS)		896,000

SCH Arrears	Total SCH Debt £	Impairment Required £
31-Mar-26	129,275	121,727
03-Jul-26	130,414	113,854
Increase/ (Decrease)		**(7,873)**
Add: Net Write offs YTD		-
TOTAL CHARGE TO DEBT IMPAIRMENT		**(7,873)**
Budget available		20,000

ACCOUNTS RECEIVABLE DUE DEBT

At 3-Jul-26	Current (0-30)	31-60	61-90	91-180	181-365	365+	Total Due	% of Due Debt
Council Debtors	£ 4,560	£ 475,194	£ -	£ -	£ -	£ 173	**£ 479,927**	*91%*
Other Debtors	£ 1,354	£ 4,875	£ 351	£ 7,504	£ 6,332	£ 25,740	**£ 46,156**	*9%*
Total AR Debtors	£ 5,914	£ 480,069	£ 351	£ 7,504	£ 6,332	£ 25,913	**£ 526,083**	

At 31-Mar-26								
Council Debtors	£ -	£ -	£ -	£ -	£ -	£ 173	**£ 173**	*0%*
Other Debtors	£ 629	£ 2,120	£ 1,368	£ 3,066	£ 7,698	£ 21,914	**£ 36,794**	*100%*
Total AR Debtors	£ 629	£ 2,120	£ 1,368	£ 3,066	£ 7,698	£ 22,087	**£ 36,967**	

ITEM 8

QUARTERLY MONITORING BOARD

Meeting Date: 25th August 2026

Report Title: Internal Audit Update inc. Major Spend

Report From: Steve Sparkes, Head of Audit Services

Report Author: Olly Dodds, SCH Audit Lead

1. Report overview/purpose

1.1 To inform QMB of the findings of Internal Audit's review of SCH's Major Spend and provide an update on the SCH Audit Plan 2026/27.

2. Recommendations

2.1 QMB are asked to:

- Note the findings of the Major Spend audit report.
- Note the progress of the SCH Audit Plan

3. Background/context

3.1 Internal Audit has a legal standing in terms of the Accounts and Audit Regulations 2015 and its role is to provide an independent appraisal of internal control systems. This requirement is embodied within SCH's Financial Regulations.

3.2 In line with the Global Internal Audit Standards, the strategy adopted is for an unrestricted range of coverage of the Council's operations, including partners. Audit Services provide an Internal Audit service to SCH.

4. Major Spend

4.1 Major Spend combined reviews of Repairs, Capital Expenditure and a light touch follow up of recommendations related to the Contract Management review (L3 issued October 2025). This approach was requested by SCH Senior Management and this is the first time Internal Audit carried out these reviews in this manner.

4.2 The review identified some concerns with the Repairs elements, particularly in relation to damp and mould and compliance with statutory Housing Health and Safety Rating System targets. There were no concerns with Capital Expenditure. Checks on Contract Management showed that previous recommendations had been implemented. Overall the review was given Level 3 Moderate Assurance.

4.3 Please note that Major Spend has not yet been to SCH's Audit and Risk Committee.

5. 2026/27 SCH Audit Plan

5.1 The table below shows progress against the SCH Audit Plan:

Area	Planned Start	Status/comments	Assurance Level (*=provisional)
One SCH Implementation	Q1	In progress	-
Stores	Q1	Draft issued	2*
Use of Vehicles	Q1	Draft issued	2*
Housing Allocations	Q1/2	In progress	-
Strategic Property Maintenance Partnership	Q2	In progress	-
Voids	Q2	Planning	-
Biomass Follow Up	Q3	-	-
Major Spend (Contract Mgmt, Repairs and Capital Expenditure)	Q3/4	-	-
Housing Rents	Q3/4	-	-
Accounts Payable	Q3/4	-	-
Accounts Receivable	Q3/4	-	-
Bank Reconciliation	Q4	-	-
Payroll	Q4	-	-

6. Financial implications

Not applicable.

7. Legal implications

Not applicable.

8. Risk Implications

Not applicable.

9. Equalities implications

Not applicable.

10. List of appendices

Appendix 1 – Major Spend Report

11. Background documents

Not applicable.

PRIVATE AND CONFIDENTIAL

Audit Services - Internal Audit Report

Solihull Community Housing - Major Spend

Review Ref: 25/26-106

Final Report

June 2026

Audit Rating: 3 – Moderate Assurance

Report Circulation:

Draft:	Paul Edwards	Executive Director Customer Experience and Corporate Support
	Darren Baggs	Director of Operations
	Sam Gilbert	Assistant Director of Finance and Property Services
	Satnam Kaur	Assistant Director for Housing
	Andy Duke	Head of Asset Management and Development
Final:	Lee Sugden	Interim Chief Executive of Solihull Community Housing
	Perry Wardle	Director of Economy and Infrastructure

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Executive Summary

Background

Solihull Community Housing, is responsible for managing council housing stock, delivering responsive repairs, planned maintenance, and capital investment programmes. The combined scope of responsive repairs and capital expenditure forms a significant element of SCH's operational activity and financial spend and therefore forms part of the core financial reviews which are completed annually to help provide assurance to stakeholders that appropriate and effective controls are in place.

Recent developments in housing regulation and sector standards have introduced significant compliance requirements, including;

- Awaab's Law (2025**)** which mandates strict timeframes for addressing damp, mould, and emergency hazards.
- The Housing Ombudsman Guidance on Window Repairs which highlighted systemic failures in risk assessment, delays, and poor communication, requiring landlords to adopt proactive, risk-based approaches; and
- A recent consultation on the Decent Homes Standard.

The total HRA capital resource available at the beginning of 2025/26 was £72.875m and of this SCH has responsibility of £31.736m allocated to the HRA Capital Programme for a number of projects due to be undertaken during the year and these were approved by Cabinet. The 2024/25 review of Responsive Repairs and Capital Expenditure both resulted in a Level 2 Substantial Assurance rating. This review will incorporate reviews of:

- Housing Repairs
- Capital Expenditure
- Follow up of Contract Management (issued October 2025) to check on recommendation implementation only.

Scope of Review

The overall objective of the audit was to review the effectiveness of the control environment in place to provide assurance over the management of key risks. To assess the current assurance level we examined the key controls in the following areas:

- Approval and governance
- Compliance with Policies and Procedures
- Responsive Repairs
- Budgetary Controls
- Financial Classification
- Contract and Performance Monitoring
- Exception to Rules of Contract

Key Observations for Management

A revised audit approach was adopted for 2025/26 combining the previously separate audits of Responsive Repairs, Capital Expenditure together with a light touch follow up review of Contract Management (for which the final report was issued October 2025). This approach was taken in

recognition of the overlap in scope and risk across these areas, enabling a single combined audit of Major Spend rather than three separate reviews. The audit opinion and assurance rating provided relates solely to the repairs and capital expenditure elements of Major Spend and does not constitute an assurance opinion on the follow up of Contract Management. The Contract Management element was limited to a high level non-substantive review of selected documentation and governance minutes to confirm management actions, and no detailed testing was undertaken. A full follow up of Contract Management is scheduled within the 2026/27 Internal Audit Plan.

- Responsive Repairs performance remains mixed, with progress made in reducing levels of work in progress and improving emergency repair completion rates; however, key targets for damp and mould remedial works and achieving "right first time" repairs have not been consistently met. Damp and mould performance remains an area of concern. Notwithstanding this, the Executive Director of Operations has advised that performance against the Damp and Mould Compliance (DMC) post-implementation of Awaab's Law from 27 October 2025 has significantly improved and now compares favourably with sector peers. There have been challenges relating to no access appointments, restrictions where access is not granted to complete subsequent stages of the treatment process, and the requirement that repairs orders cannot be closed until *all* identified works are fully completed. These factors continue to impact overall performance metrics, despite outcomes remaining broadly comparable with peer organisations.
- Post inspection processes are operating but not consistently recorded on Open Housing (SCH's housing management system).
- As at period 10 (January 2026) the repairs budget forecasted a year end overspend of £189k.
- The Repairs Risk Register is comprehensive and actively managed, with clear ownership, mitigation actions and escalation routes, although several high impact risks remain outside the stated risk appetite.
- Capital programme governance and approval arrangements are operating effectively, with appropriate Cabinet approval, accurate re-phasing, compliant authorisation and correct financial classification of expenditure.
- Financial monitoring reports generally provide sufficient detail to explain material variances.
- Contract management and procurement oversight have improved since the previous audit, including enhanced use of the contract register, proactive spend monitoring and escalation to senior management.
- Monitoring of supplier spend and non-contract expenditure has strengthened, improving visibility of procurement risks.
- Management have advised that the arrangements with the Dodd Group have improved, with more structured reporting and oversight of historic and current invoices, enhancing transparency and management's ability to identify and resolve payment issues in a timely manner.

Our work and detailed findings are noted below.

Responsive Repairs

Performance

1. The main performance reporting for repairs is carried out though the Tenant Satisfaction Measures (TSM's). They include separate TSM's based on SCH's own management

information and those derived from tenant perception surveys. The SCH Performance Dashboard to March 2026, showed the following status relating to repairs.

Measure	Source	Target %	March 26 %
Repairs completed within target timescale (emergency – 24 hours)	Management Information	95.5%	90.16%
Repairs completed within target timescale (non-emergency – other priority)	Management Information	85%	84.8844%
Satisfaction with repairs (last 12 months)	Tenant surveys	80%	75.5%
Satisfaction with the time taken to complete most recent repair	Tenant surveys	76%	80.20%
Satisfaction that the home is well-maintained	Tenant surveys	80%	73.3%
Damp and Mould Inspections completed within time scales	Management Information	100%	90.25%
Damp and Mould remedials completed within timescales *(Pre D&M dashboard)*	Management Information	1 00%	52.10%

** Includes relevant jobs for day to day repairs, safer homes and standby*

2. The responsive repairs service has shown mixed performance against key targets year-to-date (YTD). Damp and Mould (D&M) inspections completed within timescales stand at **90%**, against a target of **100%**, indicating progress but still short of expectations. Remedial works for D&M remain a challenge, with only **52%** completed within timescales for the year compared to the 100% target. This area continues to be a priority for improvement. 78% of responsive repairs were completed right first time. While this reflects a gap in quality assurance, management have advised that improvement initiatives are underway to address recurring issues and reduce repeat visits.

3. Work in Progress (WIP) which includes repair jobs that have been raised but not yet completed, jobs waiting for parts, follow on works or contractor availability, for all contractors has decreased by **73%** for the year from **6,216 jobs in April 25 to 1664 jobs in March 26**, demonstrating positive movement in clearing the backlog. To support this, additional resources of **£200k** was allocated, and **six new operatives** have been employed. These measures are expected to accelerate progress and improve overall service delivery.

4. Emergency repairs performance has improved month-on-month, currently achieving **90.16%** against a target of **95.5%**. While slightly below target, the trend is positive, and performance issues linked to a backlog are being closely monitored through the improvement plan. 84.88% of non-emergency repairs have been completed within the target timescale for the year in line with the target.

5. Customer satisfaction with repairs over the last 12 months stands at **79.10%**, marginally under the target of **80%**. Additionally, the percentage of damp inspections completed within target has significantly improved to 94.8%. This reflects the impact of focused efforts in this area.

6. The strategic performance review up to October 2025 acknowledges that achieving the overall D&M completion target for the year is unlikely due to underperformance in the first six months. However, since the implementation of **Awaab's Law on 27th October**, it was anticipated that monthly targets will now be met. New processes and service improvement initiatives have been introduced to support compliance and enhance service delivery going forward.

   Damp and mould

7. Awaab's Law came into force on **27 October 2025**. In advance of implementation, management advised that SCH had already developed revised processes, detailed process maps, and performance dashboards to ensure compliance with the new reporting requirements. SCH operates a dedicated Damp and Mould dashboard to monitor performance and emerging trends. The dashboards capture information relating to damp inspections, open and closed remedial works, and disrepair cases. A newly implemented D&M dashboard, capturing data from November 2025 onwards, includes additional regulatory indicators such as the number of damp reports received, progress towards elimination of damp and mould, and complaints relating to D&M. As part of this audit, we reviewed both the legacy and the new Damp and Mould dashboards to assess the completeness and effectiveness of performance monitoring and reporting arrangements.

8. For the period up to October 25 the previous D&M dashboard showed that:
   - 434 damp inspections have been completed during April 25 to Oct 25.
   - There are 148 open damp remedial jobs.
   - 52.7% of these open damp remedial works were out of the target timescales.
   - 81 open disrepair cases involving damp and mould (accounting for most of the disrepairs).
   - 3 open Category HHSRS (Housing Health and Safety Rating System issues affecting how well SCH properties meet the Government's Decent Homes Standard).

9. The Regulator of Social Housing requires providers of social housing to meet the Decent Homes Standard (DHS). Ensuring that housing stock is maintained to the DHS, assists in preventing damp, mould and condensation issues arising or becoming protracted. Section 5 states that HHSRS is the statutory standard of the DHS and must be incorporated in housing stock condition surveys; "to be decent, a dwelling should be free of category 1 hazards, and the existence of such hazards should be a trigger for remedial action unless practical steps cannot be taken without disproportionate expense or disruption."

10. A review of the dashboard indicates a significant reduction in the number of open damp and mould-related HHSRS issues, dropping from 508 in September to just 3 in October. According to the commentary, this change is attributed to a reconciliation exercise and the creation of current-year HHSRS data, which replaced figures previously reported

using a spreadsheet system over the past few years. The note confirms that the 508 jobs were assessed to ensure that relevant jobs were appropriately booked.

11. Management advised that the figures previously reported represented the cumulative total of all damp and mould-related HHSRS hazards identified over multiple years. For earlier reporting periods, where the total stood at 451 cases, the process involved emailing individual HHSRS assessments to the relevant operational teams for action. To support improvements in reporting accuracy and process assurance, management undertook a sense check of approximately 50% of these cases to confirm that appropriate repair jobs had been raised. Our review has not undertaken any testing on these cases.

12. The review of the Post-27th D&M dashboard against the requirements of Awaab's Law indicates that SCH has established a front-end processes for identifying, investigating and responding to damp and mould cases. Performance data shows some levels of compliance in relation to inspections, reporting to residents, and the timely initiation of emergency works. These elements broadly align with the statutory expectations placed on social landlords, including investigation of hazards within 10 working days, communication of findings within three days, and rapid response to emergency hazards.

13. The data demonstrates that SCH is largely compliant with statutory requirements relating to the early stages of case management. Damp and mould inspections are consistently completed within target in a high proportion of cases, often exceeding 85%, and inspection findings are reported to be provided to residents within the expected three-day timeframe in most instances.

14. Notwithstanding this, there is limited evidence within the dashboard to demonstrate consistent compliance with the statutory requirement to address emergency hazards within 24 hours and for significant damp and mould hazards to be made safe within 5 working days following investigation. As this requirement sits at the core of Awaab's Law, the absence of clear and consistently achieved completion metrics represents a control weakness.

15. The number of outstanding damp and mould remedial work has increased substantially over the period reviewed, rising from very low levels to over 300 cases. While the number of works completed per month has also increased, it has not kept pace with incoming demand.

16. The dashboard indicates a significant increase in recurring damp and mould cases, rising steadily across the year. Awaab's Law guidance specifically requires landlords to investigate and resolve underlying causes rather than applying temporary or superficial treatments. The trend in recurring cases therefore raises concerns about the effectiveness and quality of repairs, as well as the adequacy of diagnostic processes.

<u>Repair Jobs</u>

17. The majority of repair jobs are carried out internally by the MST Team and the remainder by external contractors. We examined a sample of repairs undertaken during the period April to December. All of the jobs were raised with the appropriate authorisation and were charged to the correct cost centre.

18. The majority of jobs are raised for £1 and the work and associated costs clarified when operatives carry out their pre-inspection visit. A variation is then required to reflect this on Open Housing. Work may be completed there and then, where possible, but there can be instances whereby a Team Leader will be involved either in a discussion with the operative or by carrying out a further inspection and / or raising an order themselves. If the Team Leader is not directly involved, authorisation is not evidenced on Open Housing so the system will only show the operatives involvement (a "TMW Service" entry). We understand that jobs such as this over £750 are effectively checked retrospectively as part of the post-inspection work and this will also include a review of the schedule of rate entries input by the operative.

Follow-On Work Approval and System Limitations

19. In our previous audit, we highlighted a key theme from our sample review: Open Housing does not consistently provide a clear audit trail of Team Leader approval for follow-on work and any variations applied. While discussions with Team Leaders do occur, their input is not always reflected within the system. Instead, Open Housing records a generic Total Mobile 'TMWService' mobile device entry, which does not identify the individual responsible for the approval. This limitation makes it difficult to confirm that approvals align with agreed financial limits.

20. To address this, a flowchart was developed to illustrate the follow-on process. It was discussed with management, who remain satisfied that daily interaction and monitoring between Team Leaders, Schedulers, and operatives along with post-inspections carried out provides sufficient assurance that work is managed appropriately and issues are addressed as needed. No changes have been made to the process at this stage, and management continues to rely on existing controls and discussions to ensure cost approvals are appropriate.

21. The Housing IT team confirmed that access to Open Housing and Total Mobile is managed through a structured process. When new users join SCH, their line manager specifies access requirements on the New Starter Form, including whether Open Housing access is needed. Permissions are mirrored from an existing user in a similar role. Any subsequent changes to access levels must be requested by the user's line manager, and again, permissions are copied from an appropriate existing user.

22. Temporary elevated access may be granted for cover arrangements, provided the request comes from the manager. In such cases, a reminder is logged to revoke additional access once the cover period ends, preventing users from retaining unnecessary permissions long term.

23. When users leave the business, managers are required to notify the Service Desk to disable their Open Housing and Total Mobile account. Once the Open Housing account is disabled, the user cannot log in, although their officer code may still appear in historical records, which can assist with audit trails. Removing this link would reduce, rather than enhance, monitoring capability. The Total Mobile Device must be returned so it can be reset and access removed. This ensures an audit trail and prevents unauthorized use. Users cannot log into Total Mobile on a new device without an activation request being approved by a member of the Housing IT team with Total Mobile Admin rights. While user accounts are not deleted from Total Mobile upon leaving, deactivation and device resets are essential. Retaining user records supports audit and reporting by allowing historical actions to be linked to operative usernames. Deleting users would reduce, rather than improve, monitoring capability.

24. There is an onus on managers to promptly inform the Service Desk when staff leave, ensuring accounts are disabled and access is revoked. Failure to do so could result in inappropriate access remaining active.

Post inspections

25. The post-inspection requirements have remained the same in that *"all repairs with a cost of £750 or over will automatically be post inspected. Additionally a random 10% sample of jobs costing between £50 and £750 will also be post inspected. This includes repairs undertaken by external contractors."*

26. We reviewed a small sample of jobs for repairs and capital expenditure and found that for four of the repair jobs, there was no Post Inspection (PI) tab on Open Housing, as a result it was not known if a PI had been completed. We raised this with the Responsive Repairs Manager who advised that the Better Place Team have been creating PIs manually on SharePoint rather than through Open Housing. Management have advised that all PI will be updated and created on Open Housing. We have rechecked the four above mentioned cases and the PIs have since been added to Open Housing.

27. Management has informed us that regular reports are run from Open Housing showing the number of post inspections generated to keep them informed of progress and the details of passes and rejections. A process for regular reporting will be implemented from Quarter 3 onwards to ensure improved oversight and accountability.

Budget Monitoring

28. We reviewed the Repairs revenue budget outturn for Cost Centre 531900 for the financial year to Period 10 (January 2026). The budget currently forecasts an overall overspend of **£189,000**.

29. Although underspends are forecast against some individual budget headings at the year end, the principal areas contributing to the projected overspend are **External Structures (£71,000)**, **Legal Fees (£44,000)**, **Recharge Expenses – Running Costs (£44,000)**, and **Other Works (£37,000)**, the latter relating primarily to the drainage budget.

30. These variances were discussed with management. External Structures expenditure largely relates to scaffolding costs, and it was noted that additional solar panel surveys are also planned to be undertaken by the Dodd Group. Recharge expenses represent administrative budget headings used to allocate the costs of the Better Places and Voids Services to the Repairs budget; management advised this reflects a longstanding, historic approach within Solihull Community Housing. Legal fees are profiled based on the volume and value of claims received during the year, with higher value claims having a direct impact on the forecast position. The overspend within Other Works (drainage) arises from a combination of prior year works being charged to the current year budget and an increase in workload following the appointment of a new contractor having a direct impact on the forecast position. The overspend within Other Works (drainage) arises from a combination of prior year- works being charged to the current year budget and an increase in workload following the appointment of a new contractor.

Risk management

31. There are 10 risks included on the Responsive Repairs Risk Register within the JCAD Risk Management System. We reviewed the risk register and found it to be comprehensive, up to date, and appropriately aligned to key operational, financial, legal and reputational risks.

32. A range of high impact risks remain outside the organisation's stated risk appetite, most notably those relating to staffing capacity, damp and mould (including compliance with Awaab's Law), materials availability and other sector wide pressures. However, mitigating actions are clearly defined, assigned to named officers, and progress against controls is regularly monitored, with most actions reported as substantially complete or ongoing with clear target dates.

33. Review dates are current, and evidence of active management oversight is demonstrated through detailed review comments and escalation to senior management where required. While a number of risks are influenced by external factors outside the organisation's direct control, management has implemented reasonable and proportionate controls to mitigate their impact, and the risk register provides a sound basis for ongoing risk management and assurance.

Capital Expenditure

Approval of Housing Capital Programme

34. The HRA Capital Programme of £31.738 million for 2025/26 was formally approved by Full Cabinet on the 13th February 2025, with governance arrangements operating as expected. The Medium Term Financial Strategy (MTFS) included an update on the overall position of the capital programme. The mid-year review included a number of re-phasing adjustments and virements approved by Cabinet on the 11th December 2025, with certain project budgets moved into future financial years in response to delivery timelines and operational requirements. The revised total HRA Capital Programme budget for 2025/26 is £23.442 million.

Sample Testing of the 2025/26 Capital Programme

35. Testing of a sample of capital expenditure confirmed that all schemes reviewed had received the appropriate approval in line with delegated authority limits. A reconciliation was undertaken between the originally approved capital budget, the revised figures reflected in the MTFS, and the amounts reported through period monitoring. This review confirmed that all figures reconciled accurately, with no unexplained variances identified.

36. A small sample of individual capital expenditure transactions was reviewed in detail. All transactions had been appropriately raised, authorised, and approved in accordance with established procedures. Where variations to approved costs were identified, these had been formally approved within the relevant approval thresholds. All expenditure tested met the definition of capital expenditure and had been correctly coded to the appropriate cost centres.

Financial Monitoring

37. Our review of the financial monitoring reports (P08) and the Board version (P09) concludes that, overall, the level of detail and supporting narrative provided is sufficient to explain material variances and to support effective management oversight.

38. Our review of the P09 capital monitoring identified several material forecast underspends in 2025/26, largely driven by project slippage and reduced in year commitments. Management advised that overall level of underspend was further influenced by recurring underspends from previous years and the timing of approval to carry forward reallocated funding which collectively impacted the reporting position. The most notable variances are within New Build (Lakeside and Anglesey Avenue), Fire Protection Works, Property Acquisitions, and CCTV, with additional underspends on IT Strategy, MST Structural Works, and Kitchens. Commentary attribute these to schemes at preconstruction stage, reprofiling into 2026/27, uncommitted scope, or budget reallocation to other workstreams.

39. While underspends protect the overall HRA funding position this year, there is a delivery risk to programme outcomes (new homes and building safety milestones) if reprofiling and contractor capacity are not actively managed.

40. The reports clearly demonstrate the reconciliation from budget to forecast and outturn, with key movements summarised at an aggregate level and supported by more detailed analysis at Directorate, cost centre and scheme level. Explanatory commentary is generally provided for significant variances, including the identification of underlying drivers such as contract variations, additional income, grant funding, timing differences, carry forward requests and accrual adjustments. Where present, these explanations are specific and quantified, enabling informed scrutiny and challenge. However, the consistency and depth of narrative vary across the reports, with some variances supported only by high level commentary. Strengthening explanations for all material and recurring variances, financial impact and planned management actions would further enhance transparency and strategic oversight.

Contract Management

Procurement Legislation Threshold

41. Our previous audit identified that SCH continued to engage suppliers where cumulative expenditure exceeded the thresholds set by the Public Contract Regulations 2015 and Procurement Act 2023, without undertaking lawful competitive tender processes or securing valid exemptions. This weakness was primarily attributed to insufficient forward planning and limited oversight of contract expiry dates.

42. Management committed to strengthening early procurement planning through enhanced contract register monitoring and senior management oversight. Our follow up testing identified that the SCH contract register is now updated on a monthly basis and is published on the intranet. Extracted versions of the register are produced monthly for the Senior Leadership Team (SLT) and quarterly for the Executive Leadership Team (ELT), highlighting contracts due to expire within the next twelve months. Contracts are RAG rated based on progress within the procurement lifecycle, and those rated Red are escalated to ELT where required. These arrangements demonstrate an improved and more structured approach to contract management.

43. The previous audit also highlighted a lack of effective system controls to flag approaching or breached procurement thresholds, increasing the risk of non-compliant spend. The Strategic Procurement Business Partner (SPBP) advised that Corporate Procurement Services (CPS) now proactively review supplier expenditure and hold monthly monitoring meetings with the Executive Director for Customer Experience & Corporate Support.

44. Our review of the latest set of minutes confirmed that supplier spend, contract status and significant movements in expenditure are routinely reviewed as part of these meetings. We were informed that Accounts Payable also produce a monthly Oracle report for the SPBP, which identifies over-spend against contracts and significant non-contract spend, which is shared with senior management for oversight and action. Based on evidence reviewed, improved monitoring arrangements are now in place and operating as intended.

Exceptions to Rules (EtRs)

45. The prior review identified weaknesses in the use of EtRs, including instances where expired or non-existent contracts were referenced and where cumulative spend was not always considered. Management committed to tightening controls around EtR approvals, monitoring contract status post approval, and reducing reliance on EtRs.

46. Since the previous audit, changes to procurement legislation and internal processes have contributed to a reduction in the number of EtRs raised. In certain circumstances, direct awards have replaced EtRs and are now recorded on the contract register, providing improved transparency and management oversight. The SPBP has advised that overall compliance with procurement requirements has improved and that an escalation process to ELT is now operating, however the process has not yet been formally documented.

Contract Register and Suppliers

47. It was previously identified that suppliers with significant historic or ongoing expenditure were not consistently recorded on the SCH contract register and that contract documentation was often missing. Management responded by introducing a regular reconciliation of Oracle spend data against the contract register.

48. Our follow up work confirmed that CPS now routinely analyse multi-year supplier expenditure using Oracle payables data, with this analysis reviewed monthly by senior management. The reporting clearly identifies supplier overspends and significant non contract expenditure, strengthening management oversight and materially improving the organisation’s ability to identify non-compliant arrangements and implement timely corrective action. This area will be revisited, with in depth testing planned as part of the 2026/27 Contract Management Audit.

49. We previously identified prolonged reliance on single suppliers through successive EtRs without evidence of market testing or competitive procurement. Management indicated that CPS now prioritise higher value suppliers when reviewing spend data to identify long term, noncompetitive arrangements.

50. Our discussions confirmed that this review process is embedded within the monthly spend monitoring arrangements, with a particular focus on suppliers approaching or exceeding procurement thresholds. While this represents an improvement, we note that

evidence of formal market testing decisions and documented justifications would further strengthen assurance in this area.

Dodd Group – Historical Debt

51. In our last review we identified significant historic unpaid invoices and technical issues relating to Dodd Group. Management committed to undertaking a fundamental review of invoice processing to ensure these issues did not persist under the new SPMP contract.

52. The Director of Operations advised that a formal review has since been undertaken, resulting in strengthened information sharing and monitoring arrangements. The review identified operating systems and functionality as a hindrance towards order processing/payment claim approvals, leading to significant work arounds.

53. Management confirmed that the Dodd group now provides detailed and structured reporting on both the previous, and current contracts. This includes the value of outstanding payments and the number of jobs and the number and value of jobs placed in query. These arrangements have improved transparency, strengthening the financial oversight and enhancing management's ability to identify and resolve invoice backlogs and payment issues in a timely manner. This area will be followed up further during the 2026/27 Contract Management audit.

Our audit opinion is noted below.

Audit Opinion

Overall, based on the testing undertaken, we have given the area a;

Level 3 Moderate Assurance rating

Meaning the control framework is adequate but a number of controls are not operating effectively.

The primary driver for this opinion being lower than last year's relates to D&M repairs performance. Capital Expenditure arrangements remain effective. As noted in this report this score does not include the Contract Management arrangements.

Details of the assurance ratings are attached at Appendix A and a summary of the number of recommendations made, by priority, are detailed below:

Recommendation Priority	No.
High	1
Medium	3
Low	0
Total	**4**

Internal Audit would like to thank all of the officers contacted during the course of this review for their co-operation and assistance.

Action Plan

Audit Finding and Risk	Priority	Recommendation	Response
Damp and Mould Dashboard			
Finding: Limited evidence to demonstrate consistent compliance with statutory timescales for making properties safe and completing remedial works, alongside increasing backlogs and recurring cases. **Risk:** Failure to complete works within statutory timescales increases the risk of non-compliance with Awaab's Law, prolonged tenant exposure to hazards, and heightened legal, regulatory, and reputational risk	**High**	**Recommendation 1** SCH should strengthen its performance framework by implementing clear, outcome-focused KPIs aligned to Awaab's Law, including timescales for making properties safe for emergency and significant hazards, alongside robust backlog management and root cause resolution processes to ensure timely and effective hazard resolution. **Officer Responsible** Samantha Brotheridge Property Services Manager	**Recommendation Accepted:** Yes
Management Comment SCH will review existing performance measures to ensure all areas recommended and where not already in place, are implemented			**Implementation date:** September 2026

Audit Finding and Risk	Priority	Recommendation	Response
Performance			
Finding: Performance against key repairs measures is mixed, with some targets not met, particularly in damp and mould remedial works, emergency repairs, and customer satisfaction. **Risk:** Underperformance in key service areas will negatively impact tenant satisfaction, regulatory compliance, and overall service quality.	**Medium**	**Recommendation 2** Implement targeted improvement plans focused on underperforming areas, particularly damp and mould remedial works, emergency repair completion times, and overall customer satisfaction. This should include enhanced monitoring of right first-time performance, improved scheduling and contractor oversight to reduce delays, and the use of root cause analysis to address repeat repairs. **Officer Responsible** Samantha Brotheridge Property Services Manager	**Recommendation Accepted:** Yes
Management Comment Through the management of change new structures have been introduced with a greater focus/ownership of matters related to DMC. Though discussion with Audit it wasn't evidencable how or where the conclusion to root causes was drawn from, however we will implement improvement where they can be made			**Implementation date:** Q3 2026/27

Audit Finding and Risk	Priority	Recommendation	Response
Post Inspections			
Finding: We reviewed a small sample of jobs and found that for four, there was no Post Inspection tab on Open Housing. **Risk:** Inability to evidence that the required post-inspections have been completed. Defective or substandard repairs may go undetected.	**Medium**	**Recommendation 3** Management should mandate the exclusive use of the Open Housing for the creation, recording and monitoring of all post inspections. Establish routine management reporting with defined KPIs, for example; volume of Post Inspections generated, completion rates, pass/fail outcomes, rework trends to strengthen oversight. **Officer Responsible** Samantha Brotheridge	**Recommendation Accepted:** Yes

		Property Services Manager	
Management Comment Exploration if Audits recommendations are possible within Open Housing, noting there are system development limitations. Subsequent work with SCH BI team will seek to address any gaps in data where possible.			**Implementation date:** Q3 2026/27

Audit Finding and Risk	Priority	Recommendation	Response
Budget Monitoring			
Finding: The Repairs revenue budget (Cost Centre 531900) forecasted a £189,000 overspend, driven by pressures across External Structures, Legal Fees, Recharge Expenses, and drainage-related works. **Risk:**	**Medium**	**Recommendation 4** Management should ensure that unavoidable overspends within the Repairs revenue budget are identified promptly and appropriate actions are considered to mitigate or manage the resulting financial impact. **Officer Responsible** Samantha Brotheridge	**Recommendation Accepted:** Yes

Ongoing weaknesses in budget profiling, cost allocation, and demand forecasting will lead to continued overspends and reduced financial control.		Property Services Manager	
Management Comment Monthly budget manager meetings will address this recommendation, and flag at the earliest opportunity budget and demand pressures to HoS and then ELT if necessary.			**Implementation date:** Q3 2026/27

Overall management response to Audit recommendations

We recognise that the current Moderate Assurance (Level 3) position is predominantly driven by Damp & Mould performance, in light of:

- **the demonstrable improvement trajectory during the year,**
- **the strengthened governance, monitoring and audit trail across capital and contract management, and**
- **the established compliance framework now in place for Awaab's Law,**

We would welcome further consideration as to whether the current control environment could reasonably support a Substantial Assurance (Level 2) position.
We believe the evidence demonstrates that:

- **controls are in place and operating,**

- **areas of underperformance are under active management, and**
- **key risks are identified, understood and mitigated through formal governance arrangements**

Audit Response

The current control environment does not support a substantial assurance position as, based on the evidence seen during the review, SCH is not fully compliant with the statutory timescales set out under Awaab's Law, particularly with regard to inspections and publishing reports, although we recognise steps are being taken by management to rectify this. To add some context to this typically 1 out of 7 cases in a given month does not meet the emergency inspection deadline for example.

Whilst we recognise SCH is close to full compliance, we will not consider a substantial assurance position where key safety legislation is not being fully complied with (thus potentially exposing SCH & SMBC to fines, prosecution, regulator intervention and reputational damage) as this would mislead the Audit and Risk Committee and the SCH Board by providing false assurance and would not be compliant with professional auditor standards as set out under the Global Internal Audit Standards. It should noted that, had we not found issues with Damp & Mould compliance, the review would otherwise have been Substantial Assurance.

Appendix A - Assurance Score

To quantify our opinion on the adequacy of internal control, we score the outcome of each audit we undertake. This score is based on a scale of 1 to 5, where a score of 1 suggests the system is performing well to achieve control objectives and 5 suggests unacceptable levels of control exist. The table below details the level of assurance available.

Score	Assurance Level	Assurance Criteria
1	Full	There is a sound framework of control operating effectively to achieve control objectives.
2	Substantial	The framework of control is adequate and controls are generally operating.
3	Moderate	The control framework is adequate but a number of controls are not operating effectively.
4	Limited	Adequate controls are not in place to meet all the system objectives and controls are not being consistently applied.
5	None	The control framework is inadequate and controls in place are not operating effectively. The system is open to abuse, significant error or loss and/or misappropriation.

Recommendations have been given the following priority ratings, based on an overall assessment of the potential risks to the Service Area's objectives:

Rating	Description
High	These are fundamental recommendations which Internal Audit will be looking for management to accept and implement. Non-implementation of the recommendations may impact on the Annual Governance Statement. These will be followed up within 6 months of the final report date.
Medium	These are recommendations which will improve the overall control environment. These will be followed up at the discretion of Internal Audit Management.
Low	These are advisory or best practice issues which management are encouraged to implement. We do not seek responses to these recommendations nor do we follow them up.
Notable Practice	The activity reflects good practice or is an innovative way of working within the Council. This practice should be shared with others.

Disclaimer

Please note that the assurance level is formed from sample testing of controls that were in operation at the time of the review. As such, total assurance cannot be given that systems are infallible or error free. Additionally, subsequent changes to systems, personnel or a failure to comply with procedures may impact on audit opinions in future reviews.

Small enough to care,
big enough to make a difference

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For more information about the services we provide, please see our website:
https://solihullcouncil.sharepoint.com/SitePages/audit-services/home.aspx

Small enough to care,
big enough to make a difference

QUARTERLY MONITORING BOARD

Meeting Date: 25 August 2026

Report Title: QMB Terms of Reference – Updated

Report From: Satnam Kaur, Assistant Director, Housing

Report Author: Judith Cook, Partnership's & Projects Officer

1. Report overview/purpose

1.1 The Terms of Reference have been reviewed and updated to remove duplication and create a more concise document.

2. Recommendation

2.1 QMB is asked to:

- Approve the revised Quarterly Monitoring Board Terms of Reference.

3. Background

3.1 At its previous meeting, QMB received and approved the draft Terms of Reference for the Board.

3.2 External feedback has since been received from the consultant supporting the Council's preparation for regulatory inspection.

3.3 The Terms of Reference have been reviewed and updated to remove procedural detail, reduce duplication, and make them more concise.

3.4 The revised Terms of Reference are attached for consideration and approval.

4. List of Appendices

- Quarterly Monitoring Board Terms of Reference (August 2026)

Terms of Reference - Quarterly Monitoring Board (QMB)

1. Purpose

1.1 The Quarterly Monitoring Board (QMB) is part of the Council's regulatory assurance framework.

1.2 Its purpose is to provide assurance, oversight and constructive challenge in relation to the Council's landlord responsibilities and statutory housing functions. It supports the Cabinet Portfolio Holder for Housing in understanding whether services are safe, compliant, effective, and delivering good outcomes for tenants and residents.

1.3 The Council retains full accountability for compliance with all relevant regulatory and statutory requirements, including the Regulator of Social Housing Consumer Standards, building safety legislation and the Housing Ombudsman Complaint Handling Code.

1.4 The QMB is not a formal decision-making body and does not undertake the operational management of Solihull Community Housing (SCH).

2. Definition of Assurance

2.1 For the purposes of the QMB, assurance means obtaining sufficient evidence from a range of sources to provide confidence that:

- Services are compliant with regulatory and statutory requirements
- Risks are being identified and managed appropriately
- Controls and governance arrangements are operating effectively
- Services are delivering intended outcomes for tenants and residents

2.2 Where members do not believe sufficient assurance has been provided, they may request further information, evidence or assurance activity.

3. Role within the Assurance Framework

3.1 The QMB is the principal forum through which the Cabinet Portfolio Holder for Housing receives assurance regarding landlord performance, compliance and risk.

3.2 The QMB brings together information from different sources to provide a balanced view of performance and compliance. This includes evidence from:

- SCH operational reporting
- Council client function oversight and contract management
- Internal audit and other independent assurance activity
- Tenant insight, feedback and complaints

3.3 The QMB supports the Council's wider governance arrangements by identifying matters that may require escalation to formal decision-making or scrutiny bodies.

3.4 The QMB adopts a risk-based and proportionate approach, focusing attention on areas of greatest risk, concern or regulatory significance.

4. Responsibilities

4.1 The QMB will:

- Provide oversight of compliance with relevant regulatory standards and statutory housing duties
- Monitor delivery of the Management Agreement and associated Delivery Plan.
- Scrutinise performance, risk, financial and compliance information
- Consider whether sufficient assurance exists in key areas of landlord and housing service delivery
- Receive assurance on SCH governance arrangements, including Board oversight of risk, performance and compliance
- Provide constructive challenge where performance, compliance or assurance is unclear or insufficient
- Monitor progress against significant audit findings, recommendations and improvement actions.
- Recommend escalation where significant risks or concerns are identified

4.2 Members are expected to seek assurance through constructive challenge, testing information presented and considering whether the evidence provided supports the assurances being reported.

5. Scope of Oversight

5.1 The QMB may consider any matter relevant to landlord compliance, tenant outcomes or statutory housing functions.

5.2 Its oversight includes:

- Safety and quality of homes
- Asset management and repairs
- Tenant engagement, complaints and Tenant Satisfaction Measures
- Tenancy management and allocations
- Neighbourhood management and anti-social behaviour
- Homelessness and housing needs services
- Governance, risk management and compliance
- Financial matters that may impact service delivery or compliance

6. Reporting and Assurance

6.1 The QMB will receive high-level information on performance, compliance, risk and assurance.

6.2 Information presented to the QMB should focus on:

- Significant risks and emerging issues
- Areas of underperformance
- Compliance concerns
- Progress against improvement actions
- Any areas where assurance is limited or still developing

7. Membership

7.1 Membership of the QMB comprises:

- Cabinet Portfolio Holder for Housing (Chair)
- Opposition Housing Spokespersons
- Senior Council officers with responsibility for Housing, Finance and Audit
- SCH Board Chair
- Senior SCH representatives
- Representative from SCH's Customer Experience Committee

7.2 The QMB may invite other officers, advisers or specialists to attend where appropriate.

8. Meetings

8.1 The QMB will meet quarterly and may meet more frequently if requested by the Chair where significant issues, risks or concerns arise.

8.2 Meetings will focus on:

- Assurance
- Oversight and challenge
- Significant risks and exceptions
- Outcomes for tenants and residents

9. Reporting and Escalation

9.1 The QMB supports, but does not replace, the Council's formal governance arrangements.

9.2 Where significant concerns are identified relating to tenant safety, regulatory compliance, statutory duties, governance, financial sustainability or service delivery, the QMB may recommend escalation through the appropriate governance route.

9.3 This may include:

- Chief Executive
- Audit Committee
- Cabinet

10. Review

10.1 These Terms of Reference will be reviewed annually to ensure they remain effective, proportionate and aligned with the Council's regulatory assurance framework.

Meeting of the Board

Report title:	Strategic Performance Report – Quarter 1 2026/27		
Meeting date:	15 September 2026		
Report from:	Becci Youlden - Head of Customer Experience		
Report author/ lead officer:	Becci Youlden	becciyoulden@solihullcommunityhousing.org.uk	
Report type:	~~Confidential~~ Open		
Decision type:	Assurance	~~Approval~~	Information

1. Report overview/purpose

1.1 This report provides the Board with an update on SCH's Quarter 1 2026/27 Strategic Performance Report.

2. Recommendations

2.1 Board is recommended to:

1) **Review** quarter one performance contained within the Strategic Performance Report.
2) **Note and comment** on the action being taken where performance targets are not being met.

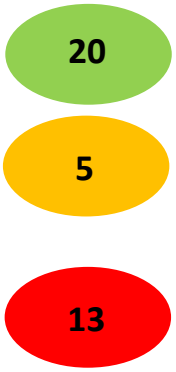
3. Background

3.1 The main SCH Strategic Performance Report is a consolidation of individual dashboards covering Asset Management, Building Safety and Compliance, Housing Services and Customer and Corporate Services.

3.2 The dashboards include regulatory indicators such as Tenant Satisfaction Measures (TSMs) and other high-level Key Performance Indicators (KPIs) which support the Delivery Plan. The report is attached at Appendix 1.

4. Performance Measures

4.1 There are 38 KPIs where targets have been set across the dashboards. At the end of Quarter 1 2026/27, 66% of KPIs were at or above target or were within tolerance.



Target was met

Performance was within the tolerance range

Target has not been met

4.2 Performance remains mixed across the organisation, with strong performance in a number of areas alongside several KPIs requiring continued management focus.

4.3 Areas where the target was met or exceeded

4.3.1 Key areas of positive performance include:

- **Stage 1 complaints resolved within timescale** – 98.05% for Q1, with 100% completed within timescale in June.
- **Overall satisfaction with services provided by SCH** – 81.08%, above the target of 78%.
- **Satisfaction that SCH listens to and acts upon tenants' views** – 75.89%, above the target of 70%.
- **Satisfaction that SCH keeps tenants informed about things that matter to them** – 79.49%, above the target of 77%.
- **Satisfaction that SCH treats tenants fairly and with respect** – 85.19%, above the target of 85%.
- **Satisfaction with SCH's approach to handling complaints** – 47.37%, above the target of 40%.
- **Customer satisfaction with Disabled Facilities Grants** – 96.55%, above the target of 94%.
- **Homes that do not meet the Decent Homes Standard** – 1.32% compared to a target of 1.75%.
- **Non-emergency repairs completed within target timescale** – 87.91% for Q1, above the target of 85%.
- **Satisfaction with repairs in the last 12 months** – 80.21%, above the target of 80%.
- **Satisfaction with the time taken to complete the last repair** – 80.85%, above the target of 80%.
- **Satisfaction that the home is well maintained** – 77.62%, above the target of 75%.
- **Satisfaction that SCH makes a positive contribution to the neighbourhood** – 72.36%, above the target of 70%.
- **Percentage of rent loss due to voids** – 0.91%, better than the target of 1.25%.
- **Dwellings vacant but available to let** – 0.76%, better than the target of 0.8%.
- **Average relet time** – 56.19 days, better than the target of 60 days.
- **Average stay in temporary accommodation for adult-only households** – 68 days, better than the target of 120 days.

4.3.2 The dashboard confirms strong performance against the TSM perception measures in the quarter one survey and overall satisfaction is the second highest quarterly satisfaction score achieved by SCH.

4.4 Areas where performance requires improvement

4.4.1 **Stage 2 complaints resolved within timescale -** Stage 2 complaints resolved within timescale were 68.85% for Q1, against a target of 96%. Nineteen Stage 2 complaints were completed outside the required timescale in June.

4.4.2 An external audit of SCH's complaint timescale calculation methodology, undertaken by Housemark in April 2026, identified that a number of complaints should have been classified as late because acknowledgement letters had not been sent within five working days. The issue was investigated and the majority of Stage 2 complaints were found to have been received through individual staff email accounts. This created a risk of delays when staff were on annual leave, absent or working part-time.

4.4.3 A centralised case management process has now been introduced to manage complaint correspondence. This is monitored by several officers and reduces the risk of Stage 2 complaints being missed or acknowledged late. The dashboard forecasts that the year-to-date target remains achievable.

4.4.4 To note, where acknowledgements were late, the timeframe for completion was adjusted to ensure the overall response was within timeframes set out in the complaint handling code so there was no material impact on the final outcome for the customer.

4.5 Overall transactional satisfaction

4.5.1 Overall transactional satisfaction was 83.59% for Q1, below the target of 87%. The dashboard identifies repairs and Contact Centre satisfaction as the main factors affecting the overall result, with these areas accounting for more than 80% of the transactional survey responses.

4.5.2 Analysis of customer comments identified long repair times and difficulties contacting SCH as key themes for repairs. For the Contact Centre, the main themes were final outcomes and waiting times. Reports and recommendations have been provided to the relevant service managers to support improvement.

4.5.3 The target is considered recoverable if Repairs and Contact Centre satisfaction can return to 2025/26 levels.

4.6 Contact Centre Average Speed of Answer

4.6.1 The Quarter 1 Average Speed of Answer (ASA) was 461 seconds, against a target of 210 seconds. Performance has improved month-on-month following the successful recruitment campaign in May. June performance was 354 seconds, the lowest monthly figure since August 2025.

4.6.2 Despite the recent improvement, the higher ASA during Q1 means that the annual target is likely to be non-recoverable. Continued downward trends are, however, encouraging.

4.7 Emergency repairs completed within timescale

4.7.1 Emergency repairs completed within target timescale were 91.81% for Q1, against a target of 95.5%. June performance improved to 93.95%. External emergency repairs achieved 85.92%, compared with 99.36% for internal repairs. The majority of external emergency jobs relate to out-of-hours activity and may include administrative processes affecting performance reporting.

4.7.2 This has been raised with Dodd Group and a review of the external emergency repairs process is underway to identify root causes and implement actions to improve performance.

4.8 Current tenant arrears

4.8.1 Current tenant arrears stood at 3.75% of rent debit at the end of June, against a target of 3.20%. This represents an increase of 0.32 percentage points compared with May and is 0.55 percentage points above the year-end target.

4.8.2 The position reflects a number of operational and environmental factors, including the annual rent increase, growth in Universal Credit caseloads, temporary staffing pressures, changes to patch allocations and the withdrawal of RentSense as part of the transition back to Open Housing.

4.8.3 Mitigating actions include:

- early intervention and daily arrears monitoring;
- proportionate legal enforcement;
- continued recruitment;
- partnership working with Solihull Metropolitan Borough Council;
- systems improvements; and
- increased automation, including the UC Bot introduced in April 2026.

4.8.4 Although the current trajectory is above target, arrears are tracking closely to the position reported during 2024/25 and there is confidence that performance can recover during the remainder of the year and achieve a position below the KPI target by year end.

4.9 Average stay in temporary accommodation – families with children

4.9.1 Average stay in temporary accommodation for families with children was 379 days for Q1, against a target of 250 days. This remains a challenging KPI due to the number of households in temporary accommodation awaiting move-on.

4.9.2 The movement of households who have experienced particularly long stays into permanent accommodation can have a negative impact on the KPI, while delivering a positive outcome for those households. There has nevertheless been a reduction in the number of households that have been in temporary accommodation for one year or more, from 70 to 59 year-on-year.

4.9.3 Changes to the Housing Allocation Scheme are supporting more households to move into suitable social housing. The service is also focusing on prevention and alternative tenure options, including the private rented sector.

4.9.4 Performance is expected to fluctuate during the year, but the increased priority afforded to homeless households is expected to support a reduction in temporary accommodation over time.

4.10 Homeless approaches where prevention or relief achieved

4.10.1 Performance was 50% for Q1, against a target of 58%. Of positive outcomes achieved, 61.76% were achieved during the prevention period, compared with 41.8% during the relief period. The service continues to focus on early intervention, detailed case reviews, negotiation, supported accommodation and private rented sector options.

4.10.2 The service restructure is expected to provide greater focus on this KPI and the forecast remains that the target can be achieved by year end.

4.11 Percentage of homes with an Energy Performance Certificate (EPC) rating of C or above

4.11.1 Performance was 75%, against a target of 76%. The reported position is based on properties with a current EPC, properties with an expired EPC, properties with a Reduced Data Standard Assessment Procedure (RdSAP) calculation and properties without a Standard Assessment Procedure (SAP) calculation.

4.11.2 Work to improve the energy efficiency of the housing stock will continue to be monitored through the Asset Management performance framework.

4.12. Building Safety and Compliance

4.12.1 Building Safety and Compliance indicators remain part of the SCH Strategic Performance dashboard and contribute to the overall KPI position reported in this report. Detailed performance, statutory compliance and improvement activity are reported separately to Board through the *Building Safety and Compliance Performance Report – Quarter 1 2026/27* (Agenda Item 9).

4.12.2 This separate report provides detailed assurance on gas, electrical, fire, water, asbestos, lifts, damp and mould and follow-on compliance actions.

5. Supporting the SCH Delivery Plan

5.1 The Strategic Performance Report is a key part of our governance and assurance framework which is at the heart of our strategic aim to build a stronger organisation, and a key tool for assessing progress with our Delivery Plan aims.

6. Consultation and engagement

6.1 Residents have contributed to the reports through engagement activity, complaints and completion of satisfaction surveys.

7. Financial implications

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

8. Legal implications

8.1 Tenant Satisfaction Measures and associated perception indicators are regulatory requirements. Accurate calculation and management of the TSMs is necessary to ensure SCH meets its regulatory obligations.

9. Risk implications

9.1 The Strategic Performance Report provides oversight of performance against key strategic and regulatory measures.

9.2 Where performance is below target, management actions are in place to improve performance and mitigate associated risks.

10. Equalities implications

10.1 There are no equalities implications arising directly from this report.

11. List of appendices

- Appendix 1 - SCH Strategic Performance Report - Q1

Item 8 - Appendix 1

Definitions

Recoverable		Front page	Indicators where it is anticipated target can be met by the end of financial year
Non Recoverable		Front page	Indicators where it is not anticipated target can be met by the end of financial year
Downward trend		Front page	Indicators which are within tolerance of target, and performance is worsening
Upward trend		Front page	Indicators which may or may not be meeting target, but are seeing a positive improvement in performance
CH01a	Stage 1 complaints per 1,000 properties	TSM	Number of stage 1 complaints which meet the TSM definition received in month, scaled by stock number
CH01b	Stage 2 complaints per 1,000 properties	TSM	Number of stage 2 complaints which meet the TSM definition received in month, scaled by stock number
CH02a	Complaints resolved in timescale (Stage 1)	TSM	Percentage of stage 1 complaints meeting the TSM definition received in month completed in target timescale
CH02b	Complaints resolved in timescale (Stage 2)	TSM	Percentage of stage 2 complaints meeting the TSM definition received in month completed in target timescale
NM01	ASB cases per 1,000 properties	TSM	Number of Public ASB cases received in month, scaled by stock number
RP01	Homes that do not meet the Decent Homes Standard	TSM	Percentage of stock which fails Decent Homes Standard
RP02a	Repairs completed within target timescale (emergency)	TSM	Percentage of emergency responsive repairs completed in month which have met their target timescale
RP02b	Repairs completed within target timescale (non-emergency)	TSM	Percentage of non-emergency responsive repairs completed in month which have met their target timescale
BS01	Percentage of properties with valid gas certificate (AM1a)	TSM	Percentage of properties on the gas contract which had a valid gas certificate at the end of reporting month
BS02	Percentage non-domestic assets covered by a valid FRA (AM1c)	TSM	Percentage of properties which require an FRA which have a valid assessment at the end of reporting month
BS03	Percentage known asbestos locations re-inspected within benchmarked period (communal areas) (AM1d)	TSM	Percentage of properties which require an asbestos inspection which have a valid inspection at the end of reporting month
BS04	Percentage of relevant water installations covered by a risk assessment (AM1e)	TSM	Percentage of properties which require a legionella check which have a valid assessment at the end of reporting month
BS05	Percentage communal passenger lifts that require a thorough examinations (LOLER) (AM1f)	TSM	Percentage of properties with use of a passenger lift which have a valid examination at the end of reporting month
TP01	Overall satisfaction with services provided by SCH	TSM	Quarterly satisfaction survey completed by Acuity
TP02	Repair in the last 12 months	TSM	Quarterly satisfaction survey completed by Acuity
TP03	Time taken to complete the last repair	TSM	Quarterly satisfaction survey completed by Acuity
TP04	Home is well maintained	TSM	Quarterly satisfaction survey completed by Acuity
TP05	Home is safe	TSM	Quarterly satisfaction survey completed by Acuity

TP06	Landlord listens to and acts upon tenants' views	TSM	Quarterly satisfaction survey completed by Acuity
TP07	Landlord keeps you informed about things that matter to you	TSM	Quarterly satisfaction survey completed by Acuity
TP08	Landlord treats me fairly and with respect	TSM	Quarterly satisfaction survey completed by Acuity
TP09	SCH approach to handling complaints	TSM	Quarterly satisfaction survey completed by Acuity
TP10	Landlord keeps communal areas clean and safe	TSM	Quarterly satisfaction survey completed by Acuity
TP11	SCH makes a positive contribution to neighbourhood	TSM	Quarterly satisfaction survey completed by Acuity
TP12	SCH approach to handling ASB	TSM	Quarterly satisfaction survey completed by Acuity
AM1b	Percentage domestic properties with a satisfactory Electrical Installation Condition Report	SCH KPI	Percentage of properties which have a valid 5 year test certificate at the end of reporting month
AM1k	Percentage of fire safety remedial actions completed to timescale	SCH KPI	Percentage of remedial actions completed in month, within their target timescale
DM1	Percentage Damp and Mould inspections completed within timescale	Awaab's Law	Percentage of damp inspections completed in month which have met their target timescale
DM2	Percentage Damp and Mould remedials completed within timescales	Awaabs Law	Percentage of damp remedial works completed in month which have met their target timescale
RL13	Percentage of rent loss due to voids	SCH KPI	Percentage of rent loss from void properties, excluding non lettable properties
CTR15	Current tenant arrears as % of rent debit	SCH KPI	Snapshot position at the end of the month of current tenant arrears of total rent debit
HO1	Average stay in temporary accommodation (all) - days	SCH KPI	Average stay in TA for households which have left during reporting month
HO1a	Average stay in temporary accommodation (families with children) - days	SCH KPI	Average stay in TA for households with dependents which have left during reporting month
HO5	Percentage of homeless approaches where prevention or relief achieved	SCH KPI	Percentage of relief and prevention cases which have ended in month with a successful outcome
WB13	Customer satisfaction (disabled facilities grants)	SCH KPI	From transactional wellbeing survey
CR2	Overall satisfaction (transactional)	SCH KPI	From all transactional surveys completed in month, overall satisfaction with service provided by SCH
CR36	Contact centre ASA	SCH KPI	Average seconds to answer incoming calls to contact centre

Customer & Corporate Services Dashboard

			Apr-26	May-26	Jun-26		YTD		26/27 Target	25/26 Target	Benchmark*	DoT**	Comment
CH01a	Stage 1 complaints per 1,000 properties	TSM MI	5.22	3.69	8.71		17.62		N/A	N/A	46.30	N/A	**Status:** The 85 Stage 1 complaints received in June is the highest number on record (previously 71 in Jan-26). There is no obvious explanation for this spike in complaints, but there was a small increase in homelessness complaints, and the two bank holidays and school half term week in May could also be a factor. **To note:** The numbers relate to complaints that come under the TSM definition. It excludes non-LCRA customers.
CH01b	Stage 2 complaints per 1,000 properties	TSM MI	1.74	1.74	1.90		5.38		N/A	N/A	7.70	N/A	**Status:** There were 19 stage 2 complaints in May, slightly over the 12 month rolling average of 15.
CH02a	Complaints resolved in timescale (Stage 1)	TSM MI	96.23%	98.11%	100.00%		98.05%		90.00%	85.00%	85.90%	↑	**Status:** 63 out of 63 Stage 1 complaints were completed on time, the second highest number resolved in a month **Forecast :** On target.
CH02b	Complaints resolved in timescale (Stage 2)	TSM MI	56.25%	93.33%	63.33%		68.85%		96.00%	96.00%	85.00%	↓	**Status:** 19 out of 61 Stage 2 complaints were out of time in June. **Issue**: All 19 out of time complaints were due to the Acknowledgment target date not being met, and this not being included in the mwthodology for calculation (picked up thuohth Housemark extrnal audit). Following investigation this was due to stgasge 2 requests coming through to individual staff ,which were not picked up dur to Leave, Sicness or part time working. **Mitigation**: System changes through create to central correspondance to ensure that stage 2 requests are not processed late. **Forecast:** The YTD target is achievable.
TP01	Overall satisfaction with services provided by SCH	TSM P			81.08%		81.08%		78.00%	80.00%	71.10%	↑	**Status:** 81.08% is the 2nd highest quarterly overall satisfaction achieved by SCH
TP06	Satisfaction that SCH listens to and acts upon tenants' views	TSM P	-	-	75.89%		75.89%		70.00%	71.00%	59.10%	↑	**Status:** The Q1 satisfaction score is 5% higher than in Q4 25/26 and the highest since Acuity surveys began
TP07	Satisfaction that SCH keeps you informed about things that matter to you	TSM P	-	-	79.49%	-	79.49%	-	77.00%	79.00%	68.50%	↓	**Status:** Satisfaction is over target and slightly lower than the 25/26 Q4 score of 80%
TP08	Satisfaction that SCH treats me fairly and with respect	TSM P	-	-	85.19%	-	85.19%	-	85.00%	85.00%	77.00%	↔	**Status:** Figure is over target and the same as the previous quarter.

TP09	Satisfaction with SCH's approach to handling complaints	TSM P	-	-	47.37%	-	47.37%	-	40.00%	45.00%	34.10%	↑	**Status:** 47% satisfaction is over target and the highest since 24/25 Q1, but the low number of surveys made on this TSM (19 this quarter) mean that this TSM value can very significantly across the year.
WB13	Customer satisfaction (disabled facilities grants)	SCH KPI	92.86%	100.00%	100.00%		96.55%		94.00%	94.00%	N/A	↔	**Status:** Meets target, with just one dissatisfied customer in Q1
CR2	Overall satisfaction (transactional)	SCH KPI	87.25%	80.08%	82.92%		83.59%		87.00%	87.00%	N/A	↑	**Status:** With 8/9 surveys received, transactional survey will finish below target in June **Issue:** Repairs and Contact Centre satisfaction has been below the 25/26 average for the last 2 months and with these containing over 80% of the total surveys, it has a big affect on the overall satisfaction Copilot was used to analyse comments from the previous and current years to investigate reasons for this drop and recommendations to improve customer satisfaction. These reports have been sent to the repsective managers. For repairs the two main themes given for the drop in satisfaction are long repair times and difficulty contacting SCH, the two top themes for Contact Centre are final outcome and wait times. **Mitigating Actions:** The above mentioned reports give a number of recommendations on ways to improve satisfaction. **Forecast**: The target is recoverable is Repairs and Contact Centre satisfaction can be improved to 2025/26 levels. The two main themse for the drop in Contact Centre satisfaction are the final outcome and speed of answer.
CR36	Contact centre ASA	SCH KPI	709	389	354		461		210	210	185	↑	**Status:** ASA improved again in June, despite there being slightly more calls per day than in May. ASA in June was the lowest since Aug-25. **ASA 354 (excluding callback calls)**: 389 seconds **Calls Offered** : 9,209 calls (May 7,868) **% Calls Answered**: 76% (May 77%) **Forecast:** Due to the higher ASA across Q1 it is likely that this KPI is not recoverable, though the recent downward trends are encouraging.

*Benchmark based on median performance from 2024/25 RSH local authority and ALMO and benchmarking
**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

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Asset Management Dashboard

			Apr-26	May-26	Jun-26		YTD		26/27 Target	25/26 Target	Benchmark*	DoT**	Comment
RP01	Homes that do not meet the Decent Homes Standard	TSM MI	1.13%	1.21%	1.32%		1.32%		1.75%	2.00%	1.74%	↓	**Status:** Monthly reporting on this KPI reflects a snapshot in time and hence can vary month on month. Works to non-decent properties are being prioritised with the end of year target being maximum 1.75% non-decent.
RP02a	Repairs completed within target timescale (emergency)	TSM MI	89.28%	91.83%	93.95%		91.81%		95.50%	95.50%	95.00%	↑	**Issue:** 93.95% of emergency repairs were completed within target timescales in June. Performance for external emergency repairs was 85.92%, compared to 99.36% for internal repairs. Majority of external jobs relate to OOH, which may be administrative processes affecting performance reporting. **Mitigation:** This has been raised to Dodd Group to further investigate if this is an administrative process issue. A review of the external emergency repairs process is underway to identify the root causes and implement actions to improve performance. **Timescales:** Sept 2026
RP02b	Repairs completed within target timescale (non-emergency)	TSM MI	87.37%	89.08%	87.30%		87.91%		85.00%	85.00%	84.80%	↓	**Status:** 78.36% of non-emergency repairs were completed within target timescales in June. Performance for external non-emergency repairs was 91.68%, while internal repairs achieved 69.49%. **Mitigating Actions:** Temporary additional resources are supporting improvements in internal repairs performance following long term sick impacting on operative resource. A review of the overall service is underway to identify long-term solutions for sustained performance improvement. **Timescales:** Ongoing
TP02	Satisfaction with repair in the last 12 months	TSM P	-		80.21%		80.21%		80.00%	80.00%	72.80%	↑	**Status:** Figure is over target and 3% higher than the previous quarter.
TP03	Satisfaction with time taken to complete the last repair	TSM P	-		80.85%		80.85%		80.00%	76.00%	68.30%	↑	**Status:** Satisfaction is over target.
TP04	Satisfaction that home is well maintained	TSM P	-		77.62%		77.62%		75.00%	80.00%	71.00%	↑	**Status:** The figure is over target for Q1
	Percentage of homes with an EPC rate of C or above	SCH	75.00%	75.00%	75.00%		75.00%		76.00%	76.00%		↔	**Status:** The percentage stock EPC C and above is based upon 5,199 properties with a current EPC, 940 properties with an expired EPC, 3,529 properties with an RdSAP calculation and 7 properties with no SAP calculation.

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**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

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Housing Services Dashboard

			Apr-26	May-26	Jun-26		YTD		26/27 Target	25/26 Target	Benchmark*	DoT**	Comment
NM01	ASB cases per 1,000 properties	TSM MI	2.56	2.46	1.82		6.91		N/A	N/A	43.40	N/A	**Status:** 18 ASB cases were recorded in June, lower than the 12 month average of 23.
NM01a	ASB cases per 1,000 properties (Hate Crime)	TSM MI	0.10	0.00	0.00		0.10		N/A	N/A	0.50	N/A	**Status**: There were 0 Hate Crimes recorded in June.
TP10	Satisfaction that SCH keeps communal areas clean and safe	TSM P	-	-	70.59%		70.59%		72.00%	70.00%	65.80%	↑	**Status:** Satisfaction is slightly below target, though up from 25/26 Q4 (68%).
TP11	Satisfaction that SCH makes a positive contribution to the neighbourhood	TSM P	-	-	72.36%		72.36%		70.00%	74.00%	63.70%	↑	**Status:** Q1 figures are above target and 2% higher than the previous quarter.
TP12	Satisfaction with SCH's approach to handling ASB	TSM P	-	-	58.33%		58.33%		60.00%	60.00%	58.00%	↑	**Status:** ASB Satisfaction for Q1 is slightly below target, but higher than the 25/26 year end figure of 54%
VL13	Percentage of rent loss due to voids(Exc. TA)	SCH KPI	0.89%	0.89%	0.91%		0.91%		1.25%	1.25%	2.34%	↓	**Status:** Meets Target
VL4	Percentage of dwellings vacant but available to let	SCH KPI	0.80%	0.79%	0.76%		0.76%		0.80%	N/A		↑	**Status:** Meets Target
VL1	Average relet time (all)	SCH KPI	54.40	60.20	53.03		56.19		60 days	N/A		↑	**Status:** Meets target. June re-let time was 6 days lower than in May.
WR15	Current tenant arrears as % of rent debit	SCH KPI	3.33%	3.43%	3.75%		3.75%		3.20%	3.50%	2.37%	↓	**Status:** As at June, rent arrears stand at 3.75%, representing an increase of 0.32% compared with May. Whilst this is 0.55% above the year-end target of 3.20%, the overall position should be viewed in the context of several significant operational and environmental factors. These include the annual rent increase, growth in Universal Credit (UC) caseloads, temporary staffing pressures, changes to patch allocations, and the withdrawal of RentSense as part of the transition back to Open Housing. **Mitigation:** To maintain performance and manage risk, the following measures remain in place: • Early intervention and daily arrears monitoring to maximise prevention opportunities and support rent collection. • Proportionate legal enforcement, with 49 notices issued in June, broadly in line with the previous year. A total of 108 notices have been issued during Q1, representing a reduction of 49 notices compared with the same period in 2025/26. • Successful cessation of RentSense (Mobysoft) on 6 June 2026 and transition back to Open Housing. • Balanced weekly collection activity, combining firm enforcement where appropriate with targeted tenant support. • Continued partnership working with SMBC, particularly in relation to the effective application of Housing Payments. • Ongoing focus on system resilience following the MRI health check completed in January 2026. Whilst recommendations have been identified, implementation by MRI remains outstanding. • Continued automation improvements, including the introduction of the UC Bot in April 2026, which is already delivering efficiency gains and creating additional operational capacity **Timeframe / forecast:** Whilst cost of living pressures, seasonal trends, and increasing UC caseloads are expected to remain challenging, arrears performance remains broadly stable and is tracking closely to the position reported during 2024/25. Although the
HO1b	Average stay in temporary accommodation (adult only households) - days	SCH KPI	47	48	88		68		120	N/A	N/A	↓	**Status:** This KPI is within target, although shows an increase from last month. We have some more complex individuals in TA currently and all the move on is additionally impacted by a reduction in void properties suitable for the cohort, as well as staffing pressures in the team. Status: This is having an adverse effect upon the casework as staff are picking up additional duty and tasks. **Mitigating Actions:** We aren't complacent around this KPI despite being within target. Management need to carry out robust case reviews to ensure timely decision and robust well-informed decisions are made around priority need. We need to work in a timely way to avoid the burden of main duty decisions. Not least, we need to be striving for prevention outcomes in the first place. Given the staffing pressures, we cannot deal with presentations as quickly as we would like, but are always working on solutions to address this. **Timeframe:** We are within the KPI, but need to remain committed to this, and avoid slippage as seen this month. **Forecast:** As above, we need to work continually to keep this KPI in target and not let the good work slip back.

HO1a	Average stay in temporary accommodation (families with children) - days	SCH KPI	**346**	**364**	**463**		**379**		250	95	N/A		**Status:** The KPI of under 250 days for households with children remains a challenging one, given the number of households in TA and awaiting move-on. Equally, as this equates to an average stay and we are moving on long staying households – this month is no different. Impacting upon the average stay for families with children there were just 8 vacations, though one of which was 3 ½ years and another 4 over 1 year. Most notably however, year on year the number of households that have been in TA for 1 year or more has dropped from 70 to 59, a 16% decrease. This is a positive message. **Mitigating Actions:** As a result of the changes to the housing allocation scheme, many of these households are being matched to suitable tenancies and there is an increased move on from TA. We need to maximise our ability to prevent homelessness in the first place and consider and promote alternative outcomes of tenure such as the private rented sector. **Timeframe**: Mitigating actions around alternative tenures is ongoing and the hope is that we can, by being involved earlier , prevent more households from becoming homeless. Equally, the additionally priority from the housing allocation scheme will come to fruition with reducing numbers expected in TA over the next 12 months. **Forecast:** I expect a fair amount of fluctuation in this KPI over the next 12 months, particularly as the target is affected by the stay at the point in which they moved on from TA. Given the increased number of families matched to social housing properties, we are additionally managing increasing requests for a review on the basis of suitability, although in the main our decisions are being upheld which is positive.
HO5	Percentage of homeless approaches where prevention or relief achieved	SCH KPI	**47.58%**	**49.41%**	**53.06%**		**50.00%**		58.00%	60.00%	N/A		**Status:** Achieving positive outcomes in the prevention and relief period is more challenging to do. We try all we can through negotiation to prevent homelessness, however one they become homeless, then solutions are more difficult to achieve. Outcomes remain astray from the target of 58%. Looking at this more closely, 61.76% of positive outcomes were in the prevention period, compared to 41.8% in the relief period. Of these, two private sector tenancies were secured in the prevention period and 1 in relief via Solihome. **Mitigating Actions:** This has been and continues to be an area of focus, and the team are encouraged to be innovative, as well as carrying out more robust casework and making negative decisions where it is deemed to be the case. We have an in-house link to supported provision and the private rented sector which helps. The Team leaders carry out detailed case reviews, and this helps to identify solutions. **Timeframe:** All mitigating actions are in place; we just need to keep HO5 as an area of attention to keep the momentum. **Forecast:** We anticipate that throughout the year, and as the service restructure settles this will allow us to concentrate on KPIs and. HO5 , to achieve the target set.
H08	Total households in temporary accommodation (all)	SCH KPI	**204**	**202**	**207**		**207**		**tracker indicator**	N/A	N/A		Whilst there is a small increase of 3 households in TA , this is still evidencing that we are focusing on reducing the overall TA numbers. There is a real collaborative effort across the team to move households on. Again, a factor, whilst not an excuse, the staff levels supporting with TA due to team sickness are lower and thus inevitably slowing down processes.
HO8b	Total households in temporary accommodation with children(Hotel not included)	SCH KPI	**178**	**176**	**179**		**179**		**tracker indicator**	N/A	N/A		After a reduction last month from 178 (April) to 176 (May), we have an increase of families with children in TA to 179 (3 from the previous month). At the close of May 429 children were in TA, and in the month of June 435 – an increase of 6.

*Benchmark based on median performance from 2024/25 RSH local authority and ALMO and benchmarking
**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

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Building Safety & Compliance Dashboard

			Apr-26	May-26	Jun-26		YTD		26/27 Target	25/26 Target	Benchmark*	DoT	Comment
BS01	Percentage of properties with valid gas certificate	TSM MI	99.97%	99.97%	100.00%		100.00%		100.00%	100.00%	99.97%	↑	Meets target.
BS02	Percentage non-domestic assets covered by a valid FRA	TSM MI	100.00%	100.00%	97.35%		97.35%		100.00%	100.00%	100.00%	↓	**Status:** There were 18 fire risk assessment outstanding at the end of June. . **Mitigation:** All Fire Risk Assessment were completed by end of June.We continue to experience delays in the receiving of this data. SLA for provision of reports will continue to be monitored and any intervention required will be made. **Timeframe:** Ongoing
BS03	Percentage known asbestos locations re-inspected within benchmarked period (communal areas)	TSM MI	100.00%	99.27%	94.19%		94.19%		100.00%	100.00%	100.00%	↓	**Status:** There were 40 communal Asbestos re-inspections overdue at the end of June. **Mitigating Actions:** All overdue re-inspection are now complete. 33 of the overdue were completed within 3 days of end of month, with the remaining 8 re-inspections completed on 10/07/2026. **Timeframe:** These have all now been completed.
BS04	Percentage of relevant water installations covered by a risk assessment	TSM MI	100.00%	100.00%	84.62%		84.62%		100.00%	100.00%	100.00%	↓	**Status:** 8 WRAs are overdue at end June 2026. 6 were completed before the end of June but awaiting signoff by contractor. **Oldest Compliance Due Date** : The oldest overdue WRA has a due date of 14/06/2026. **Mitigating Actions**: No significant changes to the water system since the existing WRA was completed with remedial works continuing. **Timeframe**: Both overdue WRA are being completed on 18/07/2026.
BS05	Percentage communal passenger lifts that require a thorough examinations (LOLER)	TSM MI	100.00%	100.00%	100.00%		100.00%		100.00%	100.00%	100.00%	↔	Meets target.
TP05	Satisfaction that home is safe	TSM P	-		81.82%		81.82%		80.00%	81.00%	77.30%	↓	**Status**: Meets target.
AM1b	Percentage domestic properties with a satisfactory Electrical Installation Condition Report	SCH KPI	98.77%	98.90%	98.83%		98.83%		100.00%	100.00%	95.40%	↑	**Status:** There were 113 properties overdue at the time of reporting. Of these 6 were confirmed as completed and awaiting certificates to be issued by the contractor. **Oldest Compliance Due Date:** The oldest overdue EICRs are the 4 properties which do not have record of a previous EICR. The next oldest overdue EICR was due on 08/10/2018 **Mitigating Actions:** All EICRs which are beyond the 5 year re-inspection requirement are part of performance improvement plan overseen by the Building Safety Manager. We have recruited a Legal Enforcement Officer, start date 07/07/2026. Following training, they're priority will be processing outstanding EICRs on a risk based priority. SCH have extended the remit for the Customer Experience team to include access, 2 Customer Liaison Officers have been appointed. They will work along side the Legal Enforcement Officer to gain access.
DM1	Percentage Damp and Mould inspections completed within timescale	Awaab's Law	97.98%	98.55%	89.04%		95.44%		100.00%	100.00%	N/A	↓	**Status:** Performance for damp and mould inspections was 89.04% at the end of June. In total, 74 inspections were completed and 8 were completed outside of timescale. Property 1 & 2 - Tenant requested to rebook Property 3, 4 & 5 - Not been possible to gain access Property 6 & 7 attended but mins/hours over 24 hour target Property 8 - missed job- has been scheduled **Mitigating Actions:** SCH are conducting deepdive into DMC and exploring developing case management software which will help to prevent any oversight and ensure compliance **Timescales:** phase 1 - Oct 26 phase 2 - Jan 27

DM2	Percentage Damp and Mould remedials completed within timescales	Awaab's Law	96.34%	91.67%	89.29%		92.48%		100.00%	100.00%	N/A		**Status:** Performance for damp and mould remedials was 92.48% at the end of June. There were 84 remedial cases completed in the month of June, 9 remedial cases were completed outside of the target. Property 1 & 9 – delayed due to resources Property 2 & 3 - Dodds electrical Property 4 - Delayed roof & loft repair Property 5 & 6 –appointments offered within timeframe, rescheduled to suit tenant Property 7 - Dodds loft survey Property 8 - attended but 50 mins over target cut off **Mitigating Actions:** We are currently undertaking a detailed review of the process for damp and mould cases (DMC) and no access. A Healthy Homes Manager is expected to be in post by the end of July. We are also looking to implement a tracker for all DMC jobs to improve visibility. **Note:** New methodology has been applied as per the requirements of Awaab's Law, to link all required remedial works to one job, rather than measuring them individually. For example, if a case has four jobs linked to it, if any of those jobs are completed outside of the 5/60 day target, it will be considered completed out of target against the case.
AM1k	Percentage of fire safety remedial actions completed to timescale	SCH KPI	74.36%	76.71%	81.18%		77.78%		100.00%	80.00%	N/A		**Status:** 85 actions completed in June, with 16 completed past their action due date. Performance continues to improve month-on-month. Whilst a number of actions were completed after their original due dates, there has been a continued reduction in the overall volume of open and overdue remedial actions on the risk register. This indicates progress in risk reduction. **Mitigating Actions:** All mitigation actions are in place.
AM1ka	Percentage of all follow-on compliance actions completed on time	SCH KPI	94.05%	75.68%	95.58%		92.35%		100.00%	N/A			**Status :** 588 actions completed in June, with 26 completed past their action due date. **Mitigating Actions:** All mitigation actions are in place.

*Benchmark based on median performance from 2024/25 RSH local authority and ALMO and benchmarking
**Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

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Meeting of the Board

Report title:	Building Safety and Compliance Performance Report - Quarter 1 2026/27		
Meeting date:	15 September 2026		
Report from:	Becci Youlden - Head of Customer Experience		
Report author/ lead officer:	Becci Youlden	becciyoulden@solihullcommunityhousing.org.uk	
Report type:	~~Confidential~~ Open		
Decision type:	Assurance	~~Approval~~	Information

1. Report overview/purpose

1.1 This report provides an update on quarter one performance on Building Safety and Compliance.

2. Recommendations

2.1 Board is recommended to:

1) **Review** quarter one performance.
2) **Note and comment** on the action being taken where performance targets are not being met.

3. Background

3.1 The Building Safety and Compliance Dashboard provides assurance on SCH's compliance with statutory and regulatory obligations across gas, electrical, fire, water hygiene, asbestos and lifts. It also incorporates performance on damp and mould, building safety concerns and follow-on risk actions. The report is attached at Appendix 1.

3.2 Appendix 2 - '*Landlord Stock Quality and Safety reporting'* provides supporting assurance information on landlord stock quality and safety, including gas, electrical, fire, water, asbestos, lift safety, damp and mould, stock condition and repairs.

4. Building Safety Compliance Dashboard

4.1 At the end of quarter one, overall performance across Building Safety and Compliance was stable. Gas servicing was an area of strong performance and at full compliance.

4.2 However, there remain key areas below target, most notably electrical compliance, damp and mould performance, and the completion of risk actions arising from compliance activity. These were addressed in detail in the strategic performance report (item 8 on the agenda). Targeted improvement activity is in place and maintaining compliance will remain a key priority during 2026/27.

4.3 In addition to the areas covered in the strategic performance report, there are the following key issues for Board to note:

4.4 **Communal Electrical Testing**: performance was 96.80% at the end of Quarter 1, with 21 overdue inspections. High-rise compliance was 100%.

4.5 **Water Risk Assessments (WRAs):** there were 252 outstanding actions at the end of Quarter 1, compared with 236 at the end of the previous quarter. The oldest action due date is October 2024 and 186 of the overdue actions are in domestic dwellings.

4.5.1 A Project Plan is in place to provide comprehensive oversight of the WRA remedial works. This is supported by weekly reports from the contractor and regular contract delivery meetings. A programme of water control measures is also in place, including regular monitoring of temperatures, flushing outlets and cleaning tanks. SCH has queried whether further interim measures are required via a specialist consultant while the outstanding actions continue to be progressed.

4.5.2 Phase 3 works are currently focused mainly on actions in domestic dwellings and will now expand beyond the 10% sample of properties captured through the WRA. Individual resident profiles, together with knowledge of the existing water system, will influence delivery priorities. Three repeating action types have been identified from the sampled properties, and the remedial works project is being planned on the basis of 2,024 additional remedial actions across a further 1,698 properties.

4.6 **Smoke and CO Alarms:** at the end of Quarter 1, 4.37% of homes were reported as having failed or missing smoke alarms and 5.74% of homes were reported as having failed or missing CO alarms. A programme of works has been developed and jobs have been issued to Dodds on a risk-based approach. Actions will be closed when evidence of completion is provided.

5. Supporting the SCH Delivery Plan

5.1 The Building Safety and Compliance Performance Report forms part of our Performance Management Framework and is a key part of governance and assurance. This is at the heart of our strategic aim to build a stronger organisation and a key tool for assessing progress with our Delivery Plan aims.

6. Consultation and engagement

6.1 Residents have contributed to the reports via engagement activity, complaints and completion of satisfaction surveys.

7. Financial implications

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

8. Legal implications

8.1 SCH has statutory and regulatory obligations across the building safety and compliance areas covered by this report. Maintaining accurate compliance records and completing required inspections and remedial actions is necessary to meet these obligations.

9. Risk implications

9.1 Failure to maintain statutory compliance, or delays in completing identified remedial actions, could increase health, safety, regulatory and reputational risks. Targeted improvement activity and ongoing monitoring are in place to manage these risks.

10. Equalities implications

10.1 There are no equalities implications arising directly from this report.

11. List of appendices

- Appendix 1 - Building Safety Compliance Dashboard
- Appendix 2 - Landlord Stock Quality and Safety reporting

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Item 9 - Appendix 1

Performance as at: End of June 2026

Description: Building Safety & Compliance Dashboard provides our performance against legislative and best practice cyclical anniversary dates.

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Building Safety & Compliance Dashboard

Compliance area	Total properties	Properties/assets with compliance requirement	Properties/assets with no compliance requirement	Compliant	%	Not Compliant	%	DoT*	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90 Days	Commentary	Due in next 30 days
Domestic Dwellings												
Gas	9686	7923	1763	7923	100.00%	0	0.00%	↑	**0**	**0**	Meets target.	53
Electric (5-year programme)		9686	0	9573	98.83%	113	1.17%	↓	**40**	**73**	**Status:** There were 113 properties overdue at the time of reporting. Of these 6 were confirmed as completed and awaiting certificates to be issued by the contracor. **Oldest Compliance Due Date :** The oldest overdue EICRs are the 4 properties which do not have record of a previous EICR. The next oldest overdue EICR was due on 08/10/2018 **Mitigating Actions:** All EICRs which are beyond the 5 year re-inspection requirement are part of performance improvement plan overseen by the Building Safety Manager. We have recruited a Legal Enforcement Officer, start date 07/07/2026. Following training, they're priority will be processing outstanding EICRs on a risk based priority. SCH have extended the remit for the Customer Experience team to include access, 2 Customer Liaison Officers have been appointed. They will work along side the Legal Enforcement Officer to gain access.	29
Asbestos surveys (non-statutory)		9698	0	9569	98.67%	129	1.33%	**N/A**			This an internal target to have asbestos management surveys for all property types that are pre 2000 construction. Those with post 2000 construction do not have a compliance requirement.	N/A
Communal blocks/schemes												
Gas		6	880	6	100.00%	0	0.00%	↔	**0**	**0**	Meets target.	0
Electric (5-year programme)		657	229	636	96.80%	21	3.20%	↑	**1**	**20**	**Status**: 21 communal EICRs overdue. These communal electrical installations are supplied by adjacent domestic properties, the properties are now privately owned and not the responsibilty of SCH. **Oldest Compliance Due Date :** The oldest overdue communal EICR has a due date of 08/10/2023 **Mitigating Actions:** The Capital Team are reviewing options for installing a communal electrical suppply, which will enable SCH to complete these communal electrical inspections. **Timeframe:** The Programme of work is being planned by the Capital Team	1
Asbestos surveys (re-inspection)		688	198	648	94.19%	40	5.81%	↓	**40**	**0**	**Status**: There were 40 communal Asbestos re-inspections overdue at the end of June. **Mitigating Actions: All overdue re-inspection are now complete**. 33 of the overdue were completed within 3 days of end of month, with the remaining 8 re-inspections completed on 10/07/2026. **Timeframe:** These have all now been completed.	20

Performance as at: End of June 2026

Description: Building Safety & Compliance Dashboard provides our performance against legislative and best practice cyclical anniversary dates.

Solihull Community Housing
Shaping our neighbourhoods

Building Safety & Compliance Dashboard

Compliance area	Total properties	Properties/assets with compliance requirement	Properties/assets with no compliance requirement	Compliant	%	Not Compliant	%	DoT*	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90 Days	Commentary	Due in next 30 days
Water Risk Assessment (WRA) (2-year programme)	886	52	834	44	84.62%	8	15.38%	↓	**8**	**0**	Status: 8 WRAs are overdue at end June 2026. 6 were completed before the end of June but awaiting signoff by contractor. Oldest Compliance Due Date : The oldest overdue WRA has a due date of 14/06/2026. Mitigating Actions: No significant changes to the water system since the existing WRA was completed with remedial works continuing. Timeframe: Both overdue WRA are being completed on 18/07/2026.	9
Lifts (passenger and goods)		75	N/A	75	100.00%	0	0.00%	↔	**0**	**0**	Meets target.	26
Fire Risk Assessments (FRA)		680	206	662	97.35%	18	2.72%	↔	**18**	**0**	Status: There were 18 fire risk assessment outstanding at the end of June. . Mitigation: All Fire Risk Assessment were completed by end of June.We continue to experience delays in the receiving of this data. SLA for provision of reports will continue to be monitored and any intervention required will be made. Timeframe: Ongoing	18
Communal Fire Door Inspections		37	849	11	29.73%	27	72.97%	↓	**27**	**0**	Status: There were 27 fire door inspection outstanding at the end of June. Mitigation: All Fire Door inspections were completed by end of June.We continue to experience delays in the receiving of this data. SLA for provision of reports will continue to be monitored and any intervention required will be made. Timeframe: Ongoing	0
Structural Surveys		37	849	37	100.00%	0	0.00%	↔	**0**	**0**	Meets target.	0
									0			

Damp & Mould	Jun-26		YTD		Target	Previous Year	DoT*	Commentary	
Percentage Damp and Mould Inspections completed within timescale	89.04%		95.44%		100%		↓	**Status:** Performance for damp and mould inspections was 89.04% at the end of June. In total, 74 inspections were completed and 8 were completed outside of timescale. Property 1 & 2 - Tenant requested to rebook Property 3, 4 & 5 - Not been possible to gain access Property 6 & 7 attended but mins/hours over 24 hour target Property 8 - missed job- has been scheduled **Mitigating Actions:** SCH are conducting deepdive into DMC and exploring developing case management software which will help to prevent any oversight and ensure complaince **Timescales:** phase 1 - Oct 26 phase 2 - Jan 27	

Performance as at: End of June 2026

Description: Building Safety & Compliance Dashboard provides our performance against legislative and best practice cyclical anniversary dates.

Building Safety & Compliance Dashboard

Compliance area	Total properties	Properties/assets with compliance requirement	Properties/assets with no compliance requirement	Compliant	%	Not Compliant	%	DoT*	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90 Days	Commentary	Due in next 30 days
Percentage Damp and Mould remedials completed within timescales	89.29%		92.48%		100%		⬇				**Status**: Performance for damp and mould remedials was 92.48% at the end of June. There were 84 remedial cases completed in the month of June, 9 remedial cases were completed outside of the target. Property 1 & 9 – delayed due to resources Property 2 & 3 - Dodds electrical Property 4 - Dealyed roof & loft repair Property 5 & 6 –appointments offered within timeframe, rescheduled to suit tenant Property 7 - Dodds loft survey Property 8 - attended but 50 mins over target cut off **Mitigating Actions:** We are currently undertaking a detailed review of the process for damp and mould cases (DMC) and no access. A Healthy Homes Manager is expected to be in post by the end of July. We are also looking to implement a tracker for all DMC jobs to improve visibility. **Note:** New methodology has been applied as per the requirements of Awaab's Law, to link all required remedial works to one job, rather than measuring them individually. For example, if a case has four jobs linked to it, if any of those jobs are completed outside of the 5/60 day target, it will be considered completed out of target against the case.	

*Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

**Throughout this report, there has been a change in calculation between November/December to only include socially rented stock

Description: Risk Register Performance Report provides performance on completion of follow-on action identified following compliance service visits. This measured against the recommended time period to complete the actions. High Risk Actions were erronuosly identified using the complete by date given by the contractor - of these none are actually high risk going forward SEVERITY will identify high risk actions.

Risk Register Performance

Compliance Area	Property Type		Total active actions	Total overdue	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90	Total No. of Completed YTD	High Risk		Medium Risk		Low Risk		%	Commentary	DoT	Due in next 30 days
								Overdue	Not Overdue	Overdue	Not Overdue	Overdue	Not Overdue				
Fire Risk Assessments	High-Rise	FRA Action	54	27	23	4	45	1	2	4	0	22	25	50.00%	**Status:** There were **27** overdue FRA actions at the end of the month. This an improved position compared to the last report. **Oldest Action(s) : High-Rise** 25/10/2025 **Low-Rise** 27/11/2025 **Mitigating action:** Most of the actions are historic actions where there has been problems gaining the evidence or in the case of the High Rise action that require access to the customer property, this. Actions relating to housekeeping a process has been developed with Estates to ensure these will be closed in a timely manner. We continue to work with the contractor to ensure actions have evidence directly uploaded to C365 by them directly . Actions were erronously identified as high risk as the incorrect category was used. None of the actions identified as high risk are, they are Trivial and Best Practice. We have reinstated the regular meetings with our estates team and a meeting is being scheduled for the Estates Team, BST, and Customer Engagement to work on the continuing issue of items being stored in communal areas. **Timeframe: N/A** **Forecast:** The number of overdue actions continues to reduce month on month. Our target of having zero overdue action on our risk register will remain unchanged and will be monitored on a monthly basis.	↓	3
	Low-Rise	FRA Action	163	39	36	3	225	1	6	0	1	38	117	76.07%			14
Fire Door Inspections	High-Rise	Fire Door Inspection Action(Communal)	170	1	1	0	544	0	2	0	42	1	125	99.41%	**Status :** There was 1 Overdue actions at the end of June **Mitigation:** There were delays in gaining the data to ensure the completed doors could be closed in C365 and some admin error, which has now been rectified and we continue to close these actions down, a number of duplicate actions have also been identified these are also being managed within C365. **Timeframe :** Ongoing	↑	1
		Fire Door Inspection Action(Domestic)	346	303	303	0	103	5	0	295	43	3	0	12.43%	**Status :** There were 303 Overdue actions at the end of June **Mitigation:** Because of the volume of work required, all actions will be raised as a programme of work with DODDs. **Timeframe:** Ongoing	↓	0
	Low-Rise	Fire Door Inspection Action(Communal)	174	174	174	0	8	0	0	173	0	1	0	0.00%	**Status :** There were 174 Overdue actions at the end of June **Mitigation:**The low rise communal doors form part of a betterment programme - doors that require immediate repair will still be completed under the normal remedial process all other doors will form part of the betterment programme and dates will be amended to reflect the programme dates. The work to update C365 with dates that accurately reflect the programme continues **Timeframe:** N/A	↔	0
		Fire Door Inspection Action(Domestic)	241	225	225	0	56	0	0	225	16	0	0	6.64%	**Status :** There were 225 Overdue actions at the end of June **Mitigation:** Because of the volume of work required, all actions will be raised as a programme of work with DODDs. **Timeframe:** Ongoing	↓	0
Water Risk Assessments	High-Rise		278	194	18	176	3	97	0	88	55	9	29	30.22%	**Status:** There are currently 252 outstanding WRA actions. An increase from 227 since the last report was issued. The oldest action due date is October 2024. Of the overdue actions 186 are in domestic dwellings. The existing project plan is being reviewed to prioritise domestic remedials based on learnig from Redwood House. **Oldest Actions :** 25/10/2024 **Mitigating Actions:** The Project Plan is in place to enable comprehensive oversight of the delivery of works. This is supported by weekly reports submitted to SCH by contractor and regular contract delivery meetings. A programme of water control regime is in place. This includes regular monitoring of temperatures, flushing outlets and cleaning tanks. We have queried if there is a need for further interim measures via a specialist consultant whilst we continue to progress the actions. **Timeframe**: All mitigating measures in place. **Forecast:** Phase 3 works currently underway relates in the main to actions in domestic dwellings. Phase 3 works will now expand from the 10% of properties captured with the WRA, and individual resident profiles, along with knowlegde of the existing water system, now will influence the delivery priorities.	↓	45
	Low-Rise		90	58	8	50	0	26	0	28	29	4	3	35.56%			29
Passenger Lifts (LOLER)	High-Rise		7	0	0	0	11	0	1	0	6	0	0	100.00%	Meets target	↔	0
	Low-Rise		0	0	0	0	5	0	0	0	0	0	0	100.00%	Meets target	↔	0

Risk Register Performance

Compliance Area	Property Type	Total active actions	Total overdue	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90	Total No. of Completed YTD	High Risk		Medium Risk		Low Risk		%	Commentary	DoT	Due in next 30 days
							Overdue	Not Overdue	Overdue	Not Overdue	Overdue	Not Overdue				
Asbestos	**High-Rise**	**0**	**0**	**0**	**0**	**0**	0	0	0	0	0	0	100.00%	Meets target	⇔	**0**
	Low-Rise	**0**	**0**	**0**	**0**	**0**	0	0	0	0	0	0	100.00%	Meets target	⇔	**0**
Structural Surveys	**High rise**	**167**	**37**	**37**	**0**	**37**	0	0	0	0	37	130	77.84%	**Status :** There were 37 Overdue actions at the end of June **Mitigation:** **Timeframe:**	↓	**0**

Compliance Area	Property Type	Total active actions	Total overdue	Total No. Overdue by 90 Days or Less	Total No. Overdue by More Than 90 Days	Total No. of Completed YTD	Code 1 (Danger Present)		Code 2 (Potentially Dangerous)		Further Investigation Required		%	Commentary
							Overdue	Not Overdue	Overdue	Not Overdue	Overdue	Not Overdue		
Electrical	**High-Rise**	**4**	**2**	**2**	**0**	**2**	0	0	2	2	0	0	50.00%	**Status:** There are 17 overdue actions. All actions have been instructed. Completion of the required work has been inhibited by access. **Mitigating actions:** Access issues are being monitored and managed by the Compliance Team and The Customer Experience Access Team. **Timeframe**: N/A **Forecast**: October 2026
	Low-Rise	**30**	**15**	**13**	**2**	**0**	0	0	15	15	0	0	50.00%	

Description: Gas Audit performance provides outcomes from 3rd party audits undertaken on works gas safety checks conducted by SCH's Gas contractor. The purpose of the audits is to give stakeholders assurance that the work undertaken is compliant with relevant regs and manufacturer's recommendations.

Compliance	Property Type	Total Audits Completed	Total Failed	Outcomes	Count	Commentary	DoT*
Gas	Domestic	25	3	Category 1 (At Risk or Immediately Dangerous)	1	**Status**: There was 1 At Risk situations identified in the month of May. This was due to "Flue System" - Air integrity sample point missing where combustion does not enter room. There were 0 Immediately dangerous faults identified. **Mitigating actions**: Engineer Replaced during audit, Test cap could have been removed at any stage since service date. Test caps ordered and issued to all engineers. **Timeframe**: N/A **Forecast**: N/A	
				Category 4 (Certificate Errors or Omissions)	2	**Status**: There were 2 audit findings. **Mitigating actions**: Cert rewrote, Request to remove from audit as service completion date was April. **Timeframe**: N/A **Forecast**: N/A	

Description: Building Safety Concerns dashboard provides performance on addressing fire and building safety related concerns reported by residents. Performance is measured against period allowed to address concerns raised. It also contains performance against Stage 1 complaints regarding compliance.

Building Safety Concerns

Detailed Performance	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26		YTD	RAG	Target	Commentary
Total number of building safety concerns reported	23	35	41	44	104	55	48	60	36	28	19	43	46	60	65	91				N/A	
Completed	12	26	28	32	64	30	23	28	10	4	0	12	0	26	24	32					
% Completed in timescale	100.00%	42.86%	68.75%	46.15%	59.00%	55.22%	100%	100%	100%	100%	0%	100%	100%	100%	100%	100%				85.00%	
Open High Priority Concern (Cumulative)	10	3	5	8	15	17	2	0	1	12	7	24	4	5	7	0					
Of which are overdue	9	3	1	6	14	16	0	0	1	12	0	0	0	0	3	0				0	
Open Medium Priority Concern	24	38	44	43	23	51	37	20	16	11	11	5	24	22	40	88					
Of which are overdue	5	7	7	23	12	22	0	0	0	0	0	0	0	0	0	0				0	**Status:** There were no overdue building safety concerns at the time of reporting. Job orders have been issued to complete the required works
Open Low Priority Concern	17	28	37	39	24	41	9	19	19	6	1	6	19	33	16	3					
Of which are overdue	0	10	9	11	10	16	0	0	0	0	0	0	0	0	0	0				0	**Mitigating Actions:** A work in progress report has been in put in place which has resulted in improved performance.
Total open building safety concerns	51	69	85	90	65	107	108	33	26	25	19	43	46	28	42	58					
Of which are overdue	14	20	17	40	36	54	62	0	1	8	0	0	1	0	3	0				0	**Timeframe:** N/A **Forecast:** N/A

Solihull Community Housing **Description:** Damp and Mould dashboard provides performance against timescales in terms of inspections and remedial works relating to damp and mould.

Damp & Mould

	Detailed Performance	Dec-24*	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25 Pre Awaabs law	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26		YTD		Target	Commentary
Damp & Mould Remedial Works	**Number of open remedial works out of target**	**380**	**430**	**411**	**361**	**351**	**366**	**322**	**130**	**115**	**79**	**76**	**68**	**56**	**52**	**66**	**67**	**49**	**76**	**74**		74		0	**Status**: There were 74 remedial works out of target at the end of June. **Oldest overdue remedial works:** There are 6 remedial cases where the works exceed over 6 months- these all relate to access issue, and 1 external contractor case waiting for materials. On investigation there appears to be a mix of access issues and delays with external contractors. **Mitigating Actions:** We have referred the eldest cases and are working with tenancy to try to gain access. We are currently actuoning adeep dive into Damp and Mould, and have appointed a new Healthy Homes Manager to support process and monitoring of cases. Further work is being done to resolve the outstanding external overdue works. **Timeframe:** Healthy Homes manager is due to start in post end of July.
	Number of open remedial works in target	98	120	148	136	121	92	84	98	68	70	68	113	217	178	283	341	303	243	211		211		N/A	
	Total of open remedial works	478	550	559	497	472	458	406	228	183	149	144	181	273	230	349	408	352	319	285		285		N/A	
	Remedials raised	114	174	176	174	152	115	101	148	54	135	165	175	201	223	290	256	210	157	175		542		N/A	
Damp & Mould Inspection	**Number of open inspections out of target**	**40**	**54**	**58**	**46**	**33**	**34**	**23**	**15**	**4**	**1**	**1**	**6**	**9**	**3**	**3**	**1**	**1**	**2**	**1**		1		0	**Status**: There was 1 inspecton out of target for June. This has been scheduled OOT due to customer availability. Mitigating Actions: N/A Timeframe: N/A
	Number of open inspections in target	59	79	58	60	48	27	31	0	12	34	6	0	32	0	11	50	14	20	42		42		N/A	
	Total Number of open inspections	99	133	116	106	81	61	54	15	16	35	7	6	41	3	14	51	15	22	43		43		N/A	
	Inspections raised	86	155	93	93	74	55	55	52	14	75	63	123	122	156	151	131	74	73	93		240		N/A	
HHSRS/Disrepair	Open HHSRS issues involving damp & mould (cat 1)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0									
	Open HHSRS issues involving damp & mould (cat 2)	290	310	376	451	483	483	498	504	506	508	3	2	2	1	44									
	Open disrepair cases involving damp & mould	72	77	72	71	63	67	69	72	74	73	81	81	90	99	104	130								

Solihull

Description: Smoke and CO Alarms dashboard provides performance on installation of smoke alarms in all properties, and CO alarms in properties with gas boilers.

Smoke, CO Alarms and Sprinklers Systems

Detailed Performance	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Nov-25	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26		YTD		Target	Commentary
Progress on fitting of smoke alarms	99.94%	99.94%	99.96%	99.97%	99.97%	99.99%	99.99%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	97.80%	98.17%	97.28%	96.29%	95.63%		95.63%		100.00%	**Status:** There are 423 properties reported as having failed or missing smoke alarms at the end of the month. **Oldest Actions:** The oldest smoke detector issue was identified on gas record completed on 08/05/2025. **Mitigating Actions:** A programme of works has been developed and jobs have been issued to Dodds on risk based approach. Actions will be closed down when evidence is provided. **Timeframe**: All mitigating measures in place. **Forecast:** All jobs are raised on a 28 day timescales.
Progress on fitting of CO alarms	99.97%	99.97%	99.95%	99.96%	99.96%	99.99%	99.99%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	97.14%	97.42%	96.45%	94.79%	94.26%		94.26%		100.00%	**Status:** There are 455 properties reported as having failed or missing smoke alarms at the end of the month. **Oldest Actions:** The oldest CO detector issue was identified on gas record completed on 08/05/2025. **Mitigating Actions:** A programme of works has been developed and jobs have been issued to Dodds on risk based approach. Actions will be closed down when evidence is provided. **Timeframe:** All mitigating measures in place. **Forecast:** All jobs are raised on a 28 day timescales.
Progress on fitting of Sprinklers	-	-	-	-	-	-	-	-	97.03%	97.19%	97.19%	97.19%	97.24%	97.24%	97.24%	97.24%	97.34%	97.34%		97.34%		100.00%	Out of the 1,919 high-rise flats, 51 dwellings were outstanding from the sprinkler fitting program due to access issues.
Number of Properties without Sprinklers	-	-	-	-	-	-	-	-	57	54	54	54	53	53	53	53	51	51		51		0	

Fire Incidents					
Detailed Performance	Apr-26	May-26	Jun-26	YTD	Commentary
Fire incidents in high rise properties	0	0	0	0	No incidents in June
Fire incidents in low rise properties	0	0	0	0	
Fire incidents in other residential properties	0	0	0	0	
Total fire incidents	0	0	0	0	

Description: Building Safety & Compliance Dashboard (High-Rise) provides our performance against legislative and best practice cyclical anniversary dates associated with high-rise buildings only.

Building Safety & Compliance Dashboard (High Rise)

Compliance area	Total properties	On programme	Off programme	Compliant	%	Not Compliant	%	DoT*
Domestic								
Gas	1894	431	1463	431	100.00%	0	0.00%	↔
Electric (5-year programme)		1894	0	1866	98.52%	28	1.48%	↓
Asbestos surveys (non-statutory)		1895	2	1849	97.57%	46	2.43%	N/A
Communal blocks/schemes								
Gas	37	0	37	NA	NA	0	0.00%	↔
Electric (5-year programme)		37	0	37	100.00%	0	0.00%	↔
Asbestos surveys (re-inspection)		37	0	36	97.30%	1	2.70%	↑
Water (2-year programme)		37	0	33	89.19%	4	10.81%	↓
Lifts (passenger and goods)		37	0	37	100.00%	0	0.00%	↔
Fire risk assessments		37	0	37	100.00%	0	0.00%	↔
Communal Fire Door Inspections		37	0	11	29.73%	26	70.27%	↓
Structural Surveys		37	0	37	100.00%	0	0.00%	↔

*Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

Description: Building Safety & Compliance Dashboard (Low-Rise) provides our performance against legislative and best practice cyclical anniversary dates associated with low-rise buildings only.

Building Safety & Compliance Dashboard (Low Rise)

Compliance area	Total properties	On programme	Off programme	Compliant	%	Not Compliant	%	DoT*
Domestic								
Gas	2984	2760	224	2760	100.00%	0	0.00%	↑
Electric (5-year programme)		2984	0	2906	97.39%	78	2.61%	↓
Asbestos surveys (non-statutory)		2851	153	2814	98.70%	37	1.30%	N/A
Communal blocks/schemes								
Gas	849	6	843	6	100.00%	0	0.00%	↔
Electric (5-year programme)		620	229	598	96.45%	22	3.55%	↓
Asbestos surveys (re-inspection)		651	198	612	94.01%	39	5.99%	↓
Water (2-year programme)		15	834	15	100.00%	4	26.67%	↓
Lifts (passenger and goods)		5	844	5	100.00%	0	0.00%	↔
Fire risk assessments		643	206	625	97.20%	18	2.80%	↓

*Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

Description: Building Safety & Compliance Dashboard (TSMs) provides our performance against legislative and best practice cyclical anniversary dates reported by the TSM definition outlined by the Regulator of Social Housing. Here when calculating compliance for communal blocks, the number of in scope dwellings are used as opposed to the block as one unit. E.g. for gas the number of properties varies here, as any flats in a communal block served by a communal gas boiler are included.

Technical Requirements

Building Safety & Compliance Dashboard (TSMs)

Compliance area	Total properties	On programme	Off programme	Compliant	%	Not Compliant	%	DoT*
Gas	9686	7923	1763	7923	100.00%	0	0.00%	↑
Electric		9686	0	9548	98.58%	138	1.42%	↓
Asbestos surveys (re-inspection)		4220	5466	4064	96.30%	156	3.70%	↑
Water (2-year programme)		2110	7576	1809	85.73%	301	14.27%	↓
Lifts (All lifting equipment)		1997	7689	2022	100.00%	0	0.00%	↔
Fire risk assessments		4309	5377	4239	98.38%	70	1.62%	↓

*Direction of Travel - an up arrow indicates improving performance, and a down arrow represents worsening performance between the previous two months.

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LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units owned for which gas safety checks are required	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
GAS SAFETY	Domestic gas (LGSR)	7923	7923	0	100.00%
	Communal gas (LGSR)	6	6	0	100.00%
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			N/A	
	Dwelling unit has been non-compliant for 3-6 months			N/A	
	Dwelling unit has been non-compliant for 6-12 months			N/A	
	Dwelling unit has been non-compliant for >12 months			N/A	
		No. of capped properties	**No. of capped properties over 3 months**		
	Properties with a capped gas supply	**408**	**195**		
		No of overdue checks			
	Overdue gas safety checks (<1 month)	**0**			
	Overdue gas safety checks (1-3 months)	**0**			
	Overdue gas safety checks (> 3 months)	0			
	Comments:				

Plans to return to compliance:
All properties are in compliance

Current Mitigations:
Robust policy and procedure in place which is followed

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units that require an electrical installation condition report	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
ELECTRICAL SAFETY	Domestic properties on a 5 Year EICR domestic testing cycle	9686	9573	113	98.83%
	Domestic properties on a 10 Year EICR domestic testing cycle	0	0	0	N/A
	Domestic properties that require an EICR but do not have one (Excluded from totall)	0	n/a		n/a
	Total Domestic properties	**9686**	**9573**	**113**	**98.83%**
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			40	
	Dwelling unit has been non-compliant for 3-6 months			25	
	Dwelling unit has been non-compliant for 6-12 months			14	
	Dwelling unit has been non-compliant for >12 months			34	
		Total Number of assets that require an electrical installation condition report	**Number Of Compliant Assets**	**Number of Non-Compliant Assets**	**COMPLIANCE (%)**
	Communal EICRs	657	636	21	96.80%
	For Non-compliant assets:			**Number of Non-Compliant Assets**	
	Asset has been non-compliant for <3 months			1	
	Asset has been non-compliant for 3-6 months			0	
	Asset has been non-compliant for 6-12 months			3	
	Asset has been non-compliant for >12 months			17	
	For both communal and domestic				
	For both communal and domestic	**Overdue high risk - No. of C1 (danger to life)**	**Overdue medium risk - No. of actions C2 (potentially dangerous)**	**Overdue low risk - No. of actions C3 (improvement recommended)**	
	Overdue electrical remedials (< 3 month)	0	21	28	
	Overdue electrical remedials (3-6 months)	0	3	9	
	Overdue electrical remedials (6-12 months)	0	2	14	
	Overdue electrical remedials (12+ months)	0	0	0	
	Comments:				

Plans to return to compliance:
Oldest Compliance Due Date : The oldest overdue EICRs are 4 properties which we do not have record of a previous EICR. The next oldest overdue EICR was due on 19/11/2020.
All EICRs which are beyond the 5 year re-inspection requirement are part of performance improvement plan overseen by the Building Safety Manager. We have recruited a Legal Enforcement Officer, start date 07/07/2026. Following training, they're priority will be processing outstanding EICRs on a risk based priority.
SCH have extended the remit for the Customer Experience team to include access, 2 Customer Liaison Officers have been appointed. They will work along side the Legal Enforcement Officer to gain access.

Communal area non-compliance relates to situations where there is no landlord supply and where power is drawn from adjacent privatley owned homes. A programe of works is being planned by the Capital Team to address and resolved this situaton.

Current Mitigations:
A new access procedure which mirrors the gas compliance procedure is now in place, together with a review of steps (NoSP/NTQ) ahead of seeking injunctions via legal proceses We have seen an increase in performance and access following the implementation of the new process. The team has successfully completed recruitment of two additional positions (Compliance Contract Officer & Legal Enforcement Officers).

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units owned within properties that require a Fire Risk Assessment	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
FIRE SAFETY	Fire Risk Assessments in high risk buildings	37	37	0	100.00%
	Fire Risk Assessments in non-high risk buildings	647	647	0	100.00%
	Overall Fire Risk Assessments	**684**	**684**	**0**	**100.00%**
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			0	
	Dwelling unit has been non-compliant for 3-6 months			0	
	Dwelling unit has been non-compliant for 6-12 months			0	
	Dwelling unit has been non-compliant for >12 months			0	
	Comments: All FRAs completed in the period are Type 1 FRAs. A programme of Type 3 FRAs will be completed across all HRBs before the next tranch of Type 1 FRAs are due in October. The PCFRA project has evolved following customer feedback. Process are in place to ensure that residents are regularly engaged with in line with the new regulations. All PCFRAs for residents who responded have been completed. We have agreed the the Fire Service that all information will be coloir coded and customers who have self identified and not completed an FRA will be placed within the amber category meaning that help MAY be required.				
		No. of high risk actions	**No. of medium risk actions**	**No. of low risk actions**	
	Overdue FRA remedial actions (<3 months)	**2**	**4**	**57**	
	Overdue FRA remedial actions (3-6 months)	**0**	**0**	**1**	
	Overdue FRA remedial actions (6-12 months)	**0**	**0**	**2**	
	Overdue FRA remedial actions (12+ months)	0	0	0	
	Comments: Risk rating are assigned based on a risk matrix with the following options, Trivial and Tolerable Rating = Low Risk, Moderate Rating = Medium Risk and Substantial or Intolerable Rating = High Risk. Previous ratings had been incorrectly categorised, there are no hihg risk actions there are six medium rsk actions. The associated timescales are provided by the risk assessor. Actions relating to fire doors are part of the on-going betterment programme. Delivery of the works has been impacted by access. The remaining action are being progressed through a programme works. The position continues to improve month on month with the exception of those were access has not been provided. Risk Ratings have been identified as wrong as it was based on timescales rather than severity, and is being actioned with C365 to make necessary corrections. Of the 63 total actions, there is no high risk action, the actions that are being identified as high risks are "best practices". There are 6 medium risks, 51 low risks/passive actions, and 9 best practices.				
Plans to return to compliance: A new team has been established to deal with access issues. This will help progress actions which are outstanding due to access issues. An SLA and follow up process is in place to ensure timely receipt of evidence. The issue has been highlighted to the contractor and will be discussed at the next contract meeting.					
Current Mitigations: All locations are subject to regulary fire safety checks. High rise building are also fitted with sprinkler systems. Residents are also provided with information relating to fire safety, through signage, news letters and fire safety leaflets.					

Workstream		Total Number of dwelling units in programme	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
SMOKE AND CO ALARMS	Smoke alarms / detectors	9686	9263	423	95.63%
	Carbon monoxide alarms / detectors	7923	7468	455	94.26%
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			368	
	Dwelling unit has been non-compliant for 3-6 months			220	
	Dwelling unit has been non-compliant for 6-12 months			86	
	Dwelling unit has been non-compliant for >12 months			30	
	Comments: Smoke and CO alarms are monitored and tested during the gas safety checks and electrical inspections. Where faults or non-compliance is identified, the findings are logged and monitored in Compliance 365. A programme of remedial works is underway with priority being given to properties based on known vulnerabilities. Work orders have been raised and actions will be completed on receipt of evidence *Note: The tally provided for non-compliant dwelings (423 and 455) is reported at asset level and therefore differs from the tally provided for the breakdown for the period each dwelling has been non-compliant which is reported at property level.*				

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units owned for which a legionella risk assessments is required	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)
WATER SAFETY	Legionella risk assessments	52	44	8	85%
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**	
	Dwelling unit has been non-compliant for <3 months			8	
	Dwelling unit has been non-compliant for 3-6 months			0	
	Dwelling unit has been non-compliant for 6-12 months			0	
	Dwelling unit has been non-compliant for >12 months			0	
		Number of high risk overdue remedial actions	**Number of medium risk overdue remedial actions**	**Number of low risk overdue remedial actions**	
	Overdue water safety remedial actions (< 3 months)	17	0	9	
	Overdue water safety remedial actions (3-6 months)	0	0	0	
	Overdue water safety remedial actions (6-12 months)	0	49	4	
	Overdue water safety remedial actions (12 months+)	106	67	0	
	Comments: *Please include a definition of high, medium and low risks and associated target times for completion*				

Plans to return to compliance: 6 have been completed and awaiting QC while repeat visit following No Access has been arranged for 18/07/2026 to complete the remaining 2 overdue WRA. Project Plan in place to enable comprehensive oversight of the delivery of works. This is supported by weekly reports submitted to SCH by contractor and regular contract delivery meetings. Note: The domestic actions relate to a 10% sample of properties which were assessed during the water risk assessment. We are working on the assumption that the some of the issues exist in all other properties within the same block and a remediation project plan is being produced. Analysing the action data there are 3 repeating action types generated from the sampled properties that we need to extrapolate across the remaining properties in the same blocks. The remedial works project is being planned on the premise that there will be 2,024 additional remedial actions to be completed across a further 1,698 properties. Programme of works and costing from the contractor and we are now reviewing priority order based on resident profile and water systems installed.

Current Mitigations:

A programme of water control regime is in place. This includes regular monitoring of temperatures, flushing outlets and cleaning tanks. The water control specification includes water sampling where our specialist contractor believes the control measures in place are not effective. . We have requested if there is a need for further interim measures via a specialist consultant whilst we continue to progress the actions.

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total Number of dwelling units owned within properties for which an asbestos management survey or re-inspection is required	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)	Number of properties for which an asbestos management survey or re-inspection is required
ASBESTOS SAFETY	Asbestos re-inspections	688	648	40	94.19%	
	Overdue asbestos re-inspections (< 3 months)	40				
	Overdue asbestos re-inspections (3-6 months)	0				
	Overdue asbestos re-inspections (6-12 months)	0				
	Overdue asbestos re-inspections (12+ months)	0				
	Comments:					

Plans to return to compliance:
All overdue re-inspection are now complete. 33 of the overdue were completed within 3 days of end of month, with the remaining 8 re-inspections completed on 10/07/2026.

Current Mitigations:
N/A

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Total number of dwelling units owned within properties with communal passenger lifts	Number Of Compliant dwelling units	Number of Non-Compliant dwelling units	COMPLIANCE (%)	Number of properties with communal passenger lifts
LIFT SAFETY	Passenger lifts (LOLER) servicing	1999	1999	0	100.00%	42
	For Non-compliant dwelling units:			**Number of Non-Compliant dwelling units**		
	Dwelling unit has been non-compliant for <3 months			0		
	Dwelling unit has been non-compliant for 3-6 months			0		
	Dwelling unit has been non-compliant for 6-12 months			0		
	Dwelling unit has been non-compliant for >12 months			0		
		Number of overdue remedial actions				
	Overdue remedial actions (<3 months)	0				
	Overdue remedial actions (3-6 months)	0				
	Overdue remedial actions (6-12 months)	0				
	Overdue remedial actions (12+ months)	0				
	Comments:					

Plans to return to compliance:
Meets target

Current Mitigations:
Meets target

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Number of open D&M cases	Open cases assessed as Category 1 HHSRS	
DAMP AND MOULD	Damp and mould cases	284		55 remedials jobs were raised with no Inspection. Further analysis of these jobs has evidenced that on arrival- there was no Damp or Mould present, so the inspection report is not produced. Works raised off the back of this are not damp and mould related. we are currently reviewing this process and reporting methodology.
		Number of overdue cases	**Number of overdue cases assessed as Category 1 HHSRS**	
	Cases overdue by <1 month	26		
	Cases overdue 1-3 months	12		
	Cases overdue by 3-6 months	5		
	Cases overdue by 6+ months	3		
	Comments:			

Plans to return to compliance:

New methodology has been applied as per the requirements of Awaab's Law, to link all required remedial works to one job, rather than measuring them individually. Target dates for Damp and Mould are Inspection within 24 hours or 10 days depending on level of risk (triaged by contact centre) and full remedial works completed within 60 days.

Current Mitigations:

SCH Board have signed off the extension of the no access pilot scheme which proved successful when trialled to address electrical access. The new team will now be in place by end of August 2026 and will focus on supporting access to ensure timely completion of damp and mould cases. A deep dive into Damp and Mould and the current processes and reporting are currently being produced. We are working with tenancy to try and gain access to the oldest overdue cases- as these all relate to access issues.

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: May 2026

Workstream		Total Number of Assets	Number Of Compliant Assets	Number of Non-Compliant Assets	COMPLIANCE (%)
STOCK CONDITION	Meet the Decent Homes Standard	9690	9562	128	98.68%
		Number of Assets			% of Total Number of Assets
	Assets that have had a stock condition survey within the last 2 years	5051			52.13%
	Assets that have had a stock condition survey within the last 5 years	7486			77.25%
	Assets that have had a stock condition survey within the last 10 years	8729			90.08%
	Assets that have had a stock condition survey over 10 years ago	0			0.00%
	Assets that have no stock condition survey on record	961			9.92%
	Total Number of Assets	**9690**			

SCS less than 2years old	5051
SCS 2 - 5years old	2795
SCS 6 - 10years old	883
SCS >10years	0
Assets that have no stock condition survey on record	961
Total	9690

Comments:

Alongside the current programme of stock condition surveys we are also prioritising properties that have not yet had a stock condition survey currently at 961, a reduction from 1079 last month.

We have a rolling programme of circa 2000 SCS per year. Through 2026/27 additonal survey will be undertaken in response to bulk SCS undertaken in 2021/22. To address this situation, SCH have commissioned Pennington Choices to undertake an additional 2000 SCS to those that are planned in house, this financial year taking the total number of SCS targeted 2026/27 to circa 4000+ and the target of 85% of SCH managed properties with a SCS within the past 5 years.

Plans to return to compliance:

Capital programmes works during 2026/2027 are prioritising non decent stock and properties with the potential to become non decent.

No access or hard to access homes where SCS are needed will be included in the scope of works via the new No Access team/process.

Current Mitigations:

Additional resources will support the new increased capacity within the inhouse team.

LANDLORD: Solihull Community Housing

DATE AT WHICH DATA BELOW IS CORRECT: June 2026

Workstream		Overdue WIP : 591			
		Emergency	Urgent	Routine	Standard
REPAIRS	Overdue (< 3 months)	106	17	294	64
	Overdue (3-6 months)	13	0	59	7
	Overdue (6-12 months)	0	0	25	0
	Overdue (12 + months)	0	0	6	0
	Total number of overdue repairs by classification	**119**	**17**	**384**	**71**
	Total number of overdue repairs - DLO	**0**	**1**	**283**	**60**
	Total number of overdue repairs - Contractors	**119**	**16**	**101**	**11**
	Comments: *Please include a definition of Emergency, urgent, routine, standard (and amend classifications where required).*				

Plans to clear backlog: A review of Internal resource is underway to ensure DLO has sufficient resource to deliver service. External jobs are being impacted by data transfer issues within the interface. On investigation, of the 119 overdue emergency jobs, 103 jobs were assigned to Dodd Groups, the majority of these are out of hours jobs. The 17 overdue urgent jobs are again mostly sitting with Dodds Group. This has been raised to them to investigate, and may be a procedural issue for closing down following OOH call outs. Looking at the overdue routine cases, 70 are internal jobs, 18 have abondoned/cancelled since reporting, leaving 52. The breakdown of these isinclude- 25 follow on jobs required. and16 access issues. Factors also affecting WIP are that the additonal backlog funding has been exhausted and we currently have 5 long term sick operatives.

Current Mitigations: A review of process relating to closing OOH call outs which may be impacting the performance indicatiors for external emergency repairs. 3 agency staff have been recruited to back fill sickness within existing budgets.

Regular validation of openhousing and vixen (DODD's system) is undertaken. Early indications link to system and/or administration issues as opposed to service delivery to customers. A project is underway with the support of consultants to review the interface with the main aim being the development of a new interface between SCH and Dodd Group.

Workstream	
INVESTIGATIONS AND ENFORCEMENT ACTION	*N/A*

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Meeting of the Board

Report title:	Housing Ombudsman Annual Complaints Performance and Service Improvement Report	
Meeting date:	15 September 2026	
Report from:	Becci Youlden, Head of Customer Experience	
Report author/ lead officer:	Becci Youlden 0121 779 8846	Head of Customer Experience becciyoulden@solihullcommunityhousing.org.uk
Report type:	~~Confidential~~ Open	
Decision type:	~~Assurance~~	Approval ~~Information~~

1. Report overview/purpose

1.1 The purpose of the report is to present the Annual Complaints Performance and Service Improvement Report 2025/26 to the Board for approval.

1.2 The Annual Complaints Performance and Service Improvement Report provides an overview of complaints performance during 2025/26, the learning and service improvements arising from complaints, Housing Ombudsman activity during the year, the annual self-assessment against the Housing Ombudsman Complaint Handling Code and the Service Improvement Plan.

1.3 The report was considered by the Customer Experience Committee on 2 September 2026.

1.4 The Housing Ombudsman Complaint Handling Code requires landlords to undertake an annual self-assessment, produce a Service Improvement Plan and report the Annual Complaints Performance and Service Improvement Report to the landlord's governing body.

2. Recommendations

2.1 The Board is asked to:

(1) Approve the Annual Complaints Performance and Service Improvement Plan Report 2025/26.
(2) Approve the annual self-assessment against the Housing Ombudsman Complaint Handling Code contained within the report.
(3) Approve the governing body response on page 3 of the Annual Complaints Performance and Service Improvement Plan Report.

(4) Note the report is also being considered via the Council's governance processes as the Council is the landlord and ultimately responsible for ensuring compliance with the Housing Ombudsman's Code.

3. Background

3.1 The Housing Ombudsman Complaint Handling Code became statutory on 1 April 2024. Landlords are required to comply with the requirements of the Code and to undertake an annual self-assessment against it. Where areas of non-compliance are identified, landlords are required to establish a Service Improvement Plan to address them.

3.2 The Code also requires landlords to publish an Annual Complaints Performance and Service Improvement Report. The report must include the annual self-assessment, qualitative and quantitative analysis of complaints handling performance, any findings of non-compliance by the Ombudsman, service improvements arising from complaints and relevant Housing Ombudsman activity.

3.3 The Annual Complaints Performance and Service Improvement Report for 2025/26 is attached as Appendix 1.

3.4 The report demonstrates a significant improvement in overall complaints performance, with 89% of complaints completed within target timescales compared with 77.5% in the previous year. Stage 1 performance improved to 92.6%, exceeding the 85% target.

3.5 Stage 2 performance remains the principal area requiring improvement. Performance was 75.3% against a target of 94%. The report identifies that a significant proportion of the recorded delays related to late acknowledgements rather than delays in the investigation or final response. A centralised case management system has subsequently been introduced to strengthen oversight and reduce the risk of complaints being missed or acknowledged late.

3.6 The self-assessment identifies one area of non-compliance relating to Stage 2 complaint timeliness. Actions to address this are incorporated within the 2026/27 Service Improvement Plan.

4. Matters for noting

4.1 The self-assessment has been completed by officers of SCH and SMBC, with evidence documented to demonstrate compliance. The 2025/26 assessment identifies compliance in 72 of the 73 areas of the Complaint Handling Code. The single area of non-compliance relates to Stage 2 complaint timeframes.

4.2 The volume of Stage 2 complaints has increased significantly, with Stage 2 volumes increasing by 478% over the last two years. Further analysis will be undertaken to understand the reasons for escalation and whether Stage 2 reviews result in different outcomes for customers.

4.3 Repairs and compliance services generated the highest number of complaints. Communication and coordination were identified as key themes, particularly where

customers were waiting for follow-on works or updates. A review of repair communication and coordination is planned with the SCHape Resident Panel.

4.4 The report identifies a number of service improvements arising from complaints and customer feedback, including the centralisation of complaint handling, introduction of a case management system, improved complex case management arrangements, enhanced repairs communication and the introduction of the 'Needs on the Day' approach for customers with vulnerabilities.

4.5 The Customer Experience Committee considered the report on 2 September 2026. The outcome of the Committee's consideration should be reflected in the final Board report, including any specific recommendations made by the Committee.

4.6 The Housing Ombudsman requires the Annual Complaints Performance and Service Improvement Report and the associated governing body response to be published. Board approval therefore provides the formal governing body sign-off required by the Complaint Handling Code.

5. Key takeaways

5.1 Overall complaints handling performance has improved, with 89% of complaints completed within target timescales compared with 77.5% in 2024/25.

5.2 Stage 1 performance exceeded the organisational target, with 92.6% of complaints completed within timescale against a target of 85%.

5.3 Stage 2 performance remains below target at 75.3% against a target of 94% and is the main focus of the 2026/27 Service Improvement Plan.

5.4 The introduction of a centralised case management system is intended to improve oversight of Stage 2 complaints and reduce late acknowledgements.

5.5 Complaints continue to provide important organisational learning. Key areas for improvement include communication and coordination, particularly within repairs and compliance services.

5.6 The annual self-assessment identifies one area of non-compliance with the Complaint Handling Code, relating to Stage 2 timeliness, with actions in place to address this.

6. Supporting the SCH Delivery Plan

6.1 The report supports a number of Delivery Plan objective of Getting the basics right, including improving complaint responses, strengthening complaint handling and demonstrating how SCH learns and responds to customer feedback.

7. Consultation and engagement

7.1 Customer insight from Tenant Satisfaction Measure surveys has been used to inform the report.

7.2 The report also identifies further engagement with the SCHape Resident Panel, including planned work to review repair communication and coordination.

8. Financial implications

8.1 The Code requires a remedies policy to be in place. This has been approved by ELT and is being implemented. The budget has been increased to £10,000 to reflect the additional requirements.

9. Legal implications

9.1 The Annual Complaints Performance and Service Improvement Report, self-assessment and Service Improvement Plan are required under the statutory Housing Ombudsman Complaint Handling Code.

10. Risk implications

10.1 Failure to effectively manage complaints can lead to increased interaction with the Housing Ombudsman and potentially impact on the Consumer Standards assessment by the Regulator of Social Housing.

11. Equalities implications

11.1 A Fair Treatment Assessment has been undertaken in relation to the revised Complaints Policy following the introduction of the new Complaint Handling Code.

12. Data implications

12.1 The report uses existing complaints, customer and demographic data to analyse complaints performance, identify trends and inform service improvement activity.

13. List of appendices

13.1 **Appendix 1:** Annual Complaints Performance and Service Improvement Report 2025/26

14. Background documents

14.1 N/A

Solihull Community Housing
Shaping our neighbourhoods

Annual Complaints Performance & Service Improvement Report **July 2026**

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DRAFT

1. Introduction

As the Cabinet Member for Housing and Member responsible for complaints and as SCH's Complaints Champion, we welcome this opportunity to reflect on complaints performance during 2025/26 and the learning being taken forward.

Solihull Metropolitan Borough Council is the landlord for Council homes in Solihull. Solihull Community Housing delivers landlord services and manages complaints on the Council's behalf.

This report explains how those complaints were handled during the year, what residents told us, what we have learned and what we will do next. Complaints are an important source of insight. They help us understand where services have fallen short, where residents have experienced avoidable frustration, and where changes are needed to improve both complaint handling and wider service delivery.

The report brings together complaints performance, complaint themes, learning from the Housing Ombudsman, the annual Self-Assessment against the Complaint Handling Code and the Service Improvement Plan. Taken together, these show where progress has been made and where further improvement is required.

Performance improved during the year. Overall, 89% of complaints were completed within target timescales, compared with 77.5% last year. Stage 1 performance improved to 92.6%, exceeding the 85% target.

This improvement follows the move to a centralised complaints team, which was introduced in response to customer feedback. The new case management system should further support this by helping complaints to be recorded, monitored and managed more consistently.

However, the report also identifies areas where performance and customer experience need to improve. Stage 2 complaints did not meet the required timescale, complaint volumes continued to rise, and more work is needed to understand why some complaints escalate beyond Stage 1.

The key themes from complaints remain communication, coordination, follow-through and the experience of residents with vulnerabilities. These themes run through the report and are reflected in the actions set out in the Service Improvement Plan.

The Housing Ombudsman's review of the Complaints Policy has also provided important feedback. In response, SMBC and SCH have reviewed and strengthened the policy so that the roles of both organisations are clearer and residents have better information about how complaints are managed.

Over the coming year, we will monitor delivery of the Service Improvement Plan and focus on the areas where residents have told us services need to be better. We welcome feedback on this report and our approach to complaint handling. You can share your views through the form on our website or by calling 0121 717 1515.

Councillor Mark Parker
Cabinet Member for Housing/Member Responsible for Complaints, SMBC

DRAFT

Susan Buckley
Tenant Board Member & Complaints Champion, SCH

Complaint handling performance

2.1 Managing complaints

Our performance

Overall, **89%** of all complaints investigated during 2025/26 were completed within the required timescale. This was an increase of 11.5% compared with the previous year.

Stage 1 overview



Our target for Stage 1 complaints was to complete 85% on time. We achieved **92.6%** for the 2025/26 performance year, meaning we exceeded this target.

Stage 1	Volume Logged	Volume Refused	Volume Cancelled by Customer	Volume Investigated	On time	% On Time	Late	Upheld	Not Upheld
2025/26	**812**	**189**	**11**	**612**	**567**	**92.6**	**45**	**300**	**312**
2024/25	651	59	19	573	438	76.4	135	336	237
2023/24	485	6	22	457	314	68.7	143	254	203

Stage 1	Volume	Extension Granted	On time	Late	Upheld	Not Upheld
Tenant	526	98	491	35	264	262
Non-tenant*	86	10	76	10	36	50

*Includes leaseholders, homeless applicants, housing register applicants and other complainants who are not Council tenants.

The table shows that Stage 1 performance improved significantly compared with the previous two years. However, the number of complaints being refused also increased; this is considered further in section 2.6.

Stage 2 overview



Our target was to respond to 94% of Stage 2 complaints within the required timescale. During 2025/26, we achieved 75.3%, so we did not meet our target.

Of the 162 Stage 2 complaints investigated, 40 were recorded as late. We recognise this performance was not where we want it to be.

An external audit of our complaint timescale calculation methodology, carried out in April 2026, identified that 28 of these 40 complaints were classed as late because the acknowledgement letter was not sent within five working days. The investigation and final response for these complaints were not delayed. However, we recognise that acknowledgements are an important part of the complaints process and should give residents clear and timely confirmation that their complaint has been received.

On investigation, we found that many Stage 2 complaints were being received through individual staff email accounts. This created delays when staff were on annual leave, off sick, or working part-time.

To address this, we have introduced a centralised case management system so complaint correspondence is managed through one system rather than individual staff email accounts. The system is monitored by several officers, which should reduce the risk of Stage 2 complaints being missed or acknowledged late.

If these 28 complaints had not been affected by delayed acknowledgement letters, Stage 2 performance would have been 92% on time. This still falls short of the 94% target but helps distinguish between delays in acknowledgement and delays in completing the investigation and final response.

Stage 2	Volume Investigated	On time	% On time	Late	Upheld	Not Upheld
2025/26	**162**	**122**	**75.3**	**40**	**48**	**114**
2024/25	77	66	85.7	11	45	32
2023/24	28	27	96.4	1	24	4

Stage 2 2025/2026	Volume	Extension Granted	On time	% On time	Late	Upheld	Not Upheld
Tenant	136	51	101	74.2%	35	39	97
Non-tenant*	26	3	21	80.7%	5	9	17

*includes leaseholders, homeless or housing register applicants and other complaints that are not Council tenants.

Improving our complaints handling performance

Following the tenant SCHape Panel review reported in last year's Complaints Annual Report, complaint handling was centralised into a dedicated team. The team has now been in place for almost 12 months and this has supported a clear improvement in Stage 1 complaint handling, with performance above target in 2025/26.

The focus for the year ahead is to maintain that improvement while strengthening Stage 2 performance. In particular, we need to reduce late acknowledgements at Stage 2 and continue to improve the timeliness and quality of complaint handling. These actions are reflected in the Self-Assessment and Service Improvement Plan.

Volume of complaints

Stage 1

Stage 1 complaint volumes have increased year-on-year. This reflects a wider sector trend, although the increase in 2025/26 was lower than in previous years.

Complaint volumes help us understand where residents are experiencing problems and where services need to improve. We also want residents to know how to complain and feel able to do so when something has gone wrong.

Stage 2

The number of Stage 2 complaints investigated increased significantly again this year, from 77 in 2024/25 to 162 in 2025/26. This is more than double the previous year's figure and continues the upward trend from 2023/24, when 28 Stage 2 complaints were investigated.

This may indicate that residents understand how to escalate a complaint where they remain dissatisfied. However, the increase also means we need to understand whether complaints are being resolved effectively at Stage 1 and whether Stage 2 is leading to different outcomes for residents.

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We will ensure that further analysis is carried out into the reasons for escalation to Stage 2. This review will consider why customers remained dissatisfied after the Stage 1 response and whether Stage 2 led to a different outcome. This action is included in the Service Improvement Plan.

2.2 Comparing our performance

One way we monitor complaints performance is by comparing our results with other social housing providers.

Tenant Satisfaction Measures (TSMs) support this because they are a regulatory requirement and are reported consistently across the sector. The Regulator of Social Housing publishes annual TSM results, which allow providers to benchmark their performance against peers.

The table below shows our performance against the complaint-related TSMs for 2025/26. As sector results for 2025/26 are not yet available, we have compared our results with the published 2024/25 sector data.

Key performance indicators	Bottom 25% performance (2024/2025)	National average (2024/2025)	Top 25% performers (2024/2025)	SCH 2024/2025	SCH 2025/2026
Stage 1 (TSM) complaints completed in target timescale	76.1%	89.3%	96.6%	76.4%	**93.35%**
Stage 2 (TSM) complaints completed in target timescale	69.6%	88.6	98.70%	85.7%	**74.26%**
Satisfaction with complaints handling	29.6%	35.0%	42.8%	37.8%	**34.8%**
Stage 1 complaints per 1,000 properties	72.1	55.2	37.7	43.0	**54.2**
Stage 2 complaints per 1,000 properties	13.9	8.8	5.3	5.4	**14.0**

Headlines:

- Stage 1 complaint handling has improved and is above the national average for complaints completed within timescale
- Stage 2 complaint handling is below the national average and remains an area for improvement
- Satisfaction is in line with the national average but remains low
- Stage 2 complaint volumes are above the national average and significantly higher than in previous years.

To understand this better and address the issues SCH is:

- carrying out in depth analysis to understand the key drivers of the increase in complaint volumes, with progress tracked through the Service Improvement Plan.

- using the new case management system to manage complaint correspondence and reduce late acknowledgements, particularly at stage 2
- using the new transactional survey of complaint satisfaction, which asks more detailed questions to understand dissatisfaction with complaint handling and support more targeted action.

2.3 Complaints by service area

To help us understand why customers complain, we consider complaints by their service area. Below is an overview of the service areas that complaints relate to:

Service Area	2025/2026	2024/2025	Percentage increase/decrease
Responsive Repairs & Voids – Repairs	**209**	193	8%
Neighbourhood Services – Antisocial Behaviour, Estate management	**107**	106	1%
Homeless Service / Allocations – Housing register	**43**	87	-51%
Compliance – Gas, Electrical and other compliance areas repairs and servicing	**111**	81	37%
Rent accounting and arrears / Right To Buy / Leasehold	**26**	24	8%
Customer Services	**15**	20	-25%
Occupational Therapy & Aids and Adaptations	**21**	20	5%
Out of Hours	**3**	1	200%
Solihull Independent Living Service (SILS) (formerly Wellbeing service)	**6**	1	500%

Understanding complaints by service area gives us the opportunity to focus our efforts on service improvement. Based on the above, the key focus is on:

Compliance – gas and electrical

There has been a 37% increase in the volume of complaints regarding compliance related repairs and servicing.

The key driver is communication, particularly where residents are waiting for follow-on works, parts, or further appointments and are not kept updated on progress.

A review of repairs communication and coordination is planned for October 2026, in conjunction with our resident SCHape Panel. The aim of the review is to identify improvements that will positively impact the experience and outcomes for customers, which should decrease the number of complaints.

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Responsive repairs

Although there is only a slight increase, repairs continue to be the highest area of complaints, which is expected given the number of repairs the team complete.

As with compliance, communication and co-ordination are key factors in these complaints, with customers left feeling unclear on what is happening and when.

During this year, SCH introduced a single point of contact for complex repairs, as this was identified as a particular area of dissatisfaction. The planned review with the resident SCHape Panel will also consider these wider repairs communication and coordination issues.

Solihull Independent Living Service (SILS)

Although small in volume, the increase is notable. These complaints relate to delays in service, which can significantly impact customers who rely on SILS.

SCH has updated processes during the year as a result of complaint learning and we will continue to monitor this.

2.4 Complaints by demographics

Appendix B in this report shows a breakdown of our customer data by different demographics. This information is important to help us review our service delivery.

Highlights:

- As per the previous Complaints Annual Report, the ethnicity of complainants is broadly in line with the general population.
- Again, a slightly higher proportion of women make a complaint compared to the general population, but statistically this is not significant.
- As we found last year, a higher proportion of younger customers make a complaint, which is mirrored across the sector.
- Last year, we identified a statistically significant difference in the proportion of customers with a vulnerability making a complaint, compared with customers who do not have a vulnerability. This pattern is repeated and has increased in this year's analysis.

What we did with last year's findings:

In last year's Complaints Annual Report, we highlighted next steps relating to complaints by demographics. This included a commitment to carry out more detailed analysis to understand the key drivers.

This analysis included a review of a sample of complaints. It found that the 'not upheld' rate was higher for customers who had a vulnerability logged on our system. In many of these cases, the required technical actions had been completed and no service failure was identified but communication and coordination of service delivery remained an issue. The review showed that poor communication and coordination can have a greater impact on customers with vulnerabilities.

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SCH has since launched the “Needs on the day” approach, where every customer interaction includes a check of any needs the customer may have on that day. This allows the service to be tailored to the customer’s circumstances. We will monitor the impact of this on complaint rates and outcomes during the year.

The Service Improvement Plan includes an action relating to vulnerable customers, including a commitment to continue monitoring and auditing complaints from customers with vulnerabilities.

2.5 Customer Satisfaction

Future surveys

Satisfaction with complaint handling remains an area where improvement is needed, as reflected in the Tenant Satisfaction Measures results. SCH has introduced transactional satisfaction surveys for people who have made a complaint for the 2026/27 performance year.

The new survey will give us more detailed feedback from residents who have recently used the complaints process. This will help us better understand what is working, what is not, and where changes are needed.

Feedback from the surveys will be reviewed and used to improve service delivery. Learning will also be linked into the Service Improvement Plan and taken forward through the Service Improvement Manager role.

We will report the outcome of these surveys in the next Complaints Annual Report.

2.6 Refusals

There are occasions when we will refuse to accept a complaint for investigation. Our policy clearly sets out the reasons we may do this. During the 2025/26 performance year, we refused 189 complaints, which is an increase on the previous year.

The main reasons for refusals were:

- Service request
- Review or appeal route available
- Repeat request

As in the previous year, most refusals occurred where the online complaint form was used to submit a complaint. The online form was first fully available to customers from September 2024, so 2025/26 was the first full year in which customers were able to use it. This may partly explain the increase in refusals.

The Service Improvement Plan includes an action to review and improve the online form, so that customers are better supported to direct their enquiry to the right route. The improved form is due to go live in October.

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3. Service improvements and learning

One of the most important parts of the complaints process is identifying and acting on learning. Complaints are a valuable tool for learning, and they are utilised to ensure all teams have the opportunity to improve their service delivery.

Below is a view of learning from the 2025/26 performance year:

Learning from Stage 1 and Stage 2 complaints		
What went wrong?	**What did we learn?**	**What did we change?**
Customers did not always receive timely or clear communication when repairs were being planned or scheduled.	Customers need clearer information about what will happen, when it will happen and who is responsible for keeping them updated.	Enhanced text messaging is now available to the repairs scheduling team. A Delivery Plan objective has also been included to review how the repairs team communicates with customers and between teams.
Customers were not always kept informed where repairs were complex or required multiple teams, trades or visits.	Complex repairs need clearer ownership and coordination so that customers do not experience avoidable delays or uncertainty.	A single point of contact has been introduced for complex cases, supported by the development of a Complex Case Management Toolkit.
Service improvements identified through complaints did not always progress quickly enough.	Where a complaint identifies the need for a process change, there needs to be a clear route for ensuring that improvement is owned and delivered.	A new Service Improvement Manager role has been introduced to oversee and drive improvements across all service areas
Customers told us they felt dismissed, not listened to or spoken down to.	The way we communicate with customers is as important as the outcome of the complaint.	Customer Experience training has been completed for all temporary and permanent staff. All staff will have a Customer Experience objective for the 2026/27 performance year, and the impact will be monitored through complaint themes and customer feedback.
Wellbeing services out of hours process failure.	A call to the Duty Manager was missed. The process needed an additional check to make sure out-of-hours activity was picked up and acted on.	The process has been changed to include a start of day review of out of hours activity to ensure all appropriate steps have been taken.

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A Right to Buy email was sent to a customer but was not received	Relying solely on email can create a risk that important information is missed.	The process was enhanced to include phone calls to customers.
Delays occurred where repairs could not be appointed.	Pending repairs need to be reviewed regularly so that delays can be identified and addressed.	Pending repairs have been reviewed and additional resource allocated.

Learning from HOS determinations (see section 4)		
What went wrong?	**What did we learn?**	**What did we change?**
Complaint handling failures.	When customers contact us following a Stage 1 outcome, we don't always identify that they may require an escalation to Stage 2.	Training and updates have been delivered to all teams.
Antisocial Behaviour (ASB) process not followed.	There was no evidence that an Action Plan had been completed in line with policy timescales.	A new ASB case management system has been introduced to support the process.
A refund was not processed.	Refund decisions need to be clearly considered, recorded and followed through.	The refund process was reviewed.

3.1 Themes

In addition to the above learning, we also consider the themes that are emerging from complaint investigations.

Below are some of the key themes that have been identified and how we are responding to them. These themes are also consistent with wider resident feedback, including the TSM survey, where communication, repairs, complaint handling and follow-through were recurring areas of dissatisfaction.

Key Themes	What are we doing in response
Communication & co-ordination – When service delivery is complex, our communication and co-ordination can be poor. This can leave customers unclear about what will happen and when.	• Introduced a single point of contact for complex complaints • Full review of repairs communication and coordination in conjunction with the resident SCHape Panel. The review will commence in October 2026.

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Reasonable adjustments – When customers tell us they need an adjustment to the service they are receiving, our response can be inconsistent. This can leave customers feeling unheard.	• Customer Experience training has been undertaken across the organisation to improve staff understanding of vulnerability and reasonable adjustments. • Introduced needs on the day approach to ensure we capture all additional needs.
Internal handovers – When repairs move from one team to another there can be gaps in the process and as a result works can be delayed. Customers tell us that this can feel like a lack of ownership.	• This will also be considered as part of the full review of repairs communication and coordination with the resident SCHape Panel, starting in October 2026.

4. Housing Ombudsman

4.1 Determinations

The Housing Ombudsman Service (HOS) investigates complaints when a tenant escalates their concerns to them after receiving a Stage 2 outcome. When investigating a complaint, HOS can consider seven possible findings:

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Outcome	What we mean
Outside jurisdiction	Where we *cannot* or *may not* investigate a complaint point, we say it is 'outside our jurisdiction'.
No maladministration	We've found the landlord has acted reasonably or we have not found any failures.
Service failure	The landlord is responsible for minor failures, or more notable failures where the overall impact is minimal.
Maladministration	The landlord has failed in some material way that has had moderate to high impact.
Severe maladministration	We've found some significant or serious failings by the landlord. Or there was significant impact caused by what went wrong.
Reasonable redress	While there were failures, the landlord has identified these and has since done enough to put things right before the start of our investigation. We've found the resolution it has offered was reasonable to satisfactorily resolve the complaint. We're not likely to make a reasonable redress finding where the resolution offered was unreasonably delayed. At year end, this is called 'redress'.
Resolved with intervention	Following our involvement, the landlord has now taken steps (or will take steps) to put things right. We're satisfied that what it has done (or will do) will resolve the complaint satisfactorily. We'll set out in our decision what the landlord will do to resolve the issue. At year end we called this 'mediation'

We received two case outcomes from HOS throughout the 2025/26 performance year, compared to five in the previous year.

There were six findings across the two cases:

Category outcome	2025/26	2024/25
Maladministration	1	7
Service failure	3	1
No maladministration	2	5
Maladministration rate	66.7%	57%

This shows four findings of maladministration in 2025/2026 (Maladministration + Service Failure), compared to eight in 2024/2025.

While the maladministration rate has increased, the actual number of maladministration and service failure findings has decreased. This reflects the small number of Housing Ombudsman cases received during the year. The findings remain important because they highlight issues where learning and service improvement are needed.

Maladministration and service failure were found in the following categories:

Category	Count
ASB / Abuse / Nuisance	2
Managing relations	2
Financial	1
Responsive repairs / activity	1
Total	6

All learning from these cases is shared with SMBC, SCH and staff responsible for complaints. The orders have been complied with and customers have been updated. We accept that services don't always get it right, but we will always consider the feedback received.

We also share learning with our customers in the quarterly Voice of the Customer Report, which can be found on our Performance website page.

4.2 Ombudsman reports

HOS generates reports annually for landlords where there have been five or more findings of maladministration or service failure in the previous performance year. A report was issued for SMBC in October 2025, reflecting the performance of the 2024/25 performance year, which we reported on in our previous Complaints Annual Report.

You can search for the report on the Landlords Archive page on the HOS website.

Key notes from the report:

- 57% maladministration rate – this was a 10% reduction compared to the previous year, the national maladministration rate was 71% and the national maladministration rate for landlords of a similar size and type was 80%.
- By category, 'complaint handling' was the highest area where maladministration was found.
- Compensation was the highest type of 'order' received from HOS.

We review and share learning from reports and insights issued by both Ombudsman services, so that this can inform improvements to complaint handling and wider service delivery.

HOS contacted SMBC in January 2026 to confirm that it would be carrying out an audit of our Complaints Policy and Self-Assessment. The audit resulted in 27 recommendations. SMBC and SCH reviewed the Complaints Policy in response to those recommendations and used the opportunity to look more widely at the policy as a whole, strengthening it where needed. The revised Policy is published on both the SCH and SMBC websites.

The revised policy makes the roles of the Council and SCH clearer and helps residents understand how complaints are managed, what happens at each stage and what they can expect when they raise a complaint.

5. Self-Assessment

As part of its legal duty to monitor landlord compliance with the Complaint Handling Code, HOS has instructed landlords to submit a Self-Assessment every year.

The Self-Assessment is an opportunity for SCH and SMBC to reflect on the current approach, ensure we comply with the Code and take forward any opportunities to improve service delivery. As mentioned previously, HOS conducted an audit of our Self-Assessment, which we have reviewed and complied with as required.

Appendix A is the 2025/26 Self-Assessment that we have completed against the Complaint Handling Code.

In summary, the Self-Assessment is split into seven sections and there are 73 points with which SMBC as landlord, must comply, supported by SCH as the organisation delivering landlord services on the Council's behalf.

Last year, we recognised that there was one point of non-compliance, due to the timeliness of complaints. The Self-Assessment highlights significant improvements have been made with Stage 1 complaints. However, Stage 2 timescales were not achieved, so this has been recorded as an area of non-compliance with the Code.

As this report has shown, there are opportunities to improve and these are reflected in the Service Improvement Plan on the following page.

6. Service Improvement Plan

The Service Improvement Plan brings together the key areas for improvement identified through complaint performance, complaint themes, resident feedback, Ombudsman learning and the annual Self-Assessment. While the Housing Ombudsman Service requires landlords to publish this plan as part of the Complaint Handling Code, its main purpose is to show the actions we are taking to improve complaint handling and wider service delivery.

The plan focuses on the areas where residents should expect to see clearer communication, more consistent complaint handling, better coordination between teams and stronger follow-through when things go wrong.

The plan will be maintained and delivered by SCH, with the Head of Customer Experience responsible for coordinating delivery across relevant service areas. Progress will be reported to SMBC so that actions are monitored and we can check whether they are making a difference for residents.

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Code / SA ref	Action Title	Action Detail	Resolution	Target Date	Owner
6.3	Complaint Timescales	Customers should receive a response to their complaint within the timelines of the Complaint Handling Code.	Ensure compliance with the timeliness of complaints, with a focus on improving the timeliness of acknowledging a complaint at Stage 2.	March 2027	Customer Contact Manager
Annual Report	Online complaint form	A high proportion of refusals are linked to complaints submitted through the online form.	Review and improve the online form, to help support customers to ensure their enquiries are directed to the correct service teams.	October 2026	Customer Contact Manager
HOS Determinations	Recognition of Stage 2 complaint	Ensure all staff can recognise when to give the customer the choice of a Stage 2 complaint.	Staff training, refreshers and communication regarding escalation to Stage 2.	March 2027	Customer Contact Manager and Organisational Development Lead
Annual Report	Stage 2 increase	Stage 2 complaint volumes have significantly increased.	In depth review of the reasons for escalation to Stage 2.	December 2026	Business Intelligence team
Annual Report	Refusals	Increase in refusals	In-depth analysis of refusals as per section 2.6	December 2026	Business Intelligence team
Annual Report	Improving Service	When learning is identified, there isn't always a clear route to ensure changes are made to service delivery.	Create a clear link to the Service Improvement Manager role so that learning is considered and acted upon.	September 2026	Customer Contact Manager Service Improvement Manager
Annual Report	Recurring theme of communication issues	Understand where improvements are needed and implement	Full review of repairs communication and coordination	March 2027	Head of Customer Experience
Annual Report	Vulnerability Data	Monitor complaints from vulnerable residents.	Regular audits of complaints from customers with vulnerabilities	March 2027	Service Improvement Manager

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Appendix A

Appendix A: Self-Assessment form

This self-assessment form should be completed by the complaints officer, and it must be reviewed and approved by the landlord's governing body at least annually.

Once approved, landlords must publish the self-assessment as part of the annual complaints' performance and service improvement report on their website. The governing body's response to the report must be published alongside this.

Landlords are required to complete the self-assessment in full and support all statements with evidence, with additional commentary as necessary.

We recognise that there may be a small number of circumstances where landlords are unable to meet the requirements, for example, if they do not have a website. In these circumstances, we expect landlords to deliver the intentions of the Code in an alternative way, for example by publishing information in a public area so that it is easily accessible.

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Section 1: Definition of a complaint

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
1.2	A complaint must be defined as: *'an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the landlord, its own staff, or those acting on its behalf, affecting a resident or group of residents.'*	Yes	Housing Complaints Policy.pdf Section 4 of the policy sets out the definition of a complaint	Our Policy definition: 'an expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the Landlord its own staff, or those acting on its behalf, affecting an individual resident or group of residents'
1.3	A resident does not have to use the word 'complaint' for it to be treated as such. Whenever a resident expresses dissatisfaction landlords must give them the choice to make complaint. A complaint that is submitted via a third party or representative must be handled in line with the landlord's complaints policy.	Yes	Housing Complaints Policy.pdf Section 4 of the policy confirms this.	Our Policy wording: Customers do not have to use the word "complaint" for us to treat it as one. If a customer tells us they are unhappy, we will give them the option to make a complaint.
1.4	Landlords must recognise the difference between a service request and a complaint. This must be set out in their complaints policy. A service request is a request from a resident to the landlord	Yes	Housing Complaints Policy.pdf Section 6.1 of the policy confirms this	Our Policy wording; A service request is a request from a resident to the landlord requiring action

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	requiring action to be taken to put something right. Service requests are not complaints, but must be recorded, monitored and reviewed regularly.			to be taken to put something right. Service requests are not complaints. SCH will record all service requests and action as appropriate. If a customer expresses dissatisfaction regarding the service they have received or if we have not done what we promised to deliver, the customer will be given the option to make a complaint. Should a complaint be made, this won't prevent SCH from delivering the requested service request
1.5	A complaint must be raised when the resident expresses dissatisfaction with the response to their service request, even if the handling of the service request remains ongoing. Landlords must not stop their efforts to address the service request if the resident complains.	Yes	Housing Complaints Policy.pdf Section 6.1 of the policy confirms this	Our Policy wording: Should a complaint be made, this won't prevent us from delivering the requested service request
1.6	An expression of dissatisfaction with services made through a survey is not defined as a complaint, though wherever possible, the person completing the survey should be made aware of how they can pursue a complaint if they wish to. Where landlords ask for wider feedback about	Yes	An independent company undertake customer satisfaction surveys, they advise how the customer can complain should they wish. Any reports of dissatisfaction are shared with us and appropriate action taken.	Acuity, which is the independent company has confirmed that they follow this practice.

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	their services, they also must provide details of how residents can complain.			

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Section 2: Exclusions

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
2.1	Landlords must accept a complaint unless there is a valid reason not to do so. If landlords decide not to accept a complaint, they must be able to evidence their reasoning. Each complaint must be considered on its own merits	Yes	Housing Complaints Policy.pdf Section 7 of the policy confirms this	Our Policy wording: We will review each request for a complaint based on its individual merit and at times may deviate from the above guidance.
2.2	A complaints policy must set out the circumstances in which a matter will not be considered as a complaint or escalated, and these circumstances must be fair and reasonable to residents. Acceptable exclusions include: • The issue giving rise to the complaint occurred over 12 months ago. • Legal proceedings have started. This is defined as details of the claim, such as the Claim Form and Particulars of Claim, having been filed at court.	Yes	Housing Complaints Policy.pdf Section 7 of the policy confirms this	Our policy lists examples of complaints that do not fall in scope

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	• Matters that have previously been considered under the complaints policy.			
2.3	Landlords must accept complaints referred to them within 12 months of the issue occurring or the resident becoming aware of the issue, unless they are excluded on other grounds. Landlords must consider whether to apply discretion to accept complaints made outside this time limit where there are good reasons to do so.	Yes	Housing Complaints Policy.pdf Section 7.3 of the policy confirms this	Our policy wording: 1. vi. Issues /incidents referred to us whereby the customer was aware of the issue over 12 months ago, unless there are exceptional circumstances
2.4	If a landlord decides not to accept a complaint, an explanation must be provided to the resident setting out the reasons why the matter is not suitable for the complaints process and the right to take that decision to the Ombudsman. If the Ombudsman does not agree that the exclusion has been fairly applied, the Ombudsman may tell the landlord to take on the complaint.	Yes	Housing Complaints Policy.pdf Section 7.2 and 10.9 of the policy confirms this	Our policy wording: Where a complaint is not accepted, SCH will write to the resident on the Council's behalf explaining the reasons for the decision and advising them of their right to contact the appropriate Ombudsman
2.5	Landlords must not take a blanket approach to excluding complaints; they must consider the individual circumstances of each complaint.	Yes	Housing Complaints Policy.pdf Section 7.4 of the policy confirms this	Our Policy wording: We will review each request for a complaint based on its individual merit and at times may deviate from the above guidance

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Section 3: Accessibility and Awareness

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
3.1	Landlords must make it easy for residents to complain by providing different channels through which they can make a complaint. Landlords must consider their duties under the Equality Act 2010 and anticipate the needs and reasonable adjustments of residents who may need to access the complaints process.	Yes	Housing Complaints Policy.pdf Sections 5.2 and 9 of the policy confirms this Reasonable-Adjustments-Policy-for-Customer-Complaints.pdf Section 4 of the policy confirms this Section 3 includes information about making complaints accessible	Our Policy outlines methods available to complain and confirms that complaints will be made accessible
3.2	Residents must be able to raise their complaints in any way and with any member of staff. All staff must be aware of the complaints process and be able to pass details of the complaint to the appropriate person within the landlord.	Yes	Housing Complaints Policy.pdf Section 9 of the policy confirms this Communications and guidance for staff is issued relating to complaints Complaints information is included in a monthly Core Brief that is delivered to all staff	All Staff are made aware of how to pass details of complaints to the Customer Feedback Team

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3.3	High volumes of complaints must not be seen as a negative, as they can be indicative of a well-publicised and accessible complaints process. Low complaint volumes are potentially a sign that residents are unable to complain.	Yes	We monitor the volume of complaints received, however there is no associated target, results are not rated Red, Amber or Green	
3.4	Landlords must make their complaint policy available in a clear and accessible format for all residents. This will detail the two-stage process, what will happen at each stage, and the timeframes for responding. The policy must also be published on the landlord's website.	Yes	Housing Complaints Policy.pdf Section 2.1 confirms this Our policy is published on the SMBC and SCH websites	
3.5	The policy must explain how the landlord will publicise details of the complaints policy, including information about the Ombudsman and this Code.	Yes	Housing Complaints Policy.pdf Section 2.1 of the policy confirms this	The Complaints Policy is published on the SMBC and SCH websites and can be obtained in accessible formats, such as audio, large print, or different languages by request. The Housing Ombudsman Complaint Handling Code is publicised to customers on our website, within our Newsletters and on Noticeboards.
3.6	Landlords must give residents the opportunity to have a representative deal with their complaint on their behalf,	Yes	Housing Complaints Policy.pdf Sections 4.5 and 9.2 of the policy confirms this	

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	and to be represented or accompanied at any meeting with the landlord.			
3.7	Landlords must provide residents with information on their right to access the Ombudsman service and how the individual can engage with the Ombudsman about their complaint.	Yes	Housing Complaints Policy.pdf Section 10 and 12 of the policy confirms this	All responses to Stage 2 complaints advise residents that if they are unhappy with the Stage 2 response, they can refer their complaint to the Ombudsman and contact details for the Ombudsman are included in the response.

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Section 4: Complaint Handling Staff

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
4.1	Landlords must have a person or team assigned to take responsibility for complaint handling, including liaison with the Ombudsman and ensuring complaints are reported to the governing body (or equivalent). This Code will refer to that person or team as the 'complaints officer'. This role may be in addition to other duties.	Yes	SCH has a centralised Customer Feedback Team who review, investigate and respond to complaints. This team liaise with the Housing Ombudsman and ensure management information is available for reporting.	The Head of Customer Experience is responsible for complaint handling within SCH, while SMBC, as the landlord, is responsible for oversight and scrutiny of complaint handling.
4.2	The complaints officer must have access to staff at all levels to facilitate the prompt resolution of complaints. They must also have the authority and autonomy to act to resolve disputes promptly and fairly.	Yes	Processes are in place to ensure the Customer Feedback Team have access to information, staff and resources to resolve disputes. An SLA for responses in 48 hours is in place	
4.3	Landlords are expected to prioritise complaint handling and a culture of learning from complaints. All relevant staff must be suitably trained in the importance of complaint handling. It is important that complaints are seen as a core service and must be resourced to handle complaints effectively	Yes	Increased resourcing of complaints through centralised team centralisation of complaints All staff have a complaints related objective Complaint module mandatory for all staff	

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			Learning case conferences in place Monthly complaints updates in Core Brief	

Section 5: The Complaint Handling Process

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
5.1	Landlords must have a single policy in place for dealing with complaints covered by this Code. Residents must not be treated differently if they complain.	Yes	Housing Complaints Policy.pdf We operate under one complaint policy, applicable to all customers	
5.2	The early and local resolution of issues between landlords and residents is key to effective complaint handling. It is not appropriate to have extra named stages (such as 'stage 0' or 'informal complaint') as this causes unnecessary confusion.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms that we operate a 2 Stage complaint process only	
5.3	A process with more than two stages is not acceptable under any circumstances as this will make the complaint process unduly long and delay access to the Ombudsman.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms that we operate a 2 Stage complaint process only	
5.4	Where a landlord's complaint response is handled by a third party (e.g. a contractor or independent adjudicator) at any stage, it must form part of the two stage complaints process set out in this	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms that SCH deliver landlord	Policy wording: As a Registered Social Landlord, Solihull Metropolitan Borough

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	Code. Residents must not be expected to go through two complaints processes.		services on behalf of SMBC which includes complaints	Council (SMBC) is responsible for how complaints about landlord services are handled. SMBC is also legally responsible for ensuring compliance with the Housing Ombudsman Complaint Handling Code. Solihull Community Housing (SCH) delivers landlord services on behalf of SMBC to Council tenants and leaseholders and is responsible for managing complaints on the Council's behalf and for implementing this policy.
5.5	Landlords are responsible for ensuring that any third parties handle complaints in line with the Code.	Yes	Housing Complaints Policy.pdf Section 1 of the policy confirms that SCH deliver landlord services on behalf of SMBC which includes complaints	Policy wording: As a Registered Social Landlord, Solihull Metropolitan Borough Council (SMBC) is responsible for how complaints about landlord services are handled. SMBC is also legally responsible for ensuring compliance with the Housing Ombudsman Complaint Handling Code. Solihull Community Housing

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				(SCH) delivers landlord services on behalf of SMBC to Council tenants and leaseholders and is responsible for managing complaints on the Council's behalf and for implementing this policy.
5.6	When a complaint is logged at Stage 1 or escalated to Stage 2, landlords must set out their understanding of the complaint and the outcomes the resident is seeking. The Code will refer to this as "the complaint definition". If any aspect of the complaint is unclear, the resident must be asked for clarification.	Yes	Housing Complaints Policy.pdf Section 5.1 and 5.2 confirm this part of the process	
5.7	When a complaint is acknowledged at either stage, landlords must be clear which aspects of the complaint they are, and are not, responsible for and clarify any areas where this is not clear.	Yes	Housing Complaints Policy.pdf Section 10.1 and 10.11 confirm this part of the process	If elements of a complaint do not fall within our remit, we clearly communicate this to the resident and re-iterate what is being investigated.
5.8	At each stage of the complaints process, complaint handlers must: a. deal with complaints on their merits, act independently, and have an open mind; b. give the resident a fair chance to set out their position; c. take measures to address any actual or perceived conflict of interest; and	Yes	Complaint Handling training is in place for the centralised complaints team to ensure this is achieved. Audits of complaints take place which considers this criteria.	The Complaints Team is independent from any operational functions of the Housing Landlord Service allowing them to act independently and consider all information carefully.

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	d. consider all relevant information and evidence carefully.			
5.9	Where a response to a complaint will fall outside the timescales set out in this Code, the landlord must agree with the resident suitable intervals for keeping them informed about their complaint.	Yes	Housing Complaints Policy.pdf Section 10 details the process for extensions.	
5.10	Landlords must make reasonable adjustments for residents where appropriate under the Equality Act 2010. Landlords must keep a record of any reasonable adjustments agreed, as well as a record of any disabilities a resident has disclosed. Any agreed reasonable adjustments must be kept under active review.	Yes	We capture these needs when the complaint is logged, the case management system allows for adjustments to be noted and updated as needed	
5.11	Landlords must not refuse to escalate a complaint through all stages of the complaints procedure unless it has valid reasons to do so. Landlords must clearly set out these reasons, and they must comply with the provisions set out in section 2 of this Code.	Yes	Housing Complaints Policy.pdf Section 7 outlines the reasons for exclusions	
5.12	A full record must be kept of the complaint, and the outcomes at each stage. This must include the original complaint and the date received, all correspondence with the resident, correspondence with other parties, and	Yes	SCH case management system captures the date the complaint was received and logged. Correspondence is held in the case along with any evidence relating to the investigation	Monthly and quarterly reports are produced

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	any relevant supporting documentation such as reports or surveys.			
5.13	Landlords must have processes in place to ensure a complaint can be remedied at any stage of its complaints process. Landlords must ensure appropriate remedies can be provided at any stage of the complaints process without the need for escalation.	Yes	SCH centralised complaints team have access to all possible remedies; an escalation is not required to enhance a remedy.	Examples include: apologies, compensation, and additional repair works
5.14	Landlords must have policies and procedures in place for managing unacceptable behaviour from residents and/or their representatives. Landlords must be able to evidence reasons for putting any restrictions in place and must keep restrictions under regular review.	Yes	SCH have an Unreasonable Communication Policy, which was updated in September 2026.	
5.15	Any restrictions placed on contact due to unacceptable behaviour must be proportionate and demonstrate regard for the provisions of the Equality Act 2010.	Yes	We capture and record such reasons and have a process in place to ensure action taken is appropriate.	Any decisions to impose restrictions are made on a case-by-case basis and with due regard to Equality & Diversity.

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Section 6: Complaints Stages

Stage 1

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
6.1	Landlords must have processes in place to consider which complaints can be responded to as early as possible, and which require further investigation. Landlords must consider factors such as the complexity of the complaint and whether the resident is vulnerable or at risk. Most Stage 1 complaints can be resolved promptly, and an explanation, apology or resolution provided to the resident.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms that we triage complaints as they are received and identifies complexity as early as possible	
6.2	Complaints must be acknowledged, defined and logged at Stage 1 of the complaints procedure **within five working days of the complaint being received**.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	
6.3	Landlords must issue a full response to stage 1 complaints **within 10 working days** of the complaint being acknowledged.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	
6.4	Landlords must decide whether an extension to this timescale is needed when considering the complexity of the complaint and then inform the resident of the expected timescale for response. Any extension must be no more than	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	We state why we require an extension. All extensions and the reason for extensions are recorded on

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	10 working days without good reason, and the reason(s) must be clearly explained to the resident.			the case management system.
6.5	When an organisation informs a resident about an extension to these timescales, they must be provided with the contact details of the Ombudsman.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	The extension letter contains details for the Ombudsman
6.6	A complaint response must be provided to the resident when the answer to the complaint is known, not when the outstanding actions required to address the issue are completed. Outstanding actions must still be tracked and actioned promptly with appropriate updates provided to the resident.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	We respond to complaints with 10 working days and explain any outstanding work due to be completed. This is monitored by the complaints team
6.7	Landlords must address all points raised in the complaint definition and provide clear reasons for any decisions, referencing the relevant policy, law and good practice where appropriate.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	
6.8	Where residents raise additional complaints during the investigation, these must be incorporated into the Stage 1 response if they are related and the Stage 1 response has not been issued. Where the Stage 1 response has been issued, the new issues are unrelated to the issues already being investigated or it would unreasonably delay the response, the new issues must be logged as a new complaint.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	Additional complaints during an investigation are considered if they are related otherwise a separate Stage 1 complaint is raised.

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6.9	Landlords must confirm the following in writing to the resident at the completion of Stage 1 in clear, plain language: a. the complaint stage; b. the complaint definition; c. the decision on the complaint; d. the reasons for any decisions made; e. the details of any remedy offered to put things right; f. details of any outstanding actions; and g. details of how to escalate the matter to stage 2 if the individual is not satisfied with the response.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	The letter template contains all points set out a-g

Stage 2

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
6.10	If all or part of the complaint is not resolved to the resident's satisfaction at Stage 1, it must be progressed to Stage 2 of the landlord's procedure. Stage 2 is the landlord's final response.	Yes	Housing Complaints Policy.pdf Section 5 of the policy confirms this	
6.11	Requests for Stage 2 must be acknowledged, defined and logged at Stage 2 of the complaints procedure	No	Housing Complaints Policy.pdf Section 10 of the policy confirms this	The policy confirms that acknowledgements will be issued within five working days. However, throughout

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	within five working days of the escalation request being received.			the 2025/26 performance year 28 of the 162 Stage 2 complaints were acknowledged late. We took steps to ensure the outcome was still issued in line with the original acknowledgement date that was missed however these complaints are reported as late due to the acknowledgement being late. The move to a centralised case management system has now mitigated the risk of late acknowledgments happening
6.12	Residents must not be required to explain their reasons for requesting a stage 2 consideration. Landlords are expected to make reasonable efforts to understand why a resident remains unhappy as part of its Stage 2 response.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	
6.13	The person considering the complaint at Stage 2 must not be the same person that considered the complaint at Stage 1.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	
6.14	Landlords must issue a final response to the Stage 2 **within 20 working days** of the complaint being acknowledged.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	92% of complaints were issued a final response within 20 working days of the acknowledgement being issued.

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6.15	Landlords must decide whether an extension to this timescale is needed when considering the complexity of the complaint and then inform the resident of the expected timescale for response. Any extension must be no more than 20 working days without good reason, and the reason(s) must be clearly explained to the resident.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	
6.16	When an organisation informs a resident about an extension to these timescales, they must be provided with the contact details of the Ombudsman.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	Included in letter template
6.17	A complaint response must be provided to the resident when the answer to the complaint is known, not when the outstanding actions required to address the issue are completed. Outstanding actions must still be tracked and actioned promptly with appropriate updates provided to the resident.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	
6.18	Landlords must address all points raised in the complaint definition and provide clear reasons for any decisions, referencing the relevant policy, law and good practice where appropriate.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	Included in letter template
6.19	Landlords must confirm the following in writing to the resident at the completion of Stage 2 in clear, plain language: a. the complaint stage; b. the complaint definition; c. the decision on the complaint;	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	

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	d. the reasons for any decisions made; e. the details of any remedy offered to put things right; f. details of any outstanding actions; and g. details of how to escalate the matter to the Ombudsman Service if the individual remains dissatisfied.			
6.20	Stage 2 is the landlord's final response and must involve all suitable staff members needed to issue such a response.	Yes	Housing Complaints Policy.pdf Section 10 of the policy confirms this	Staff involved include: Stage 2 complaints handler Customer Contact Manager

Section 7: Putting things right

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
7.1	Where something has gone wrong a landlord must acknowledge this and set out the actions it has already taken, or intends to take, to put things right. These can include: • Apologising; • Acknowledging where things have gone wrong; • Providing an explanation, assistance or reasons; • Taking action if there has been delay;	Yes	We have a Remedies Policy in place to support investigations and the steps needed to put things right.	

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	• Reconsidering or changing a decision; • Amending a record or adding a correction or addendum; • Providing a financial remedy; • Changing policies, procedures or practices.			
7.2	Any remedy offered must reflect the impact on the resident as a result of any fault identified.	Yes	The Remedies Policy confirms this	
7.3	The remedy offer must clearly set out what will happen and by when, in agreement with the resident where appropriate. Any remedy proposed must be followed through to completion.	Yes	Remedies and follow on actions are logged against the complaint case, these are tracked and monitored to completion	
7.4	Landlords must take account of the guidance issued by the Ombudsman when deciding on appropriate remedies.	Yes	The Ombudsman guidance has been utilised to update the Remedies Policy which was updated in September 2026	

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Section 8: Self-assessment, reporting and compliance

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
8.1	Landlords must produce an annual complaints performance and service improvement report for scrutiny and challenge, which must include: a. the annual self-assessment against this Code to ensure their complaint handling policy remains in line with its requirements. b. a qualitative and quantitative analysis of the landlord's complaint handling performance. This must also include a summary of the types of complaints the landlord has refused to accept; c. any findings of non-compliance with this Code by the Ombudsman; d. the service improvements made as a result of the learning from complaints; e. any annual report about the landlord's performance from the Ombudsman; and f. any other relevant reports or publications produced by the Ombudsman in relation to the work of the landlord.	Yes	Annual Report 2025/26 - Solihull Community Housing The Annual Report has been published and publicised to customers. The report considers all of these requirements	

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8.2	The annual complaints performance and service improvement report must be reported to the landlord's governing body (or equivalent) and published on the on the section of its website relating to complaints. The governing body's response to the report must be published alongside this.	Yes	SCH and SMBC governance processes have been followed with the Board approval being sought prior to publication.	
8.3	Landlords must also carry out a self-assessment following a significant restructure, merger and/or change in procedures.	Yes	Should such activity occur we are aware of this requirement.	This has not happened so far, but if it were to arise, we would complete a new self-assessment setting out timescales for completion
8.4	Landlords may be asked to review and update the self-assessment following an Ombudsman investigation.	Yes	We will work with the Housing Ombudsman should any such action be required. A review of our Complaints Policy took place in July 2026 after an audit from the compliance team at the Housing Ombudsman.	
8.5	If a landlord is unable to comply with the Code due to exceptional circumstances, such as a cyber incident, they must inform the Ombudsman, provide information to residents who may be affected, and publish this on their website. Landlords must provide a timescale for returning to compliance with the Code.	Yes	SCH have this step built into Business Continuity Planning.	

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Section 9: Scrutiny & oversight: continuous learning and improvement

Code provision	Code requirement	Comply: Yes / No	Evidence	Commentary / explanation
9.1	Landlords must look beyond the circumstances of the individual complaint and consider whether service improvements can be made as a result of any learning from the complaint.	Yes	We have changed the approach to complaint handling and steps have been taken to address issues identified such as 'poor communication', this is detailed in the Annual Report. As the landlord, SMBC receive updates on performance and findings, which includes learning from complaints and the progress of the Service Improvement Plan.	Complaints quarterly report, Voice of the Customer (VOC) report and the complaints annual report refer.
9.2	A positive complaint handling culture is integral to the effectiveness with which landlords resolve disputes. Landlords must use complaints as a source of intelligence to identify issues and introduce positive changes in service delivery.	Yes	Complaints are a regular feature in staff communications and customer communications alike. Complaints are viewed by the wider leadership team as a source of information for improvement and feedback is provided on a regular basis. The Complaints dashboard offers insight into performance and the Voice of the Customer Framework also surfaces the learning from complaints.	
9.3	Accountability and transparency are also integral to a positive complaint handling culture. Landlords must report back on wider learning and	Yes	SCH share learning from complaints on our website and within our customer communications.	

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	improvements from complaints to stakeholders, such as residents' panels, staff and relevant committees.		Reports regarding complaints are issued to committees and board throughout the SCH and SMBC Governance structure. In 2026 the Customer Experience Committee has been created which is chaired by a tenant board member who is also the member responsible for complaints – information is shared and reviewed.	
9.4	Landlords must appoint a suitably senior lead person as accountable for their complaint handling. This person must assess any themes or trends to identify potential systemic issues, serious risks, or policies and procedures that require revision.	Yes	As the landlord, SMBC have assigned the Assistant Director of Housing. SCH has assigned the Head of Customer Experience	
9.5	In addition to this a member of the governing body (or equivalent) must be appointed to have lead responsibility for complaints to support a positive complaint handling culture. This person is referred to as the Member Responsible for Complaints ('the MRC').	Yes	The Member Resposnible for Complaints is the Cabinet Member for Housing SCH has a Tenant Board Member as a Complaints Champion	
9.6	The MRC will be responsible for ensuring the governing body receives regular information on complaints that provides insight on the landlord's complaint handling performance. This person must have access to suitable	Yes	Both the MRC and SCH Complaints Champion have access to complaint data and performance. Case reviews are completed as required and reports issued to demonstrate learning.	

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	information and staff to perform this role and report on their findings.			
9.7	As a minimum, the MRC and the governing body (or equivalent) must receive: a. regular updates on the volume, categories and outcomes of complaints, alongside complaint handling performance; b. regular reviews of issues and trends arising from complaint handling; c. regular updates on the outcomes of the Ombudsman's investigations and progress made in complying with orders related to severe maladministration findings; and d. annual complaints performance and service improvement report.	Yes	The MRC and SCH Complaints Champion receive this information via the governance structures in place. Reports from determinations are shared for review and consideration. The MRC and SCH Complaints Champion are involved in development of the Annual Report and Service Improvement Report.	
9.8	Landlords must have a standard objective in relation to complaint handling for all relevant employees or third parties that reflects the need to: a. have a collaborative and co-operative approach towards resolving complaints, working with colleagues across teams and departments; b. take collective responsibility for any shortfalls identified through complaints, rather than blaming others; and c. act within the professional standards for engaging with complaints	Yes	SCH staff all have a mandatory objective in place that considers this requirement. Staff are required to demonstrate how they have achieved this requirement within their role as part of their annual review.	Our Policy is designed to ensure that we are accountable, apologise when we get things wrong & work towards learning to improve our processes, which includes mandatory training for staff etc.

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	as set by any relevant professional body.			

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Appendix B

Stage 1 complaints

Gender	SCH Population	Count	Percentage
Female	62.95%	430	70.61%
Male	37.03%	179	29.39%
other	0.01%	-	0.00%
Total	**100.00%**	**609**	**100.00%**

Vulnerability/vulnerabilities	SCH Population	Count	Percentage
No	60.39%	263	42.97%
Yes	39.61%	349	57.03%

Ethnicity	SCH Population	Count	Percentage
White	80.88%	420	68.63%
Black, Black British, Caribbean or African	4.07%	33	5.39%
Mixed or multiple ethnic groups	3.01%	23	3.76%
Asian or Asian British	2.21%	16	2.61%
Other ethnic group	0.63%	3	0.49%
Chose Not To Specify	1.17%	9	1.47%
Unknown	8.04%	108	17.65%
Total	100.00%	612	100.00%

Age Bracket	SCH Population	Count	Percentage
0-20	0.77%	2	0.33%
21-30	9.66%	58	9.48%
31-40	18.86%	149	24.35%
41-50	16.24%	106	17.32%
51-60	19.11%	80	13.07%
61-70	16.86%	55	8.99%
71-80	12.39%	36	5.88%
81+	6.00%	7	1.14%
Unknown	0.13%	119	19.44%
Total	100.00%	612	100.00%

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Stage 2 complaints

Gender	SCH Population	Count	Percentage
Female	62.95%	99	65.13%
Male	37.03%	53	34.87%
Other	0.01%	0	0.00%
Total	**100.00%**	152	100.00%

Vulnerability/vulnerabilities	SCH Population	Count	Percentage
No	60.39%	84	51.85%
Yes	39.61%	78	48.15%

Ethnicity	SCH Population	Count	Percentage
White	80.88%	94	58.02%
Black, Black British, Caribbean or African	4.07%	14	8.64%
Mixed or multiple ethnic groups	3.01%	2	1.23%
Asian or Asian British	2.21%	3	1.85%
Other ethnic group	0.63%	0	0.00%
Chose Not To Specify	1.17%	4	2.47%
Unknown	8.04%	45	27.78%
Total	100.00%	162	100.00%

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Meeting of the Board

Report title:	Corporate and Joint Risk Management Report	
Meeting date:	15 September 2026	
Report from:	Paul Edwards, Executive Director - Customer Experience and Corporate Support	
Report author/ lead officer:	Mark Wills	SMBC Health, Safety and Risk Service Manager mark.wills@solihull.gov.uk
Report type:	~~Confidential~~ Open	
Decision type:	Assurance	~~Approval~~ Information

1. Report overview

1.1 The report seeks to provide the Board assurance that the current risk management arrangements are effective and fit for purpose in compliance with the agreed Risk Management Policy.

2. Recommendations

2.1 The Board is asked to:

(1) **NOTE** the contents of the report.

3. Background/context

3.1 SCH has an agreed Risk Management Policy which includes criteria for assessing the likelihood and impact of identified risks to prioritise risks for action. For information, the agreed criteria are provided in appendix 1. Risk management advice is provided by SMBC as part of our back-office services and the contacts are Mark Wills, Health, Safety and Risk Service Manager and Ola Ocholi, Business Risk Advisor within the Audit Services Division.

3.2 The Audit and Risk Committee monitor risk management arrangements in the organisation through regular reports.

4. Matters for consideration

4.1 ELT has continued reviewing its corporate risks based on risk profile. The corporate risk register currently has 9 risks. A calendar of risk deep dives undertaken through ELT focuses on specific risks in place. The corporate risk register, covering themes that impact SCH across business areas was reviewed by ELT this quarter and there were no new risks identified.

4.2 The Corporate Risk Register currently contains a number of risks assessed as being outside of SCH's risk appetite. Four of these are rated amber. The summaries below outline the key drivers for each risk being outside of appetite, together with the measures in place to manage and mitigate their impact. The other out of appetite risks are rated as yellow.

- The risk of failure to have appropriate business continuity arrangements in place to maintain critical functions during a business disruption is out of appetite as further work is required to strengthen recovery arrangements and ensure critical services can continue during significant disruption, particularly where IT systems are unavailable. Actions are in place to enhance critical service recovery plans, supported by clear procedures, contingency arrangements to follow when systems are unavailable. Mock exercises and trainings have been scheduled;

- The risk that resourcing pressures undermine SCH’s ability to meet Delivery Plan commitments exceeds appetite due to ongoing cost and financial pressures which may impact delivery of key priorities. A comprehensive suite of financial controls is in place along with good governance and clear prioritisation of reserves spending alongside investment in key corporate projects and spend-to-save initiatives aimed at improving delivery and reducing operating costs over time;

- The risk of sub-optimal prioritisation and use of capital funding to maintain housing stock remains above appetite as SCH continues to strengthen arrangements to ensure capital investment decisions are evidence-based and deliver best value. Mitigating actions include scenario planning, the use of asset condition data from multiple sources, and established supply chain and resources arrangements to support effective delivery, and

- The risk of failure to have robust systems and processes for all data management exceeds appetite level due to ongoing challenges relating to system integration, resource capacity, and data management processes. A five-year Data Strategy and supporting roadmap are in place to strengthen arrangements, with external support secured for key priorities and continued work with Corporate IT to resolve interface issues between supplier systems.

4.3 ELT considers all operational red risks and any escalated out of appetite risks as part of its quarterly risk review arrangements; there are currently no red risks

identified in the operational risk registers. There are currently no operational risks escalated to ELT for oversight. A summary of the position of the corporate, joint and cyber risks is provided in Appendix 2 of this report.

4.3 A schedule is in place for regular review of operational risk registers by SLT. The sessions consider the current risks and explore any cross-cutting implications of the identified risks on other service areas.

5. Supporting the SCH Delivery Plan

5.1 The information provided in the report details the arrangements in place to manage any identified risks to the achievement of the objectives set out in the current delivery plan as well as its wider goals. The development and regular review of the risk register is one of the controls that supports the governance arrangements at SCH.

6. Voice of the Customer

6.1 There has been no specific customer or stakeholder involvement or consultation in developing the reported risk register, however the registers record any key risks that may affect its stakeholders. SCH works closely with its SMBC stakeholders and has detailed governance arrangements in place. The SCH Audit and Risk Committee have arrangements in place to review the risk reports each quarter and comment on any additional risks to be considered or controls to be put in place.

7. Financial implications

7.1 There are no financial implications as a direct consequence of this report. However, there are potential cost implications if an identified risk were to occur and this forms part of the net risk level assessment.

8. Legal implications

8.1 There are no legal implications as a direct consequence of this report.

9. Risk implications

9.1 This report updates the Board on the management of risk within SCH; there are no risks arising specifically from the content of this report.

10. Equalities implications

10.1 There are no specific implications arising from this report with regard to equality and diversity, however, the risk management approach considers these implications before approving any decisions.

11. Data

11.1 Data used to inform this report is mainly recorded in the JCAD risk management software which is used by SCH officers to record, mitigate and monitor risks to agreed objectives. In addition, data about risks that are below the corporate threshold for reporting are maintained by risk owners in agreed excel templates and a process is in place to review and escalate those risks into JCAD in case of a change in risk profile.

12. List of appendices

12.1 Appendix 1: Risk likelihood and impact scales.

12.2 Appendix 2: Summary of corporate and joint risk register.

13. Background documents

13.1 If the Board wishes to access any background documents, please contact Ola Ocholi, Business Risk Advisor (olamide.ocholi@solihull.gov.uk)

APPENDIX 1- MEASURES OF LIKELIHOOD AND IMPACT

RISK SCORING MARTIX

IMPACT						
	5. Very High	5	10	15	20	25
	4. High	4	8	12	16	20
	3. Medium	3	6	9	12	15
	2. Low	2	4	6	8	10
	1. Very Low	1	2	3	4	5
		1. Very Low	2. Low	3. Medium	4. High	5. Very High
	LIKELIHOOD					

RISK LIKELIHOOD SCALE

Likelihood Scale	1. **Very low**	2. **Low**	3. **Medium**	4. **High**	5. **Very high**
Probability the risk will materialise	<20%	Between 20-40%	Between 40- 60%	Between 60-80%	Above 80%
Consider - Has this risk occurred in the past/ likely to happen in the future	The risk may materialise in 5+ years	The risk may materialise in the next 3-5 years	A similar incident occurred in the past 2-3 years/ the risk may materialise in the next 2-3 years	A similar incident occurred in the past 2 years/ the risk is highly likely to materialise in the next 2 years.	A similar incident occurred in the past year/ it is nearly certain the risk will materialise in the next year.
Consider - External events	There are no external events that increase this likelihood	There are some external events on the horizon that may increase this likelihood	There are developing events that increase this likelihood	There are anticipated external events that will make this risk likely in the next 2 years	There are significant external events making the risk near certain

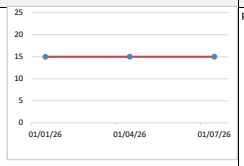
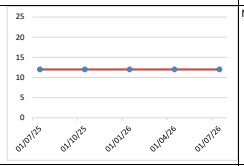
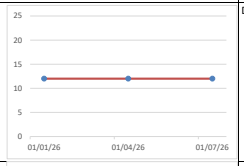
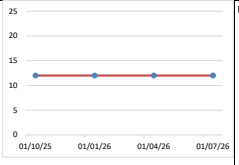
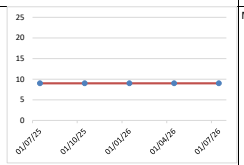
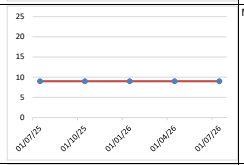
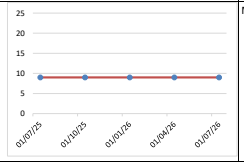
RISK IMPACT SCALE

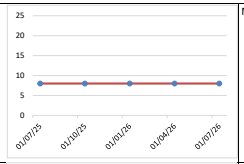
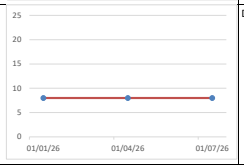
Impact Scale	1. Very low	2. Low	3. Medium	4. High	5. Very high
Health and Safety	Near miss/ Minor injury or ill-health. No time off work required.	Moderate injury or ill health. No long-term effects, less than 7 days' time off.	Dangerous occurrence or moderate/ temporary injury or ill health requiring professional treatment, inability to perform normal work duties.	Serious injury or ill health with long term but reversible/non-life changing impact.	Fatality or life threatening/ irreversible injury or health condition.
Cost (value) impact	Between £0 - £50,000	Between £50,000-£100,000	Between £100,001 - £500,000	Between £500,001-£1,000,000	More than £1,000,000
Budget overrun %	< 5%	5% - 10%	10% - 25%	25% - 50%	>50%
Legal / Regulatory Impact	All compliance requirements have been met. No recourse for legal action.	Non-compliance/ non-conformance with agreed good practice Legal action and/or fines unlikely. Any impact will be internal.	Non-prosecution legal action likely, i.e., cost claims, reprimands and sanctions (e.g., improvement notice)	Legal action highly likely, with significant cost claims, reprimands and sanctions (e.g., Prohibition notice) or anticipated employee court prosecution "Low level action"	Legal action certain (e.g., Criminal offence, possible imprisonment, judicial review, permanent loss of licence to operate, employee prosecution, corporate prosecution)
Service Impact	Minimal/ no service disruption	Minor disruption of non-core service	Significant but not widespread service disruption of key service affecting one business area	Service failure directly affecting multiple customers/ Council operations	Serious service failure directly affecting vulnerable groups
Project Delivery	Minimal/ no impact on project delivery Delays within project thresholds/ quality and cost within parameters	Minor impact on project delivery Delay of up to 1 month, quality and value for money mot impacted	Delays to project delivery. Delay of up to 1 quarter, project scope modified/ impact on value for money	Significant delays to project delivery impacting multiple deliverables, impact on benefits realised/ poor value for money	Complete project failure impacting Council-wide performance and stakeholders.
Objective delivery (excluding safeguarding)	Failure to meet objectives but negligible impact on customer/ resident	Failure to meet objectives minor inconvenience/ impact on customer/ resident	Failure to meet key objectives with significant impact on customer	Failure to meet objectives with life altering impact on customer, low number of people (≤ 50) affected	Failure to meet objectives with life altering impact on customer, high number of people (> 50) affected

Impact Scale	1. Very low	2. Low	3. Medium	4. High	5. Very high
Safeguarding	Minor unexpected harm	Preventable minor harm requiring short term intervention	Preventable moderate harm requiring medical treatment and over 6-months of intervention	Preventable serious harm with long term but reversible/ non-life changing impact, requiring long term intervention	Preventable fatality or life threatening/ irreversible injury or health condition requiring lifelong support and intervention
Reputation	One-off local media story	Short-term local media attention for a week	Sustained local media attention for 2 weeks or more	Sustained multiple local media stories for a month or more	National media attention (print/ broadcast/ social), highly damaging or potential Public Interest Report
Staff	Rare incidents of staff being impacted	Minor impact on staff engagement and morale and wellbeing, lasting less than 3 months	Considerable negative impact on staff engagement and morale with high level of sickness absence, occupational stress	Extensive negative impact on significant numbers of staff on engagement and morale with high level of sickness absence, occupational stress.	Extensive negative impact on majority of workforce, poor staff engagement and morale with high level of sickness absence, occupational stress or high numbers of staff leaving.
Environment	Near miss. No environmental impact. Sustainable activity	Minor environmental impact likely to be remedied by simple means within 1 week. Negligible supply chain environmental impact	Moderate environmental impact. Quality of environment restored within 1 month. Minor to moderate supply chain environmental impact	Serious environmental damage which is expected to last longer than 4 weeks. Unsustainable supply chain	Serious, persistent or extensive environmental impact that cannot be resolved and therefore causes long term harm

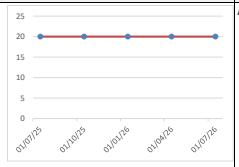
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ITEM 11 - Appendix 2 - SCH Corporate Risk Summary

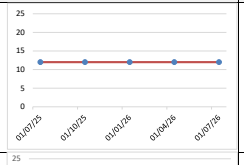
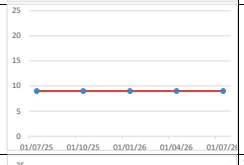
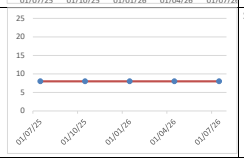
Risk Reference	Risk Title	Gross Risk Rating	Net Risk Rating	Appetite Status	Detail from last Review	Risk Travel	Risk Owner	Tolerance	Narrative (including target date)	Appetite Statement	Next Review Date
SCH0211	Failure to have appropriate business continuity arrangements in place to maintain critical functions during a business disruption	20	15	Exceeding	Critical service plans are in place. Mock exercise and training scheduled for the autumn.		Paul Edwards	Treat (Action in progress)	Action in progress. Critical service recovery plans and clear processes/procedures to support them, including actions to follow when IT systems are unavailable.	Compliance and Reputation	06/10/2026
SCH0201	Resourcing pressures undermine SCH's ability to meet operational commitments.	25	12	Exceeding	A comprehensive suite of financial controls are in place along with good governance and clear prioritisation of reserves spending		Mark Pearson	Treat (Action in progress)	Action in progress.Investment in key corporate projects and spend to save initiatives which help to improve delivery whilst reduce operating costs. 31/3/2027	Finance	01/09/2026
SCH0209	Sub-optimal prioritisation/ use of capital funding to maintain housing stock	16	12	Exceeding	Supply chain to support delivery of identified CapX workstreams now fully mobilised and embedded (Dodd Group SPMP) coupled with role out of the management of change where required resources are in post to oversee and manage delivery.		Darren Baggs	Treat (Action in progress)	Action in progress. Scenario planning and utilisation of data on asset condition from multiple sources. 30/09/2026	Asset Management	06/11/2026
SCH0205	Failure to have robust systems and process for all data management	15	12	Exceeding	5 year Data Strategy strengthens our approach to Data, includes a 2 year road map that sets out a work plan to address issues. We have reprioritised some of the actions in the road map due to staff changes and other operational priorities. We have also secured external support to assist with some key priorities. Identification of priority system investment is done through the Digital & ICT Programme Board. There have been issues in terms of interface between various supplier systems - work continues to progress with Corporate IT to resolve the issue		Mark Pearson	Treat (Action in progress)	Action in progress. There is a 5 year Data Strategy to strengthens our approach to Data, includes a 2 year road map that sets out a work plan to address issues. Work continues to progress with Corporate IT to resolve the issue. 02/04/2029	Change Management and Innovation	13/10/2026
SCH0198	Failure to meet regulatory obligations (excluding Building Safety/ Heath and Safety compliance)	25	9	Exceeding	A comprehensive action plan is in place which captures areas for improvement against the Consumer Standards. Progress is overseen by the Joint Executive Group. SCH has its own Improvement & Inspection Steering Group which drives priority areas for improvement. Updates on regulatory and inspection activity are reported to the SCH Housing Operations Committee. Updates are also reported to SMBC forums such as the Quarterly Monitoring Board.		Mark Pearson	Treat (Action in progress)	Action in progress. Ready for regulation action plan being progressed which will bring the risk within appetite. 30/06/2026	Compliance and Reputation	01/12/2026
SCH0200	Failure to have robust governance arrangements and internal assurance in place.	20	9	Exceeding	New Committee structure is in place. Board and Committee vacancies have been filled. Onboarding programme for new Board & Committee members		Mark Pearson	Treat (Action in progress)	Action in progress. Implementation of agreed changes arising from governance review. 30/09/2026	Compliance and Reputation	17/02/2027
SCH0204	Failure to develop organisation and its staff to meet sector and local challenges.	15	9	Exceeding	People Strategy is in place with supporting action plan which is being delivered.		Mark Pearson	Treat (Action in progress)	Action in progress. Succession planning to be considered as part of the development of a new People Strategy & Action Plan alongside organisational restructures in Asset Management, Building Safety and Housing Services. 31/03/2027	People	17/11/2026

SCH0202	Failure to ensure health and safety of customers, employees and contractors.	20	8	Within	There is dedicated support from the SMBC Health and Safety Support Team to provide advice and support develop a robust health and safety culture. Residents receive regular H&S information updates via Social media and resident news letters. Comprehensive suite of health and safety policies and procedures, including investigation of incidents and accidents is in place.		Mark Pearson			Building Safety and Standards	01/12/2026
SCH0210	Failure to optimise strategic partnership arrangements or failure of strategic partner or contractor leading to disruption in service delivery	12	8	Within	Programme of monthly operational contract/performance review meetings in place, linked to quarterly strategic meetings where matters to be escalated are presented. Supply chain accessed by Dodd Group provides assurance of individual project or work stream delivery.		Darren Baggs			Contract Management	06/02/2027

SMBC - Cyber Security Risk

Risk Reference	Risk Title	Gross Risk Rating	Net Risk Rating		Detail from last Review	Change since last quarter	Risk Owner	Tolerance	Narrative (including target date)	Appetite Statement	Next Review Date
CRRC0014	Inability to prevent or respond effectively to a cyber security incident or ransomware attack (Confidential)	25	20	Exceeding	The threat landscape remains high and the risk level remains the same. According to NCSC AI is one of the top threats as we approach the midway point for 2026 and look ahead to 2027. CSW are working closely with all colleagues at SMBC through business continuity forums and with colleagues in IT. AI is cited as the newest driver of increased threat in this risk area. There is also a greater organisational focus on reviewing and updating business continuity plans in light of the potential for extended system outages as a result of cyber attacks and the implications post an incident. Whilst the sophistication of cyber risks is evolving with AI, the corporate risk highlights the continued efforts to maintain and strengthen our defences within the resources we can afford as an organisation, and to ensure our business continuity arrangements fairly reflect the reality of the potential impact of any cyber attack if successful		Andrew Felton	Tolerate	No further action required	Compliance and Reputation	03/08/2026

SMBC and SCH - Joint Risks

Risk Reference	Risk Title	Gross Risk Rating	Net Risk Rating		Detail from last Review	Change since last quarter	Risk Owner	Tolerance	Narrative (including target date)	Appetite Statement	Next Review Date
JHR0001	Failure to manage and evidence compliance with building safety obligations for Council housing	25	12	Exceeding	Risk has been reviewed to consider the ongoing work on completing procedure documentation and to record updates to building safety team staffing development		Perry Wardle	Treat (Action in progress)	Action in progress	Building Safety and Standards	20/11/2026
JHR0002	The Council is unable to meet or evidence its obligations under the RSHs Consumer Standards (April 2024).	15	9	Exceeding	SCH and SMBC are working collaboratively to ensure we are well prepared for regulation and the inspection process. We will continue to review our mitigating actions and ensure we are making the progress we would expect		Perry Wardle	Treat (Action in progress)	Action in progress	Compliance and Reputation	26/08/2026
JHR0003	Insufficient funding to maintain and manage the Council's housing stock to meet the Council's ambition and regulatory responsibilities as a landlord	20	8	Within	Cabinet has approved Housing Capital Programme of £33.225 million for 2026/27 and rent increases as proposed. The risk owner has confirmed that the risk has been reviewed and there are no changes to the risk.		Sam Gilbert			Compliance and Reputation	23/08/2026

Meeting of the Board

Report title:	Occupational Health and Safety Report: Apr - Jun 2026 (Quarter 1)
Meeting date:	15 September 2026
Report from:	Mark Wills SMBC Health, Safety & Risk Service Manager *On behalf of the Executive Leadership team*
Report author/ lead officer:	Dan Dalton SMBC Senior Health and Safety Advisor 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 occupational health and safety competent assistance, advice and guidance to help the SCH Leadership Team to fulfil their health and safety responsibilities.

1.4. The occupational health and safety and building and resident safety groups meet quarterly with representation from service managers and staff. Progress of these groups are reported to the Safety Leadership Group (Strategic Executive Leadership team) including any matters that require escalation. The Performance and Building Safety Committee attended by Board Members also meet quarterly, which includes reviewing the latest building safety and performance assurance report and action plan. SMBC also have Joint Executive Delivery Group for building safety assurance.

2. Executive Summary

2.1 The Occupational Health and Safety Action Plan for SCH was reviewed by the Occupational Health and Safety Group and discussed at SLT. A further update on progress is scheduled in Q2 2026-27.

2.2 The Corporate Organisational Stress Risk Assessment for SCH covering employees has been updated and approved by ELT. This replaces the previous version dated April 2025.

2.3 There was a total of 30 incidents reported this quarter, significantly lower than Q1 2025-26 (53) and slightly higher than the previous quarter (25). Some of the incidents were deemed to be SCH work related and that further preventative action could have been taken to help prevent the occurrence. Action was taken accordingly to prevent recurrences. Further detail on accidents/incidents is provided in the main section of the report.

2.4 In June 2026, the UK Health Security Agency (UKHSA) notified SCH and SMBC that a resident of Redwood House had been hospitalised with legionella antigen confirmed. A detailed and thorough investigation took place involving the SCH Property Services and Building Safety team in conjunction with SMBC Regulatory Services and other Officers. Advice was also sought from SCH's independent water risk assessor. A programme of works was undertaken across the building in response to the incident. Further detail is provided in the main section of the report.

3. Recommendations

3.1 The Board is recommended to:

(i) NOTE the contents of this report**.**

4. Background

4.1 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.

5. Matters for consideration

5.1 **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, although HSE were made aware of the legionella incident (see 6.4).

5.2 **Legislative/Guidance Updates**: There were no significant legislative updates in Q1 2026-27.

5.3 **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, SMBC Health, Safety and Risk Service Manager, and Dan Dalton, SMBC Senior Health and Safety Advisor. Operational support is also provided, where required by Bruce Joubert and Sharon McDermott, SMBC Health and Safety Advisors.

5.4 The support provided by HSRS includes:

- Providing professional health and safety competent advice as per the Management of Health and Safety at Work Regulations.
- Assisting with and reviewing risk assessments, policies and other documents.
- Attending site meetings following identification of potential health and safety issues.
- Producing health and safety performance reports in conjunction with the management teams and making recommendations for improvement where necessary.
- Support with assigned health and safety actions arising from the occupational health and safety action 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 management audits.
- Developing and delivering training.
- Promoting a proactive and positive health and safety culture and investigating ways of improving health and safety performance across the organisation.

5.5 A Health and Safety Management Audit and Assurance Visit Schedule is in place, which is maintained by HSRS and details which teams/service areas are due to be audited or inspected along with which quarter these are planned for. It should be noted that Health and Safety Audits are a different format to internal audits and are intended to be a supportive process for continuous improvement. The schedule also details other assurance visits, e.g. inspections and annual reviews. The current schedule includes health and safety visits and inspections with staff and teams to assess levels of compliance in practice at an operational level.

5.6 An Occupational Health and Safety Action Plan is in place, which is a requirement of the Corporate Health and Safety Policy. Actions included in the plan are mainly determined by changes in legislation or industry guidance, accident investigation findings, audits/inspection findings, or other employee, enforcing authority or stakeholder input. It has been agreed which managers at SLT level will be responsible for local action plans and HSRS support is in place. A review of progress is due for the Q2 2026-27 Occupational Health and Safety Group scheduled for November 2026.

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

6 Accident/Incident Reporting Analysis Q1 2026/27

6.1 The generic term of incidents includes all accidents, abuse, near misses, fire and any other health and safety related incidents reported on the online corporate reporting system, Assure. Key findings from Quarter 1 2026-27 are noted below.

6.2 There was a total of 30 incidents reported this quarter, significantly lower than Q1 2025-26 (53) and slightly higher than the previous quarter (25).

6.3 In April 2026, the decorative gables on the roof tops of the ‘Kingshurst Five’ (a group of five high-rise blocks of flats) were found to be structurally not sound and at risk of falling. Action was taken immediately with a permanent repair being made. It has been reported that ongoing inspection is not deemed to be necessary. Separate and specific updates on the work that took place were communicated to SCH Board and SMBC regularly through to completion. This incident was also reported to the Building Safety Regulator though the mandatory occurrence reporting process in compliance with the Building Safety Act. Two separate reports were submitted that related to the gables and the parapets.

6.4 In June 2026, the UK Health Security Agency (UKHSA) notified SCH and SMBC that a resident of Redwood House had been hospitalised with legionella antigen confirmed. A detailed and thorough investigation took place with a programme of works undertaken across the building in response to the incident.

6.5 The incident of legionella was not confirmed to the address in Redwood House as samples taken from the address and from the resident were not matched, However a comprehensive programme of precautionary works advised by SCH’s independent water risk assessor, supported by UKSHA was undertaken upon all communal area stored water and outlets, and of works in all individual properties, where needed - consisting of hot and cold water temperature and water quality sampling, tap/shower head descaling, water system chlorination, removal of identified dead legs, fitting of header tank lids, resetting temperature controls, and providing information to all residents of water management measures within their control.

6.6 SCH Property Services and Building Safety team continue to arrange the monitoring of water temperatures across the building, following the completion of works in each flat to ensure it is set at the correct level. Twice-weekly flushing together with fortnightly sampling of communal areas also takes place.

6.7 Void property and contractor procedures have also been strengthened, and SCH’s contractor has reviewed and updated its boiler replacement procedures. Resident awareness on water safety information has also been communicated.

6.8 Throughout this time, regular updates were provided to SCH Board and SMBC with actions and progress reported through an incident response group, which was led by the SMBC Director of Economy and Infrastructure, together with input from SCH senior officers.

6.9 SMBC’s Incident Management team were satisfied that the immediacy of the situation at Redwood House was under control, leading to the IMT being stood down 10th July 2026,

6.10 A programme and Prioritisation of works to complete remining water risk actions and those assumed to be present based upon assessment of 10% of properties is in progress.

6.11 A small number of incidents reported during Q1 2026/27 were assessed as being linked to SCH work activities, with lessons identified to further strengthen controls and reduce the likelihood of recurrence. In response, targeted improvement actions have been implemented including reviews of risk assessments, enhanced communication of safe working practices, additional toolbox talks and training,

contractor process reviews, and reminders to operational teams regarding quality standards and installation requirements.

6.12 As part of SCH's commitment to continuous improvement, feedback has also been received regarding the quality and consistency of some investigation reports. A programme of training, management review and quality assurance has been introduced to strengthen incident investigation processes and ensure learning is captured effectively across the organisation.

6.13 There is no apparent upward or downward trend in the number of reported incidents during the period and no incidents met the threshold for reporting under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR).

6.14 All tenant and employee/agency worker/contractor/other incidents reported to SCH are recorded on the corporate online reporting 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. Attention should be focused on incidents where preventative action could have been taken to help prevent them.

7 Supporting the SCH Delivery Plan

7.1 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.

8 Voice of the Customer

8.1 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.

9 Financial implications

9.1 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.

10 Legal implications

10.1 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.

11 Risk implications

11.1 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.

12 Equalities implications

12.1 Equality and diversity are routinely considered by SCH when dealing with health and safety issues, for example ensuring information is available in different formats and ensuring there are multiple means of communication.

13 Data

13.1 Key data sources used to inform the report include incident reports and management information.

14 List of appendices

None.

15 Background documents

N/A

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Meeting of the Board

Report title:	Statutory Accounts 2025/26	
Meeting date:	15 September 2026	
Report from:	Samantha Gilbert, Chief Finance Officer	
Report author/ lead officer:	Tony Higgins 0121 704 6080	SCH Senior Accountant tohiggins@solihull.gov.uk
Report type:	~~Confidential~~ Open	If the item is confidential, explain briefly why this is the case (e.g. commercial confidentiality).
Decision type:	~~Assurance~~	Approval ~~Information~~

1. Report overview/purpose

1.1 To present the final 2025/26 statutory accounts for approval and signature.

2. Recommendations

2.1 The Board is asked to:

(1) **RECEIVE** the SCH 2025/26 statutory accounts

(2) **NOTE** the reconciliation between the statutory accounts and management accounts. (paragraph 4.4)

(3) **APPROVE** the 2025/26 statutory accounts as recommended by the Audit & Risk Committee at their meeting on 6 July 2026

(4) **APPROVE** the letter of representation as recommended by the Audit & Risk Committee at their meeting on 6 July 2026.

(5) **AUTHORISE** the Chairman 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 6 July 2026.

3. Background/context

3.1 As part of the annual financial cycle the statutory accounts were presented to the Audit & Risk Committee on 6 July 2026. The Audit & Risk Committee have recommended that the Board approve the statutory accounts for 2025/26.

4. Matters for consideration

4.1 SCH's auditors, Bishop Fleming LLP, attended the Audit and Risk Committee on 6 July 2026 to present their formal report following completion of their audit work. No areas of concern were highlighted during the audit process. Their Audit Completion Report – Key Issues for Discussion Document is attached at Appendix A.

4.2 Appendix B to this report is the final version of the statutory accounts after the inclusion of changes recommended by the Audit & Risk Committee. Those changes are:

- Page 3 - add June 2026 changes to Board membership
- Page 4 – amend reference from specific Interim Chief Executive to "*interim arrangements*"
- Page 11 – 12 – add RAG rating to performance data. Also note *"% Asbestos locations reinspected within benchmarked period (Communal Areas)*" corrected from 99.85% to 100%
- Page 12 – removed paragraph which referred to prior year outturn
- Page 19 – amended the final paragraph to refer to "*2026*" from "*2025*"

4.3 As in previous years SMBC have provided a letter of support to SCH. A copy of this letter is attached at Appendix C.

4.4 The table below details the reconciliation between the statutory accounts and management accounts. The surplus on the management accounts is as reported to this Board on the financial dashboard appended to the 2025/26 Financial Outturn report dated 3 June 2026 and the statutory accounts figures appear on the Statement of Changes in Equity (page 36 – Appendix B).

	2025/26 Accounts £'000s
Reported Deficit in year (Management Accounts)	432
IAS19 adjustments – revenue account *Made up of: Current & past year service costs, Interest on Liabilities, Admin Costs, Employer Contributions in year and Expected return on Assets*	(2,571)
Corporation tax	
Surplus in year after IAS19 & Corporation tax (Statutory Accounts)	**(2,139)**
IAS19 adjustment – Remeasurement gain *Made up of: Change in financial / Demographic Assumptions and Other experience assumptions*	(957)
Gain on Property Revaluation	(383)
Total recognised Surplus in year	**(3,479)**
Opening reserves Surplus (Statutory Accounts)	(3,592)
Closing Reserves Surplus (Statutory Accounts)	**(7,071)**

Represented by:

SCH Revenue Reserves	6,573
Revaluation Reserve	498
Closing IAS19 Surplus/ Deficit	-

4.5 IAS19 refers to International Accounting Standard 19 which concerns Employee Benefits and sets out the accounting treatment for all types of employee benefits. The most recent actuarial valuations of plan assets and the present value of the defined benefit obligation were carried out as at 31 March 2026 by Hymans Robertson LLP, a registered actuary engaged by West Midlands Pension Fund.

4.6 The Audit and Risk Committee agreed to recommend to the Board the approval of the statutory accounts and that the Chairman signs both the statutory accounts and letter of representation on behalf of the Board. The letter of representation is included as Appendix D.

5. Supporting the SCH Delivery Plan

5.1 In itself the statutory accounts does not directly support the SCH delivery plan, however, this forms a part of the larger SCH Medium Term Financial Planning cycle which is produced to reflect the SCH Delivery Plan requirements.

6. Consultation and engagement

6.1 There is no public consultation or engagement undertaken for the statutory accounts.

7. Financial implications

7.1 The external audit fee for 2025/26 accounts is £34,500 plus £2,500 for the SCH tax computation arising from the accounts.

8. Legal implications

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

9. Risk implications

9.1 There are no risk implications arising directly from this report.

10. Equalities implications

10.1 There are no equality implications arising from this report.

11. List of appendices

11.1 Appendix A – Bishop Fleming’s Audit Completion Report – Key Issues for Discussion Document
11.2 Appendix B – 2025/26 Statutory Accounts
11.3 Appendix C – Letter of Support from SMBC
11.4 Appendix D – Letter of Representation

12. Background documents

12.1 SCH Management Accounts
12.2 Audit & Risk Committee Report 6 July 2026

Bishop Fleming

Audit · Accountancy · Tax · Advisory

Key Issues for Discussion Document

Solihull Community Housing Limited ("The Company")

For the Year ended 31/03/2026



Our Ref: 130063
Your Ref:
Date: 23 June 2026

PRIVATE & CONFIDENTIAL

The Board of Directors
Solihull Community Housing Limited
Endeavour House
Meriden Drive, Birmingham
B37 6BX
United Kingdom

Dear Sirs

Solihull Community Housing Limited – Key Issues for Discussion Document

We are pleased to attach our Key Issues for Discussion Document. This report, which is designed to be the basis of discussion when we meet, summarises our audit conclusions, highlights the key findings arising from our work and details a number of points that we would like to discuss further with you.

We have initially discussed the contents of our report with Karen Cranley and Tony Higgins and have incorporated their comments where relevant.

This report is an integral part of our communication strategy with you, a strategy which is designed to ensure effective two-way communication throughout the audit process. This report is intended to be solely for the information and use of the Directors and those charged with governance of the Company and should not be shared with anyone beyond this Company without our prior approval.

We would like to take this opportunity to thank Tony Higgins and the finance team for the co-operation and assistance afforded to us during the course of the audit.

Kind regards

Yours faithfully

Bishop Fleming Audit Limited

BISHOP FLEMING AUDIT LIMITED

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8. Other matters 17

1. Executive summary

Status of audit

Our audit is largely complete; however, it is subject to the resolution of certain outstanding queries. Subject to the finalisation of these points, we anticipate issuing an unmodified audit report.

Key audit issues

Within our audit plan, we outlined a number of risks that we considered to be of particular significance to the audit. Our plan also detailed our planned approach for addressing each of these risks.

The specific risks highlighted were as follows:

- Management override of controls
- Risk of fraud in revenue recognition
- Valuation of the pension fund liability
- Valuation of property
- Going concern

Our audit work has been satisfactorily completed on each of the above areas and is further detailed in section 2 of this report.

Audit Adjustments

During the course of our work, adjustments were identified and, on instructions from those charged with governance, were adjusted in the financial statements.

Full details of the adjustments identified are included in section 5 to this report.

Management Letter Points and Internal Control Matters

As part of the prior year audit, two management letter points were identified. Following a review of the controls in place for the 2026 audit, one of these control points are considered satisfactorily resolved, with one remaining. No new matters have been identified during this year's audit.

Independence

The FRC Ethical Standard and ISA 260 requires us to communicate with you on a timely basis on all significant facts and matters that bear upon our independence and objectivity. The aim of these communications is to ensure full and fair disclosure by us to those charged with governance on matters in which you have an interest. Our audit plan included details of any potential independence threats we identified, and the safeguards we put in place to mitigate the threats.

Since our audit plan was issued, we have not become aware of any relationships that, in our professional judgment, may reasonably be thought to bear on our independence or the objectivity of the audit engagement team.

We confirm that in our professional judgment, Bishop Fleming remains independent within the meaning of regulatory and professional requirements and the objectivity of the audit engagement partner and audit staff has not been compromised.

We consider that our independence in this context is a matter that should be reviewed by both you and ourselves. It is therefore important that you consider the facts of which you are aware and come to a view. Should you have any specific matters that you wish to discuss, please contact us.

2. Introduction

Responsibilities of the Directors

The Directors are responsible for the preparation of the financial statements and for making available to us all the information and explanations we consider necessary. Therefore, it is essential that the Directors confirm that our understanding of all matters referred to in this report are appropriate, having regard to their knowledge of the particular circumstances.

We would point out that the matters dealt with in this report came to our attention during the conduct of our normal audit procedures which are designed primarily for the purpose of expressing our opinion on the financial statements of Solihull Community Housing Limited.

In consequence, our work did not encompass a detailed review of all aspects of the system and controls and cannot be relied upon necessarily to disclose possible frauds or other irregularities (including non-compliance with relevant laws and regulations), or to include all possible improvements in internal control that a more extensive special examination might reveal.

We would be pleased to discuss any further work in this regard with you.

Materiality

In carrying out our audit work we have considered whether the financial statements are free from 'material misstatement.' Materiality is an expression of the relative significance of a particular matter in context of the financial statements as a whole.

In general, misstatements, including omissions, are considered to be material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

The assessment of whether a misstatement is material in the context of the financial statements is a matter of professional judgement and will have regard to both the size and the nature of the misstatement, or a combination of both. It is also affected by our perception of the financial information needs of users of the financial statements. Thus, different materiality levels may be appropriate when considering different aspects of the financial statements.

Anticipated audit report

We anticipate issuing an unmodified audit report on the financial statements of Solihull Community Housing Limited for the year ended 31/03/2026 subject to the successful conclusion of matters within this report and to receiving all outstanding information set out previously.

Representation Letter

A letter of representation signed on behalf of the board and dated as at the date of approval of the financial statements is required. The draft representation letter will be provided following the audit clearance meeting.

Update on our planned approach

Our audit work was carried out in accordance with our audit plan in response to the perceived audit risks, and [no matters were identified which required us to change our approach and no additional risks were identified.

Our audit is substantially complete although we are finalising our procedures in the following areas:

- Review of latest management accounts/monthly finance report before signing to consider post balance sheet events
- Approval of financial statements
- Receipt of the management representation letter

Related parties

Whilst management are responsible for the completeness of the disclosure of related party transactions in the financial statements, we are also required to consider related party transactions in the context of fraud as they may present greater risk for management override or concealment or fraud.

We did not identify and significant matters in connection with related parties.

Confidentiality

This document is strictly confidential and although it has been made available to those charged with governance to facilitate discussions, it may not be taken as altering our responsibilities to the Company arising under our audit engagement letter. The contents of this memorandum should not be disclosed to third parties without our prior written consent.

3. Audit, accounts and tax process

The preparation of the financial statements is a vital process for the management of the Company and one which should be performed on a timely basis. We met with those charged with governance as part of our planning work to discuss how we would work together to make the audit process effective.

We discussed key accounting issues early, so they could be considered before the audit commenced.

	2026	2025
Readiness for audit		
Quality of Financial Statements		
Accuracy of financial records		
Quality of working papers		
Availability of Staff		

Key (Impact on audit approach)

Good	
Adequate	
Below Expectation	

As a result of the investment made by both parties, the audit has proceeded very smoothly, with very few issues.

We are keen to continually improve our service and the effectiveness of the process and, therefore, will hold a discussion with those charged with governance to identify areas where this might be possible.

Readiness for Audit

We were provided with copy of the trial balance in line with the timetable agreed before the start of the audit and as outlined in our audit planning letter. No significant further amendments were made by the finance team to their figures following receipt of these trial balances.

All information requested during the onsite fieldwork was provided promptly to our staff. This made the core audit work progress relatively smoothly and as planned. The finance team input into the financial statements and the provision of the strategic report(s) for inclusion in the accounts was timely and appropriate.

Accuracy of financial records

The majority of the underlying financial records were accurate, agreed to the information provided in the audit file and were easy to understand.

Quality of working papers

All information we were provided with was easy to understand and had been reconciled back to the trial balance by the finance team before being provided to us. This made the core audit work progress smoothly and as planned.

Availability of Staff

Key members of the finance team made themselves available to us throughout the audit where possible. We were kept informed of any instances when staff were not available.

4. Audit risks

1 Management override of controls

Significant Risk

We are required by auditing standards (ISA 240) to consider fraud and management override of controls to be a significant risk for all audits as no matter how strong a control environment, there is the potential for controls to be overridden or bypassed.

Work done and conclusion

To address this risk, we have:

- Reviewed the reasonableness of accounting estimates such as accruals, prepayments, expected credit loss provision and the valuation of fixed assets;
- Tested material journals processed at year-end;
- Tested other journals with key risk attributes.

We have not identified any material errors from the testing carried out. We have included a summary of our findings in section 6 of this report.

2 Risk of fraud in revenue recognition

Significant Risk

There is also a presumption under ISA 240 that the risk of fraud in revenue recognition is considered to be a significant risk area.

Work done and conclusion

To address this risk, we have:

- Documented and validated the control environment for income and debtors and carried out walkthrough testing;
- Agreed income recognised from management and maintenance services to agreements with Solihull Metropolitan Borough Council ("the Council") to ensure income is recognised in the correct period and in accordance with the contract terms;
- Performed sample testing on other income to check that it has been recognised in the correct accounting period;
- Agreed year end debtors and accrued income due with corresponding balances recorded by the Council; and
- Considered income journals as part of our work on fraud risks documented above.

We have not identified any material errors from our work.

3 Valuation of the pension fund net liability

Risk

SCH is a member of the Solihull Metropolitan Borough Council defined benefit pension scheme.
There is a risk over the valuation of the pension fund net liability due to the values involved and the high degree of estimation uncertainty, due to the sensitivity of the estimate to changes in key assumptions.

Work done and conclusion

To address this risk, we have:

- Agreed the payroll and employee source data back to payroll records;
- Agreed the overall asset value for the scheme to confirmations or statements on assets; and
- Assessed the assumptions used by the actuaries for reasonableness.

The present value of pension liabilities increased from £62,925,000 to £66,425,000.

The fair value of pension assets increased substantially from £91,182,000 to £100,822,000. This results in a surplus in the scheme of £34,397,000. The main reason for the overall improvement in the net asset position was the strong returns achieved on assets in the scheme in the year.

An Asset Ceiling report was obtained from the Actuary in order to ensure whether any additional liability is required.

As in the prior year, the Asset Ceiling report suggests that the future commitment to pension contributions mean that the net pension asset should not be recognised.

In the prior year, the Asset Ceiling report suggested that an additional liability of £3,528,000 should be recognised. However, the triennial valuation of the scheme has since been completed which has resulted in negative secondary contributions that reduce the amount payable for the next 3 years. The Asset Ceiling report has confirmed that this means that there is no longer an additional liability to recognise, so this liability has been released.

We have not identified any material errors from our work.

4 Going Concern

Risk

As auditors, we are required to conclude whether the Group has sufficient funds to continue trading for 12 months after the date of our audit report. Amended auditing standards require us to positively conclude that the use of the going concern basis used to prepare the financial statements is appropriate rather than previously confirming that we have not identified any matters which could suggest the basis of preparation is inappropriate. As noted below, ISA 570 brings an increased focus and rigour to the work that we will need to complete on going concern.

The company has a formal loan and credit facilities from the Council to fund development and initiatives. The Council also entered into a 5-year rolling management agreement with SCH which confirms their intent to provide sufficient support and resource to the company as required. However, there will inevitably be increased cost pressures on local authority budgets which could challenge the profitably of the company.

Work done and conclusion

To address this risk we have:

- Reviewed and management agreement provided by the council;
- Review of year-to-date management accounts and performance;
- Reviewed group support letter provided by the Council to confirm that financial support will continue and does not plan to be withdrawn, and that there is a commitment from the Council to the business continuity of Solihull Community Housing Limited; and
- Reviewed management forecasts for over a period at least 12 months following the proposed signing date of the financial statements and reviewed the assumptions used to ensure they are reasonable

We have not identified any material errors from our work performed.

5 Valuation of Property

Risk

There is a risk over the valuation of these assets due to the values involved and the degree of estimation uncertainty, due to the sensitivity of the estimate to changes in key assumptions and judgements.

Work done and conclusion

To address this risk, we have:

- Reviewed the valuer's skills and expertise, to enable us to rely upon management's expert;
- Confirmed that the basis of the valuation for assets valued in year is appropriate based on their usage;
- Reviewed the appropriateness of assumptions used in the valuation;
- Reviewed the accuracy and completeness of information provided to / used by the valuer; and
- Tested the accounting for the revaluations made during the year to ensure that they have been input correctly into the SCH asset register and nominal ledger.

We have not identified any material errors. However, we did identify that an element of the valuation increase was technically the reversal of a historical impairment when the properties were first revalued to their existing use valuation. That amount of £202k should have been passed through the income and expenditure account rather than posted straight to reserves.

This value is not material and the closed balance sheet is not impacted, so this amount is included in the schedule of unadjusted differences.

5. Audit Adjustments

In accordance with the requirements of International Standards on Auditing, we must communicate all adjusted and unadjusted items identified during our audit work, other than those which we believe to be clearly insignificant.

Adjusted items

	Balance sheet		Profit and loss	
	Dr	Cr	Dr	Cr
	£	£	£	£
VAT reclass				
Owed by Solihull MBC	219k			
Other tax & social security debtor		219k		
Total	219k	219k		

Unadjusted items

	Balance sheet		Profit and loss	
	Dr	Cr	Dr	Cr
	£	£	£	£
Masons Close Impairment reversal accounting treatment				
Other Comprehensive Income	202k			
Depreciation / reversal of impairment in P&L				202k
Total	202k			202k

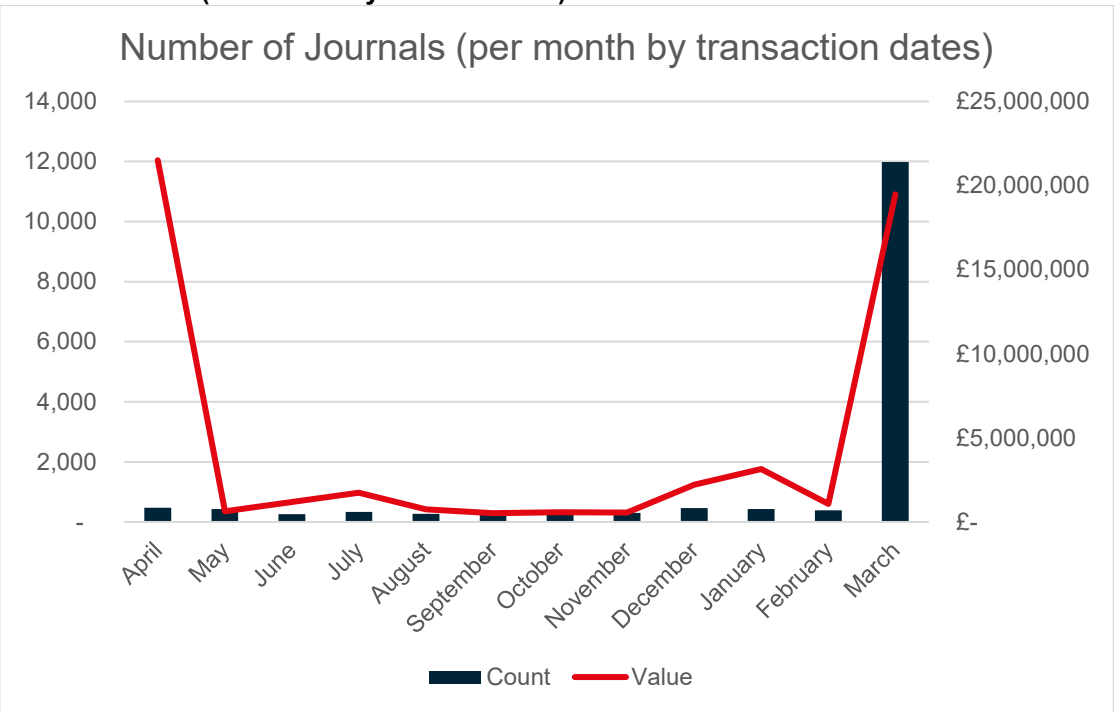
Disclosures

We are required to bring to your attention other financial reporting matters that the Board is required to consider.

Our audit work is progressing and at this stage we have not identified any unadjusted disclosure omissions and improvements.

6. Audit insights

No. of Journals (Per month by effective date)



This graph represents the effective date of journals posted by month.

As you can see, for the majority of the year the number of journals posted remained relatively consistent, with between 250-500 journals posted per month. The notable exception is March 2026, where there was a sharp increase in postings, which is expected due to year end activity and adjustments. The largest year end journal was for the Open Contractor accrual, which accrues for works marked as completed but not invoiced. In terms of value, there was also a spike in April 2025, which was driven by a large VAT consolidation journal setting off the VAT debtors and creditors codes.

Users

From a review of who posted journals, these were all carried out by finance team members, with Steven Brown posting 60% of the total journals. Based on Steven Brown's position as the assistant accountant, this is as we would expect.

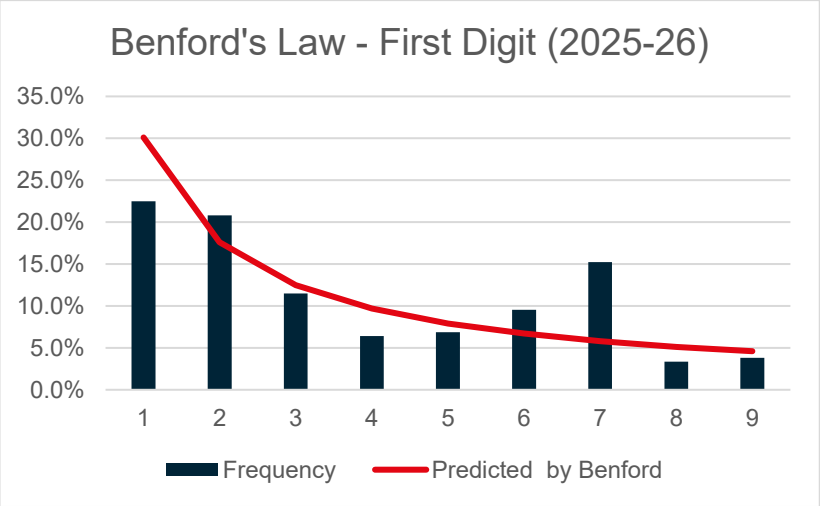
Timing of journals

Day	Number of Single Entries
Monday	838
Tuesday	9,479
Wednesday	1,384
Thursday	2,832
Friday	1,285
Saturday	51
Sunday	71

This table demonstrates the days on which journals are posted. As expected, the majority of the journals are posted between Monday and Friday, the standard working week, however, there are some postings made on weekends. On further inspection, weekend journals were predominantly made up of automatic postings which is not unexpected.

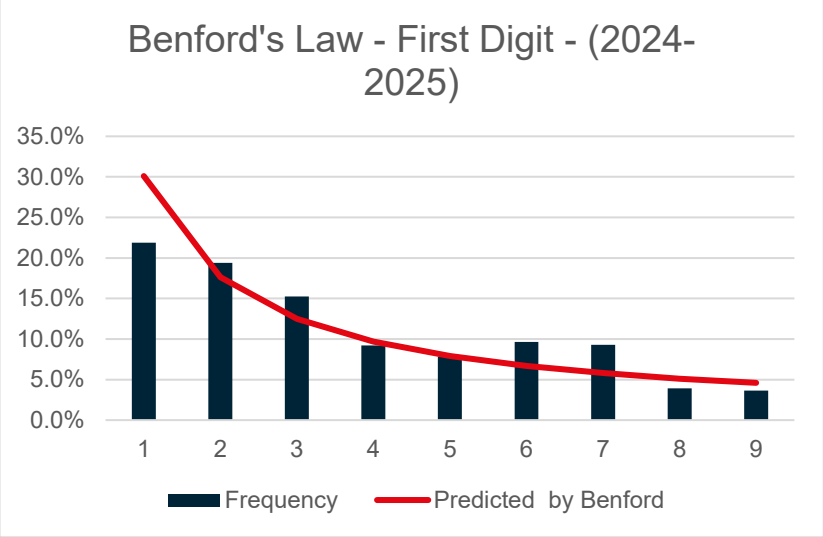
One manual posting was made on a Saturday (journal number 3072592) was made up of expected month end adjustments for August. Two manual journals were posted on a Sunday during the year relating to premises costs, stock adjustments and legal fees.

Benford's Law Review



Benford's Law states that in a natural collection of numbers, the leading significant digit is likely to be small and follow a logarithmic curve. This is analysed to assess whether there is a heightened risk of fraud due to unusual data being posted that is not in line with what is deemed a normal data set.

From the data set of all journals posted during the year, it was noted that the number of entries beginning with a 2, 6 and 7 were all greater than would be expected. Having reviewed these entries, this appears to be driven by amounts with a low value but a high recurrence. A high number of these journals were posted in regards to contractor payments to Dodd Group which includes accruals, invoices and payments split across multiple codes, driving up the number of entries beginning with a 2, 6 and 7. These are based on recurring jobs that have a standard cost. Similar findings were observed in the prior year audit, as demonstrated below:



From this analysis, no further risk has been presented.

Key Word Analysis

We have also performed a review of key words contained within journal descriptions. The majority of those identified related to month end adjustments, intercompany corrections and gifts to members of staff that were not deemed unusual.

7. Management letter points and internal control systems

The Company's management is responsible for the identification, assessment, and monitoring of risk, for developing, operating, and monitoring the systems of internal control and for providing assurance to the Board that it has done so. As part of our audit, we obtained an understanding of internal control sufficient to plan our audit and determine the nature, timing, and extent of testing performed. We are required to communicate to you in writing any significant deficiencies in the design or operation of accounting and internal control systems which were identified during the course of our audit and which we consider are of sufficient importance to merit reporting to you

In accordance with the terms of our engagement we have not provided a comprehensive statement of all issues which may exist in the accounting and internal control systems or of all improvements which may be made, but we are not aware of any significant deficiencies in internal control which we would consider to be material weaknesses. We outline below our observations arising from the audit, which we hope you will find useful.

We would be pleased to discuss further work in this regard with the Board.

KEY:



Observations refer to issues that are so fundamental to the system of internal control that management should address immediately to minimise the risk of a material misstatement within the financial statements.



Observations refer mainly to issues that have an important effect on the system of internal control and, if left uncorrected could potentially lead to a material misstatement within the financial statements.



Observations refer to issues that would, if corrected, improve internal control in general and engender good practice, but is unlikely to have a material impact on the financial statements.

Prior Year Issues – Unresolved

Inconsistency in implementation of cut off controls	
	
2024/25 observation We understand that controls in place to prevent revenue cut off procedures are not applied consistently by managers. As a result, the finance team undertake checks on AR invoices in the first two weeks of the new financial year to detect any potential cut off errors, however this review is not documented. **2024/25 management comment** Managers are informed annually of their responsibilities for the year-end process by the receipt of a 'Year-end instructions email' circulated by the Finance Team at the end of January and weekly emails throughout the year-end closedown period circulated by the Finance Manager. This will be reinforced for the 2025/26 year-end by an update to the Senior Leadership Team from the Finance Team on the importance of adhering to these procedures. For the 2025/26 year end the Finance Team will also document the checks undertaken and any subsequent accruals or prepayments identified which should have been identified by the Budget Managers.	**2025/26 update** From our testing, we have found that there is still limited adherence to year-end instructions around cut off by budget managers. We understand that an Assistant Accountant now reviews invoices around year-end to ensure these have been posted to the correct period or accounted for correctly. As a result of this, no instances of incorrect recognition were identified as part of our cut-off testing. We conclude that the additional controls implemented by the finance team mitigates the risk sufficiently to downgrade this point from an amber rating to green. **2025/26 management comment** Managers continue to be informed annually of their responsibilities for the year-end process by the receipt of: • a 'Year-end instructions email' circulated by the Finance Team, • weekly reminder emails throughout the year end closedown period circulated by the Finance Manager, • verbal reminders to Senior and Executive Leadership Team members, and • discussions in regular finance meetings with relevant Budget Managers. Formal monitoring of accruals identified by the Finance Team rather than the Budget Manager will be introduced in 2026/27 which will form part of the year-end reporting to the Executive Team.

Prior Year Issues – Resolved

Unsigned contracts/new starter booklets	
2024/25 observation In our payroll testing, we noted that two of the contracts for were not signed by new starters. **2024/25 management comment** The conditional offer letter / contract sent to all new employees includes the following "Please return by secure email attaching a scanned copy or to your line manager on your first day". Not all new employees adhere to this request, however, the absence of a signed contract does not prevent commencement of employment. We issue a Confirmation of Appointment letter which states the agreed start date and the agreement is inferred by the commencement of duties on the agreed start date.	**2025/26 update** No instances of unsigned employments contracts were noted during our payroll testing; therefore, this point is now resolved.

8. Other matters

Company law

Company size criteria changes

The UK government has announced that the company / LLP size thresholds have changed in relation to financial years beginning on or after **6th April 2025**.

The turnover size criteria have changed as follows:

Micro entities – from not more than £632,000 to not more than £1m.

Small entities – from not more than £10.2m to not more than £15m turnover

Medium entities – from not more than £36m to not more than £54m.

The balance sheet total thresholds have increased to not more than £500,000, £7.5m and £27m, respectively.

There is a transitional provision that allows companies / LLPs to treat the amendments as having been applied in the previous financial year when determining size. This gets around the 'two-year consecutive rule,' which requires size thresholds to be satisfied only once the company has met those thresholds in two successive financial years. As a result, companies and LLPs can benefit from the threshold uplift as soon as possible after the legislation comes into force.

Proposed corporate reporting changes

The Department for Business and Trade (DBT) and HM Treasury have published a plan to modernise and simplify the UK's corporate reporting framework. Three legislative changes will be introduced shortly:

- The requirement to prepare a director's report will be removed for all companies, affecting approximately 440,000 companies;
- Most medium-sized private companies will be exempted from the requirement to prepare a strategic report as part of their annual report and accounts, benefiting up to 44,000 companies; and
- Approximately 7,000 wholly-owned subsidiaries will be exempted from preparing a strategic report provided their disclosures are included in the UK parent's annual report and accounts.

We will keep you updated on when these changes are enacted.

Changes at Companies House

The Economic Crime and Corporate Transparency Act 2023 gives Companies House more powers to tackle economic crime and aims to improve the transparency and accuracy of information on the UK's company register to support economic growth.

Here is a summary of the main changes:

- Simplifying filing obligations - small companies will no longer have the option to prepare and file abridged accounts. Small companies will be required to file both their Profit and Loss Account and Directors' Report, removing the option of filing 'filleted' accounts. Micro-entities will also be required to file their Profit and Loss Account but will still not be required to prepare or file a Directors' Report.
- Provision that Profit and Loss Accounts may not be publicly available - although small and micro companies will be required to file their Profit and Loss account, it (or parts of it) may not necessarily be made available for public inspection.
- Audit exemption statement - when claiming exemption from audit, directors are currently required to include a statement to that effect on the balance sheet. The Act extends this requirement, additionally requiring the statement to identify the exemption being taken and include confirmation that the company is eligible to take the exemption. This will also apply to dormant companies.
- Electronic delivery - from **1 April 2027** all entities required to file at Companies House will need to file their annual accounts using commercial software:

    - accounts must be filed digitally using software – web and paper filing options for accounts will no longer be available from this date
    - profit and loss accounts will be required for small and micro-entity companies
    - other changes are planned, including updates to audit exemptions and accounting reference periods.

  Other documents like confirmation statements and director updates will not be affected by this change.
- Company law changes beyond accounts - the Act brings in many other changes, giving Companies House the power to play a greater role in tackling economic crime, alongside measures to improve the transparency and accuracy of information on the register. These measures include:
    - identity verification checks being introduced for all new and existing registered company directors, people with significant control, and those who file on behalf of companies;
    - Companies House having greater powers to query information, conduct stronger checks on company names, new rules for registered office addresses and changes to confirmation statements;
    - more effective investigation and enforcement powers, including the ability to share relevant information with law enforcement agencies and other government departments; and
    - the ability for individuals to apply to suppress personal information from historical documents and public view to protect individuals from fraud and other harms.
- Failure to prevent fraud - the Act creates a new Failure to Prevent Fraud offence, aimed at holding companies to account if they profit from fraud committed by their employees. Large companies will be liable where a specified fraud offence is committed by an employee or agent, even of management had no knowledge of or involvement in such a fraud, and it did not have reasonable fraud prevention procedures in place.

You can keep updated on changes coming into law here: Changes to UK company law – Companies House (blog.gov.uk)

Payroll / Employment Rights

Statutory Sick Pay

From **6 April 2026**, Statutory Sick Pay (SSP) changes significantly under the Employment Rights Act 2025.

Key 2026 SSP Changes

- SSP is now payable from the first day of sickness absence, removing the previous three "waiting days" period.
- Removal of Lower Earnings Limit (LEL) - all workers, including those with low incomes, part-time, and flexible workers (such as on 'Zero hours' contracts), are now eligible. The requirement to earn at least £125 per week has been removed.
- New rate calculation - the weekly SSP rate is now the lower of:
    a. 80% of the employee's average weekly earnings (AWE).
    b. £123.25 per week (the statutory flat rate for 2026/27).
- Transitional Arrangements - for absences spanning 6 April 2026, if an employee's SSP rate would drop below the new flat rate, they are entitled to the new rate.

For more information, you can find some guidance from ACAS here: Statutory sick pay changes 2026 | Acas and from the UK Government site here: Statutory Sick Pay Changes

Unfair dismissal

The qualifying period for unfair dismissal protection will change dramatically from **1 January 2027**. Every employee with at least six months' service on 1 January 2027 gains protection on that date and anyone hired from 1 July 2026 onwards will have just six months before gaining unfair dismissal rights (down from two years).

Also, the 52-week and the monetary cap on unfair dismissal compensation are being removed (the current cap being £118,000.

Finally, it becomes automatically unfair to dismiss an employee for refusing to accept changes to core contractual terms. Both fire and rehire (dismissing and re-engaging on worse terms) and fire and replace (dismissing and hiring a replacement) will be outlawed.

Find out more here: Unfair dismissal rights

Other changes

From **6 April 2026**, there are also changes to:

- Paternity leave becomes a Day One right (previously applied only after 26 weeks' service), and unpaid parental leave is also available from Day One (previously applied after one year). Bereaved fathers and partners can also now have up to 52 weeks' paternity leave if the mother or primary adopter dies within the child's first year. Find out more here: Paternity Leave and Unpaid Parental Leave
- Redundancies – where a business proposes 20 or more redundancies in a rolling 90-day period, they must consult with a recognised trade union or with elected employee representatives. The penalty for failing to follow the rules is doubling from 90 days' pay to 180 days' pay. Find out more here: Collective Redundancy: Increased Protective Award
- Fair Work Agency is a new enforcement body bringing together existing functions (including minimum wage enforcement from HMRC) with significant new powers, including:
    a. Right to fine employers who underpay holiday pay or SSP, with the penalty being 200% of the sum owed (reduced to 100% if paid within 14 days)
    b. Employers have a new duty to keep holiday records for six years . Failure to keep these records is a criminal offence and the new agency has powers to inspect those records.

  Find out more here: Fair Work Agency

Tax

R&D tax credits

The two existing research and development tax relief schemes merged from **1 April 2024**.

The merged scheme provides relief at the current RDEC rate of 20%, aside from loss-making companies and R&D intensive companies. The notional tax rate applied to loss-makers in the merged scheme will be the small profit rate of 19%, rather than the 25% main rate currently set in the RDEC.

R&D-intensive companies have been eligible for enhanced relief (retaining the payable tax credit rate of 14.5% compared to the reduced 10% rate) from 1 April 2023. The 2023 Autumn Statement confirmed that the threshold to be considered R&D-intensive would be reduced from 40% to 30% of total expenditure from 1 April 2024. To manage exceptional items of expenditure, once companies have been in the regime for one year, they will be able to make a claim in the following year irrespective of whether the ratio is met in the subsequent year. This is aimed at helping to increase certainty for taxpayers within the regime.

All payments now go directly to claimants which, subject to limited exceptions, removes the use of nominations for R&D tax claims, effective for all claims submitted on or after 1 April 2024.

Further information can be found: Here

VAT

From **1 January 2024**, payment service providers (PSPs) offering payment services in the EU have been required to monitor the payees of cross-border payments. PSPs are required to provide to the tax administrations in member states information of any business that receives more than 25 cross-border payments per quarter.

The new rules and a centralised database (the central electronic system of payment information (CESOP)) should give tax authorities in member states the necessary tools to detect e-commerce VAT fraud carried out by sellers established in another EU member state or in a non-EU country. Read more on this Here

Imports

Carbon pricing for imports

A carbon pricing mechanism for imports will be implemented to support decarbonisation meaning that from 2027, goods imported into the UK from countries with a lower carbon price than the UK will have to pay a levy. This levy, the "carbon border adjustment mechanism" (CBAM), will initially apply to imports of iron, steel, aluminium, fertiliser, hydrogen, ceramics, glass, and cement.

The aim of the CBAM is to ensure that products from overseas are subject to a comparable carbon price to those produced in the UK, resulting in a reduction in the risk of "carbon leakage." Carbon leakage is the name for the movement of

production and associated emissions from one country to another due to diverse levels of decarbonisation effort through carbon pricing and climate regulation.

The charge applied by the CBAM will depend on the amount of carbon emitted in the production of the imported goods. This will be adjusted if any carbon price has already been applied in the country of origin. For example, imports from the EU will have been subject to carbon pricing through the EU emissions trading system.

The introduction of the CBAM in the UK follows the EU, which is due to take full effect with financial implications for importers into the EU from 1 January 2026 (with a transitional period starting in 2023). The design of the UK CBAM was subject to consultation in March 2024, leading to a government announcement that it would introduce a CBAM from **1 January 2027** on imports of certain carbon intensive imported goods from the following sectors: aluminium; cement; ceramics; fertilisers; glass; hydrogen; and iron and steel.

Climate change

EU Omnibus Regulation

At the end of February 2025 the European Commission announced a new Omnibus package of proposals aimed at streamlining and simplifying sustainability reporting requirements for EU businesses and aligning existing regulatory frameworks. The proposals will reduce complexity of requirements for all EU businesses, most notably SMEs and mid-size, and focus the regulatory framework on the largest companies that are likely to have a bigger impact on the climate and the environment.

Although the Omnibus mainly impacts EU-based organisations, UK companies will be affected if they have business operations based in the EU or securities listed on an EU regulated market. The proposed changes also affect UK businesses exporting certain goods to the EU.

The proposed Omnibus does create some uncertainty around potential changes to key regulations, namely the Corporate Sustainability Reporting Directive (CSRD), the Corporate Sustainability Due Diligence Directive (CSDDD), and the EU Taxonomy.

For more information, please read our web article: What the new EU Omnibus Regulation means for your business | 8 Sep 2025 | Insights | Bishop Fleming

A guide to international ESG regulation and legislation

In this third article in our ESG insight series, we look at some of the key international ESG (Environmental, Social, Governance) regulations and legislation and their impact on UK SMEs. A guide to international ESG regulation and legislation | 8 Sep 2025 | Insights | Bishop Fleming

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Solihull
Community Housing
Shaping our neighbourhoods

Solihull Community Housing Limited

Company Limited by Guarantee

Financial Statements
For the year ended 31 March 2026

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Officers and Professional Advisers

Directors ("the Board")	L Beckley (resigned 12 September 2025) S Ashraf (appointed 3 June 2026) D Bannigan (appointed 3 June 2026 S Buckley M Carthew (appointed 3 June 2026) B Donnelly (resigned 3 June 2026) P B Hardy R Hyde (resigned 22 June 2025) M James (appointed 3 June 2026) D Pinwell G Plange-Welbeck (appointed 3 June 2026) G Sleigh (resigned 3 June 2026) D Taber (appointed 3 June 2026) M A Thrasher S Wilson (appointed 23 June 2025)
Chief Officers	F Hughes – Chief Executive (resigned 30 January 2026) L Sugden – Interim Chief Executive (appointed 9 February 2026) S C Gilbert CPFA – Chief Financial Officer D Baggs – Executive Director of Operations P Edwards – Executive Director of Customer Experience and Corporate Support
Secretary	P Edwards
Registered Office	Endeavour House Meriden Drive Solihull B37 6BX
Registered number	04462630
Auditors	Bishop Fleming Audit Limited 55 Colmore Row Birmingham B3 2AA
Bankers	Barclays Bank plc Corporate Business Centre PO Box 333 15 Colmore Row Birmingham B3 2WN

Chair's Introduction

31 March 2026

As the Chair of Solihull Community Housing (SCH) I am pleased to present the company's financial accounts for 2025/26. As an Arms Length Management Organisation our primary focus is working alongside our shareholder, Solihull Metropolitan Borough Council (SMBC), to ensure tenants have good quality homes and receive good quality services.

We know that many of our tenants are struggling with the cost of living. Although inflation has remained broadly static in the year 2025-6, global uncertainty provides a challenging backdrop for social housing. The public sector as a whole has experienced increasing financial challenges and SMBC is one of a number of Councils that successfully applied for Exceptional Financial Support from the government in 2025 to set a 2025/26 balanced budget. National and international factors have continued to impact communities and financial support to help households affected by an increased cost of living was available for energy bills, housing rents and Council Tax.

These challenges have continued to be felt in SCH and once again we have seen increasing demand on our services which has required us to use reserves set aside to finance extraordinary financial pressures so that services to tenants and leaseholders are maintained, particularly to those more vulnerable.

Alongside SMBC, we have continued to prepare for an impending inspection by the Housing Regulator that requires the council to meet defined standards such as ensuring homes are safe, sharing information with tenants and listening to tenants. Although we don't yet know precisely when, we will see an inspection at some point over the next year or two.

We said goodbye to our Chief Executive of 10 years, Fiona Hughes who has retired following her long career having led SCH through a period of significant change. We have interim arrangements in place to cover the role of Chief Executive.

Throughout this time SCH continued to maintain focus on service delivery and achieving the 2020 – 2025 Strategic Aims (shown below). More detail is found later in this document.

- Creating Homes
- More than Bricks and Mortar
- Strengthening Communities
- Excellent Customer Services
- Passion in People

We agreed a new governance framework between SCH and the Council to commence in 2025/26 and this has now been embedded during the year.

Building safety has continued to be a primary focus and, with the support of tenants providing access, we have been able to meet targets for gas servicing and electrical installation for the residential properties, ensuring that tenants and their families are safe in their homes.

Homelessness has continued to increase in Solihull and placed further pressure on a limited supply of homes. This has also led to increased costs and contributed to the Council's financial pressures. At SCH we will continue to work in partnership with the Council to address this challenge.

Throughout the year we have continued to develop our commitment to engaging with tenants including through the Big Conversation and our SCHape Panel, and preparations to introduce a new Customer Experience Committee. We have listened to the tenants who have biomass heating in their properties and made preparations to reduce the tariff they pay for the coming year. We were successful in securing government funding to make the system work more efficiently.

We were also pleased in contributing to the Council being shortlisted in January 2026 for 'Best Small Social Housing Development' at the Local Authority Building Control awards 2025. This shows our success in partnership working with the Council resulting in the delivery of 25 energy-efficient new homes on the site of the Mountfort public house. The development features a mix of one bedroom maisonettes and three and four bedroom family homes, all designed to reduce environmental impact and lower energy bills. Each home includes air source heat pump, solar panels, electric vehicle charging points and has achieved an A-rated Energy Performance Certificate.

Chair’s Introduction

31 March 2026

(continued)

Finally, can I say thank-you to our staff for their hard work and compassion throughout 2025/26 and their unwavering support for tenants, leaseholders and each other.

The following pages detail the financial position and some of the achievements for 2025/26.

Simon Wilson
Chair
15 September 2026

Strategic Report

31 March 2026

The Company sets out below its strategic report, which aims to provide the reader of the accounts with a range of information that includes:

- Context for related financial statements
- Insight into the Company's business model, main objectives and strategy
- Descriptions of the principal risks faced and how they affect future prospects
- Analysis of past performance
- Signposting to complementary information

CONTEXT

SCH is not immune to the challenges facing the wider social housing sector. There is increasing demand for homes with longer housing waiting lists and increasing levels of homelessness. At the same time the number of social homes has reduced over the last 40 years. Like many local authorities, Solihull faces challenges in balancing demand with available supply, both for temporary accommodation to address homelessness and for longer-term housing.

Increasing regulation has placed a solid focus on building safety, customer service and damp and mould. This is to be welcomed but is accompanied by cost pressures when key cost drivers, particularly in maintenance and labour costs are running ahead of inflation. Future requirements such as Decent Homes 2 and Minimum Energy Efficiency Standards will further challenge financial capacity.

The Government's ten year rent settlement (CPI + 1%) along with their plans to implement rent convergence, which will allow providers to increase rents which are below formula level, provides some certainty and allows for longer term planning.

The new consumer regulation regime has now been operational for two years. SCH and Solihull Council, who as the registered landlord are the regulated body, work closely to ensure we are well prepared for future inspection.

We continue to perform well against the Regulator of Social Housing's Tenant Satisfaction Measures (TSMs). 77% of TSMs were performing above the sector median based on the latest benchmarking available for 2024/25 for the local authority peer group.

We are committed to working closely with our customers. During August and September, we held the SCH Big Conversation. We knocked on over 3,000 doors and spoke directly to 838 customers about our proposed priorities for the next 5 years. Our customers priorities have been reflected into our new SCH 5-year vision and delivery plan.

GOVERNANCE

Good governance is essential for SCH to achieve its objectives, drive improvement, maintain legal, regulatory and ethical standards, and provide assurance to Solihull Council as owner of the housing stock. SCH is governed by a Board of directors and during 2025/26 operated with four sub-committees – Audit and Risk, Housing Operations, Human Resources, Equalities and Remuneration and Building Safety. We have recently undertaken a review of our Committee structure and made some changes which will take effect from 2026/27. There were three primary drivers that influenced our thinking:

- To increase the voice of the customer within the governance structure
- To manage the governance burden
- To increase the visibility of human resources and equalities at Board level.

During 2026/27 we will operate with committees for Audit and Risk, Performance and Safety, Customer Experience and Remuneration.

During the Committee we recruited a new Chair with Simon Wilson replacing Richard Hyde who stood down from the Board after completing his term of office.

The Board has adopted the National Housing Federation's Code of Governance and undertake an annual review against the Code to ensure compliance is maintained and identify any new actions that may be required.

Strategic Report

31 March 2026

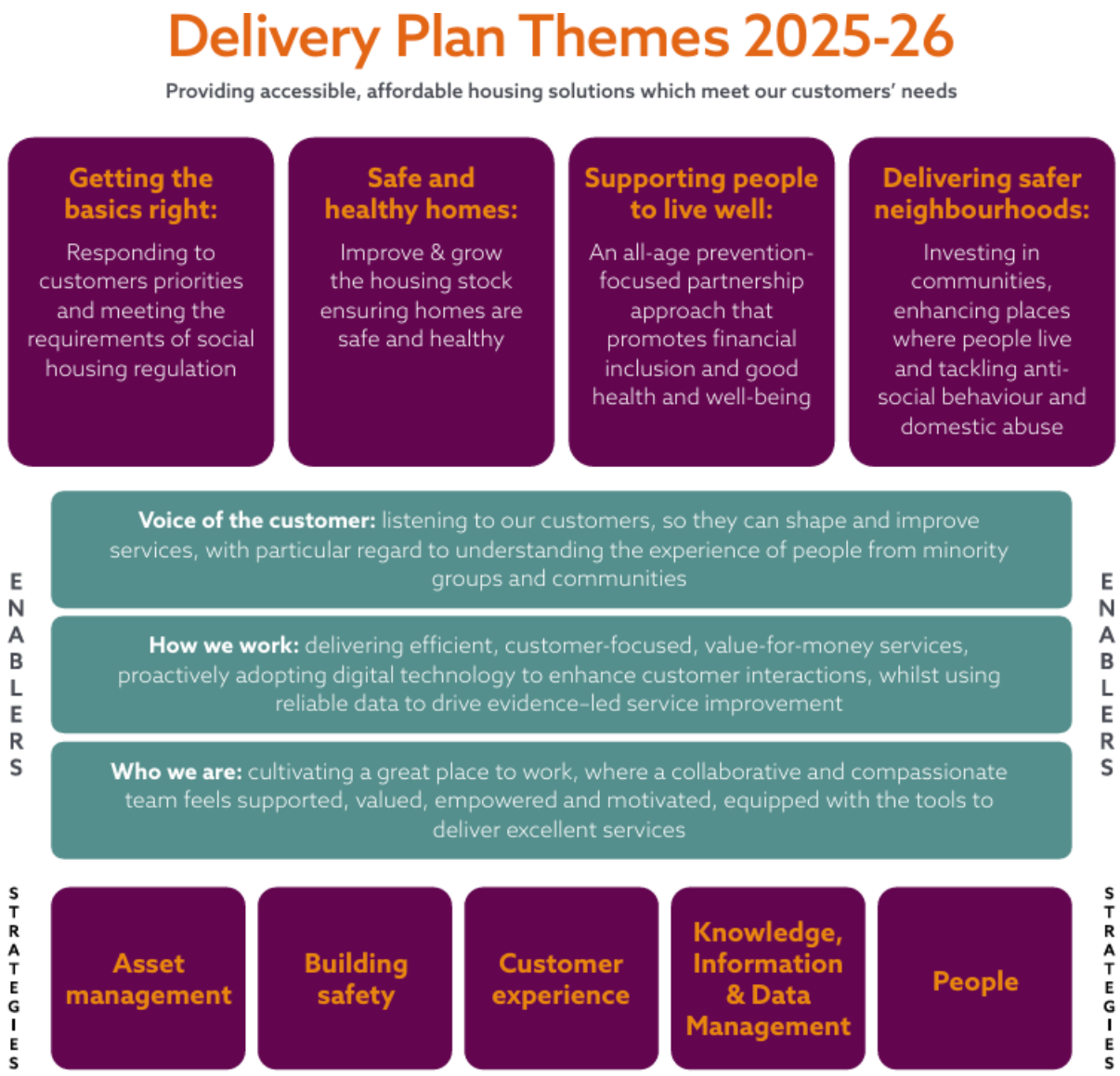
(continued)

ANNUAL PERFORMANCE

SCH set out our priorities for the year in our annual Delivery Plan, which is aligned to our five-year strategic vision. For 2025/26, these priorities were organised around a series of four themes (focused on the delivery of services to customers), underpinned by a set of three enablers (focused primarily on how SCH functions as an organisation). The plan is supported by five business strategies. A set of key performance indicators (KPIs) is included in the Delivery Plan.

Service performance is scrutinised rigorously, both through SCH's own structures, as well as the Council's monitoring. The SCH Board receives a quarterly update on performance exceptions and the Housing Operations Committee undertakes a full quarterly review of all key performance indicators. The Council oversees SCH performance through a Quarterly Monitoring Board, chaired by the Cabinet member for Housing, and is represented at Board meetings by the Director of Economy and Infrastructure and the Assistant Director of Housing.

Our Delivery Plan themes are illustrated in the diagram below.



Strategic Report

31 March 2026

(continued)

The sections below set out an overview of achievements against the themes and enablers for 2025/26.

Theme: Getting the basics right

Feedback from customers clearly demonstrates that they want SCH to 'get the basics right.' This was reflected in the recommendations arising from the Better Social Housing Review commissioned by the Chartered Institute of Housing and National Housing Federation. It is also the driving force behind the work of the Housing Ombudsman and Regulator for Social Housing.

During the year we produced our Complaints Annual Report and have delivered the associated Service Improvement Plan. Following a successful pilot, we implemented a centralised complaints team which has improved the speed and quality of complaints administration as well as identifying our learning from complaints which we share with customers through our quarterly Voice of the Customer report which we introduced this year

Our SCHape tenant scrutiny panel completed a review of our repairs service. The recommendations in the review have been incorporated in a broader Repairs Performance and Continuous Improvement Plan which is being progressed. We are also introducing a revised structure in our Operations Division which will help to improve our operating model.

A new allocations scheme was introduced during the year and has been successfully implemented.

We are working closely with the Council to ensure compliance with the Consumer Standards and that we are prepared for inspection when it takes place. External support has been secured from Campbell Tickell by SMBC and we are responding to advice and recommendations which they have made including the introduction of a new assurance framework for regulation.

Theme: Safe and healthy homes

Demand for homes continues to significantly exceed supply. SCH and the Council are committed to growing the housing stock but also to improve the quality of existing homes. We are committed to providing homes that are safe and healthy - ensuring that gas, electric and other installations meet compliance standards, dealing promptly with cases of damp and mould, and also by investing in properties to improve safety and energy efficiency.

We have a 5-year rolling programme of stock condition surveys and currently 85% of the stock is surveyed. A targeted programme is being implemented to facilitate surveys to the properties not yet accessed. Data from the stock condition surveys is used to formulate the capital programme improvement works. We have implemented a programme of energy efficiency improvements funded through the government's Warm Homes: Social Housing Fund grant topped up with SCH Capital funds.

We take our responsibilities to provide safe homes for our customers extremely seriously. We closely monitor our performance in tackling the 'big 6' compliance issues (Gas, Asbestos, Fire, Electrical, Water Hygiene and Lifts), and damp and mould.

We have implemented to new arrangements to ensure compliance with Awaab's Law, the new legislation on damp & mould. We have completed an internal restructure which will take effect from April 2026 and introduce a new Healthy Homes Team which will provide additional resources for inspections and works.

We have five sites in our development pipeline and are actively working on developing a new pipeline with a number of sites under review and appraisal.

Theme: Supporting people to live well

We recognise that our role is broader than as a provider of housing. We are well-placed to help local residents tackle health and wellbeing, financial, and employment issues. We work in partnership with Solihull Council and other stakeholders to provide joined-up support services that will alleviate some of the challenges and pressures faced by its residents.

Strategic Report

31 March 2026

(continued)

We have worked closely with colleagues in Adult Social Care at the Council to create a new Home Improvement Agency, Solihull Independent Living (SILS). This brings together our wellbeing service and our aids and adaptations service under a single umbrella. Bringing these services together better enables existing services to deliver valuable support which prevents delays and reduces the need for formal care. It supports those who may already have care needs to remain as independent at home for as long as possible, and supports other vital social care, housing and health services including assisting to facilitate hospital discharges, keep people safe at home and avoid care crises or admission to hospital. SILS offers a range of solutions to support people to live independently and safely within their own homes. It provides a Safe and Sound pendant alarm service with 24/7 monitoring service. It offers free home visits to check for hazards and provide low level equipment to ensure homes are sage and reduce the risk of falls. It also provides referrals to specialist support services. The Handyperson Home Support Service provides low cost support. It also undertakes major and minor adaptive works for both council and private properties to support people maintain independence within their own home. Adaptations are funded through Disabled Facilities Grants and the Housing Revenue Account (Council properties).

Theme: Delivering safer neighbourhoods

Our role is not just to provide accessible, affordable housing solutions but to work collaboratively with local people and organisations to enhance their neighbourhoods. This priority is reflected in the new Tenant Satisfaction Measure, assessing whether a landlord makes a positive contribution to the local area. A core component of this is tackling anti-social behaviour, domestic abuse and other safeguarding challenges, ensuring residents feel and are safe.

We participate in a range of multi-agency partnerships which contribute to ensuring our neighbourhoods are safe. Our estate management service plays a key role in ensuring our neighbourhoods are a safe and pleasant place to live. Our work includes estate inspections, grounds maintenance, communal cleaning and responding to reports of littering and fly tipping. We also carry out regular inspections relating to building safety, particularly in high rise buildings and this includes routine checks on accessibility and fire management controls. We have also reviewed our estate management service standards with input from our customers.

We continue to take a proactive approach to supporting victims of domestic abuse via our embedded domestic abuse pathway. We ensure that we maximise the use of specialist tools including the Housing Independent Domestic Violence Advocates Service, refuge placements, and the Sanctuary Scheme.

Enabler: Voice of the customer

Our Resident Engagement Framework operates under the overarching principle of ‘Nothing About You, Without You,’ and comprises three key functions:

- SCHape Residents’ Panel
- Virtual Improvement Panel (VIP)
- Specific initiatives relating to the SCH strategic objectives

During the year, we introduced a new quarterly Voice of the Customer report for residents. The report provides an opportunity to showcase what customers have told us and how we have used their feedback and insight to identify and action improvement.

Our Everyone Matters campaign is helping us to improve the quality and completeness of our data and to help us to understand customer needs. Collecting data on protected characteristics enables us to assess equality in access to and outcomes from the services we deliver. By understanding who our residents are and any vulnerabilities or additional needs they may have, we can tailor how we communicate, arrange appointments and deliver services more effectively. Our new ‘needs on the day’ approach ensures that we can adjust the way we deliver services to customers based on any temporary or one-off needs which relate to a specific visit or enquiry or ongoing needs.

Following a review of our Committee structure, we have agreed to introduce a customer-led Customer Experience Committee in 2026/27 which will increase the customer voice in our governance structure.

Strategic Report

31 March 2026

(continued)

Enabler: How we work

Delivering efficient, customer-focused, value-for-money services, proactively adopting digital technology to enhance customer interactions, whilst using reliable data to drive evidence-led service improvement is a key enabler.

During the year, as part of our One SCH Programme, we have modernised our telephone system in the Contact Centre. The new capabilities available have improved the way our staff operate and enhance the overall customer experience. We have also introduced new enhanced systems for complaints and anti-social behaviour. The increased use of digital technology is helping us to streamline working practices, provide a single view of customer records, and will provide self-serve options to customers whilst protecting services for the vulnerable.

Enabler: Who we are

We are committed to creating a great place to work, where a collaborative and compassionate team feels supported, valued, empowered and motivated, equipped with the tools to deliver excellent services.
During the year we have agreed a new People Strategy and supporting action plan. Our People Strategy Working Group, which includes representation from across SCH including representation from our Staff Engagement Group and our Staff Equalities Forum, has played a key role in developing the new strategy. The Strategy is built around five themes:

- equipping our teams for the future,
- invest, engage and develop,
- culture and leadership,
- wellbeing
- performance and accountability.

Our Organisational Development Plan has ensured we are well prepared for the new regulatory requirements on professionalisation which will take effect later in the year.

Our Staff Engagement Group and the Staff Equalities Forum meet regularly throughout the year and are represented on our People Strategy Working Group.

Strategic Report

31 March 2026

(continued)

PERFORMANCE INDICATORS

Description	2025/26 Target	Sector benchmark (if available)		2025/26 Actual
		Quartile 1	Median	
Stage 1 complaints per 1,000 properties	N/A	64.2	44.8	56.10
Stage 2 complaints per 1,000 properties	N/A	11.7	7.6	14.13
Stage 1 complaints resolved in timescale	85.00%	93.90%	81.80%	93.80%
Stage 2 complaints resolved in timescale	96.00%	97.90%	82.70%	94.20%
ASB cases per 1,000 properties (all)	N/A	61.6	37.4	31.32
ASB cases per 1,000 properties (hate crime)	N/A	1.2	0.6	0.71
Homes that do not meet the Decent Homes Standard	2.00%	3.2%	6.7%	1.18%
Repairs completed within target timescale (emergency)	95.50%	98.9%	94.9%	90.16%
Repairs completed within target timescale (non-emergency)	85.00%	90.80%	84.00%	84.88%
Percentage of properties with valid gas certificate	100%	100%	99.90%	99.95%
Percentage non-domestic assets covered by a valid FRA	100%	100%	100%	100%
Percentage known asbestos locations reinspected within benchmarked period (communal areas)	100%	100%	100%	100%
Percentage of relevant water installations covered by a risk assessment	100%	100%	100%	100%
Percentage communal passenger lifts that require a thorough examinations (LOLER)	100%	100%	100%	100%
Overall satisfaction with services provided by SCH	80.00%	74.80%	68.50%	78.04%
Satisfaction: repair in the last 12 months	80.00%	77.90%	71.80%	78.51%
Satisfaction: time taken to complete the last repair	76.00%	75.60%	67.50%	80.17%
Satisfaction: home is well maintained	80.00%	74.30%	68.10%	73.30%
Satisfaction: home is safe	81.00%	79.90%	74.30%	79.25%
Satisfaction: landlord listens to and acts upon tenants' views	71.00%	64.70%	57.20%	67.79%
Satisfaction: landlord keeps you informed about things that matter to you	79.00%	74.30%	69.10%	75.31%
Satisfaction: landlord treats me fairly and with respect	85.00%	80.30%	74.80%	83.27%
Satisfaction: approach to handling complaints	45.00%	36.80%	31.30%	34.78%
Satisfaction: landlord keeps communal areas clean and safe	70.00%	69.60%	63.10%	70.91%

Strategic Report

31 March 2026

(continued)

PERFORMANCE INDICATORS (continued)

Description	2025/26 Target	Sector benchmark (if available)		2025/26 Actual
		Quartile 1	Median	
Satisfaction: SCH makes a positive contribution to neighbourhood	74.00%	67.90%	62.0%	70.00%
Satisfaction: approach to handling ASB	60.00%	61.40%	57.20%	54.34%
% Damp and Mould Inspections completed within timescale	100%			92.19%
% Damp and Mould remedial works completed within timescales	100%			71.91%
Fire remedial actions (all) completed within target timescale	80.00%			42.21%
Percentage of rent loss due to voids	1.25%			0.93%
Current tenant arrears as % of rent debit	3.50%			2.85%
Average stay in temporary accommodation (all) – days	80			186
Average stay in temporary accommodation (families with children) – days	95			264
Percentage of homeless approaches where prevention or relief achieved	60%			56.35%
Customer satisfaction (adaptations)	94.00%			91.26%
Overall satisfaction (transactional)	87.00%			87.24%
Contact centre speed of answer	210			407

Key to RAG rating

	Target was met
	Performance is within tolerance of the target
	Target was not met

Overall, 65% of our KPIs at year end were at or above target or were within tolerance. We seek to set stretching targets. We were pleased that our performance against the Tenant Satisfaction Measures which are set by the Regulator of Social housing compared well with our peers. Further details can be found in our performance report which is available on our website.

Strategic Report

31 March 2026

(continued)

FINANCIAL PERFORMANCE

The Revenue Management Fee, paid by the Council increased from £24.488m in 2024/25, to £25.872m in 2025/26, as well as a capital programme of £16.350m (2024/25: £18.957m).

The financial performance (separating out the impacts of IAS19 – Pensions and taxation) against budget and the previous year can be summarised as follows:

	2025/26 Actual £'000	2025/26 Budget £'000	2024/25 Actual £'000
Revenue			
Income	33,465	34,701	34,453
Expenditure	(33,897)	(34,646)	(34,029)
(Deficit)/ Surplus	(432)	55	424
Capital			
Income	21,524	25,538	22,525
Expenditure	(21,524)	(25,538)	(22,525)
Surplus/ (Surplus)	-	-	-
Combined			
Income	54,989	60,239	56,978
Expenditure	(55,421)	(60,184)	(56,554)
Operating (deficit)/surplus	**(432)**	**55**	**424**
Corporation tax	-	-	(6)
IAS19 Pension Adjustments	2,571	-	1,132
Surplus per Income Statement	**2,139**	**55**	**1,550**

FUTURE CONSIDERATIONS

We have developed a new strategic vision for the period 2026-30 supported by a five year Delivery Plan. The Delivery Plan is supported by a series of actions and targets which will be reviewed and updated on an annual basis.

Our Strategic Vision is to ‘Create safe, healthy and good quality homes and communities for our customers.’

We have identified five strategic aims which set out our broad goals over the life of this plan. Our strategic aims are supported by five key business strategies as illustrated in the diagram on the next page.

Strategic Report

31 March 2026

(continued)



The Delivery Plan was developed in consultation with our customers, colleagues at Solihull Council and our staff.

The delivery objectives for each of the strategic aims are shown in the table below:

Safety First – homes and neighbourhoods: • Ensure all homes meet building safety and compliance statutory requirements • Take a proactive approach to tackling damp and mould • Respond within appropriate timescales to any safety concerns raised • Deliver excellent health and safety practice for customers and staff • Ensure effective safeguarding of children and adults at risk Work with partner agencies to: • Deliver clean, safe and secure and thriving neighbourhoods • Proactively support people experiencing domestic abuse • Provide an effective ASB service	**Homes to be proud of:** • Grow the social housing stock through new build and acquisition • Intelligence-led investment in the housing stock including the use of new technology • Improve the energy efficiency of our homes • Deliver continuous improvement in the repairs and maintenance service rebalancing from reactive to planned • Improve the efficiency and effectiveness of the District Heating System

Strategic Report

31 March 2026

(continued)

Customers at the heart of all we do:	**Support and value Team SCH:**
• Deliver services which are accessible and tailored to the needs of customers • Ensure our customers have a strong and influential voice • Continuously improve by learning from challenges and when things go wrong • Strengthen communications to keep customers informed • Promote tenancy sustainability through targeted customer support • Support partnership work on socio-economic and health inequalities and prevention through effective collaboration and signposting	• Equip our teams for the future • Invest, engage and develop our staff • Invest in a strong organisational culture and effective leadership • Support staff wellbeing • Embed a collaborative, high-performance culture built on accountability
Building a stronger organisation	
• Develop an integrated approach to Risk, Performance, and Financial Management • Continuous improvement in Data Quality, Insight, and Compliance Frameworks • Drive value for money through effective procurement and contract management • Enhance operational effectiveness through streamlined processes and improved workflow • Maximise Funding and Investment Opportunities • Work in partnership with the Council and comply with regulatory obligations	

RISK MANAGEMENT

The Executive Leadership Team (ELT) undertakes full reviews of the main corporate risks on a rolling basis with all risks reviewed at least annually. It also undertakes regular reviews of the risk register.

The nine corporate risks are:

- Failure to have appropriate business continuity arrangements in place to maintain critical functions during a business disruption
- Financial pressures undermine SCH's ability to meet Delivery Plan commitments.
- Sub-optimal prioritisation/ use of capital funding to maintain housing stock
- Failure to have robust systems and process for all data management
- Failure to meet regulatory obligations (excluding Building Safety/ Health and Safety compliance)
- Failure to have robust governance arrangements and internal assurance in place.
- Failure to develop organisation and its staff to meet sector and local challenges.
- Failure to ensure health and safety of customers, employees and contractors.
- Failure to optimise strategic partnership arrangements or failure of strategic partner or contractor leading to disruption in service delivery

In addition, there are three joint risks which are held jointly with the Council. These are:

- Failure to manage and evidence compliance with building safety obligations for Council housing
- The Council is unable to meet or evidence its obligations under the RSHs Consumer Standards
- Insufficient funding to maintain and manage the Council's housing stock to meet the Council's ambition and regulatory responsibilities as a landlord

The Board's Audit and Risk Committee also review risks on a regular basis and receives a report each quarter from the Council's Health, Safety and Risk Manager.

Strategic Report

31 March 2026

(continued)

The Board's Statement on Section 172 of the Companies Act 2006

Under s172 of the Companies Act 2006, Solihull Community Housing (SCH) has a duty to promote the success of the company for the benefit of its members as a whole, having regard to the stakeholders and matters set out in S172(1) (a-f) of the Act:

(a) Maintaining a high standard of business conduct.
(b) Acting fairly between the members of the business.
(c) The interests of employees.
(d) Fostering business relationships with suppliers, customers, and others.
(e) The impact of operations on the community and the environment.
(f) The likely consequence of any decision in the long term.

The Board considers the key stakeholders to be:

- Its customers – tenants, leaseholders, other landlords and the public.
- Solihull Metropolitan Borough Council – both as the sole shareholder and as a partner in providing aligned services for Solihull.
- Its employees – who are integral to the successful delivery of services.

The Board also needs to address the following:

- The issues, factors, and stakeholders the directors consider relevant in complying with the above and how we have formed that opinion.
- The methods the directors have used to engage with stakeholders and understand the issues to which they must have regard.
- The effect of that regard on the company's decisions and strategies during the year.

The Delivery Plan agreed with the Council sets out SCH's priorities for the year, aligned to the overarching strategic objectives. Details are set out in pages X to Y, including a summary of performance against key indicators for the year.

The Council has a rolling 30-year HRA plan updated annually and the SCH Management Fee and HRA capital programme are included. We agree an annual budget in the context of a balanced 3-year period. We have a rolling programme of detailed stock condition surveys to help improve the investment decisions into the housing stock.

The SCH Board holds four meetings a year supported by four sub-committees in place as referred to at page 6. All reports include a requirement to consider:

- Financial implications
- Equality and diversity implications
- Risk implications
- Tenant involvement / consultation
- Support for the Delivery Plan

These considerations ensure decisions are made within the context of the wider implications that affect the community and tenants.

The relationship with our shareholder is strong and there are a variety of meetings for SCH to interact with the Council. At an executive level, the Chief Executive meets regularly with the Council's Chief Executive and the Director of Economy and Infrastructure, and the SCH Chief Executive and Executive Directors meet regularly with the Council's Assistant Director (Housing) at the Joint Executive. In terms of oversight, SCH reports to the Quarterly Monitoring Board, chaired by the Cabinet Member for Housing, and attends the Council's Strategic Housing Board. Both the Scrutiny Board and the Cabinet member review and approve the Delivery Plan, which sets out SCH's priorities for the year ahead. Support services are provided through the Council giving access to various professional services such as finance, procurement, legal and HR services to enable well informed decision-making and accurate reporting.

Strategic Report

31 March 2026

(continued)

SCH has a strong, well-embedded assurance framework demonstrated through the Annual Governance Statement. These assurances are strengthened by the support given by the Council's Internal Audit and Health and Safety teams.

As a wholly owned subsidiary company of Solihull Metropolitan Borough Council, our primary objective is to deliver our core services – managing, maintaining, and delivering additional affordable rented homes. Working on behalf of the Council, SCH delivers landlord functions to tenants and leaseholders, and statutory homeless duties, and provides a range of wellbeing services to vulnerable adults. Examples of achievements are included within the Strategic Report.

Tenant satisfaction is important. In line with the consumer regulation requirements, SCH has gathered data on the 22 Tenant Satisfaction Measures. SCH has performed well in comparison to other local authority landlords on these measures.

The SCHape panel comprises tenants who review the services SCH provides with a view to working with us to make improvements. Examples of areas where SCHape has had an impact are described earlier in the report.

Company risks are recorded using the Council's risk register methodology and result in developing mitigating strategies. This is set out in more detail above. The Board monitors risk primarily through its Audit and Risk Committee, which receives an update at each meeting. The Board also receives an annual risk management report.

SCH's employees are a key priority. The Delivery Plan includes a specific enabler 'who we are,' setting out SCH's organisational development priorities. This is underpinned by the People Strategy and action plan. For 2025/26 this included commissioning an independent staff survey and delivering an organisation-wide training plan, which includes a particular focus on meeting the requirements of professionalisation, and supporting managers by strengthening recruitment arrangements. We formally recognise two Trade Unions and meet regularly with them.

The Council has allocated grant and core funding to SCH, and we work with community partners in the voluntary and public sectors to deliver additional services to reduce rough sleeping. This reflects our approach to working collaboratively with the community to deliver services for the benefit of those that need our help.

We also work with the Council and in our own right to influence the direction of local and national housing policies that impact on tenants (for example, we join with others to attempt to influence government policy through the National Federation of ALMOs (NFA) and other bodies).

For further information regarding SCH please refer to our website.

Simon Wilson

Chair

15 September 2026

Report of the Directors

31 March 2026

The Directors present their report and the audited financial statements for the year ended 31 March 2026.

PRINCIPAL ACTIVITIES

The principal activity of the Company is the management and maintenance of Council social housing stock and other related activities.

DIRECTORS AND CHIEF OFFICERS

The Directors and Chief Officers of the Company during the year and subsequently are set out on page 1.

SCH also has the following Committees who have responsibility for specific areas:

- Audit and Risk Committee
- Human Resources, Equalities & Remuneration Committee
- Housing Operations Committee
- Building Safety Committee

VALUING EMPLOYEES

SCH values its employees. Our employee offer includes flexible working, such as change in working patterns and working from alternative office locations. The Blended Ways of Working is designed to enable staff to have a balanced approach to working from an office or their home. This supports staff to maximise performance whilst maintaining a work-life balance. Other benefits include access to 'Cycle2Work', and a staff discount scheme. The Seasonal Stars initiative recognises individuals and teams who 'go the extra mile'. Information on the intranet, regular briefings and 'away days' enhance internal communications. Positive relationships with recognised trade unions (UNITE and UNISON) are in place with regular meetings to discuss changes and new policies that affect staff.

Our staff have equal access to personal and career development opportunities as set out in the Learning and Development Policy and reflected in the People Strategy. Training and other opportunities are equally available to staff who work flexibly, full, part-time and reduced hours. Managers are expected to ensure that staff complete mandatory and job specific training and demonstrate learning. The take up of learning and development opportunities is monitored to ensure there are no hidden gender, race or disability barriers to access.

The staff appraisal system introduced in 2019 is now well embedded and SCH has invested in the staff development programme for all staff to extend their skills and behaviours to better serve our customers.

EQUALITY, DIVERSITY AND INCLUSION (EDI)

We are committed to the principles of fairness, equality of opportunity, diversity and inclusion. We positively embrace and celebrate diversity and promote an inclusive culture in our role as an employer and a provider of homes and services. Our HEART values are Honesty, Excellence, Achieving together, Respect and Transparency. We are committed to becoming a diverse and inclusive organisation and placing our customers, staff and other stakeholders at the HEART of what we do.

Everyone we deal with, be it board members, staff, tenants, leaseholders, contractors, suppliers and others, know that we do not tolerate discrimination, harassment or victimisation and will act where our EDI policy is breached.

Our polices and operational practices are designed to protect people from discrimination on the grounds of protected characteristics covered in equality legislation. Board and staff members are recruited on merit. Reasonable adjustments are made for people with disabilities in line with accreditation under the Disability Confident Scheme.

The Equality, Diversity and Inclusion Policy and Action Plan support us to meet legal and obligations under the Equality Act 2010 and other relevant regulations such as the Housing Consumer Standards. Training on EDI is mandatory, which is supplemented by job specific training such as safeguarding, anti-social behavior, domestic abuse and mental health.

Report of the Directors

31 March 2026

(continued)

Fairness and inclusion are reflected in decision making and when delivering day-to-day operations and customer services.

The Equality, Diversity and Inclusion Policy and Action Plan are linked to SCH's Business and Annual Delivery Plans. The Action Plan is monitored by the Executive Leadership Team and progress is reported to the Human Resources, Equalities and Remuneration Committee, which is accountable to the Board.

Our Equality. Diversity and Inclusion Staff Network provides a safe space for discussions and supports embedding of EDI in day-to-day work. Public accountability for achievements is demonstrated through annual Public Sector Equality Duty and Gender Pay Gap Reports. SCH has had no prosecutions or enforcement notices issued against it for breach of the Equality Act 2010 nor has SCH been the subject of external investigations relating to equality issues.

DISCLOSURE OF INFORMATION TO AUDITORS

The Directors and Chief Officers who were in office on the date of approval of these statements have confirmed, as far as they are aware, that there is no relevant audit information of which the auditors are unaware. Each of the Directors and Chief Officers have confirmed that they have taken all the steps that they ought to have taken as Directors or Chief Officers in order to make themselves aware of any relevant audit information and to establish that it has been communicated to the auditors.

AUDITORS

At the date of reporting Bishop Fleming Audit Limited is the external audit provider for the Company. This appointment followed an open tender process in 2024.

STRATEGIC REPORT

The Company has chosen in accordance with S414C(ii) of the Companies Act 2006 (Strategic Report and Directors' Report) Regulations 2013 to set out in the Company's Strategic Report information required by schedule 7 of the Large and Medium-sized Companies and Groups (Accounts and Reports) Regulations 2008 within the Directors' Report. It has done so in respect of how the directors have had regard to the need to foster the company's business relationships with suppliers, customers and others. The Strategic Report is contained within pages 6 to 17.

QUALIFYING THIRD PARTY INDEMNITY PROVISIONS

The Company has made qualifying third party indemnity provisions for the benefit of its directors during the year, these provisions remain in force at the reporting date.

APPROVAL

The report of the Directors was approved by the Board on the 15 September 2026 and signed on its behalf by:

Simon Wilson
Chair
15 September 2026

Statement of Directors' Responsibilities for the Financial Statements

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

Company law requires the directors to prepare financial statements for each financial year. The directors have elected under company law to prepare the financial statements in accordance with UK-adopted International Accounting Standards.

The financial statements are required by law and UK-adopted International Accounting Standards to present fairly the financial position and performance of the company. The Companies Act 2006 provides in relation to such financial statements that references in the relevant part of that Act to financial statements giving a true and fair view are references to their achieving a fair presentation.

Under company law the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the company and of the profit or loss of the company for that period.

In preparing the financial statements, the directors are required to:

a) select suitable accounting policies and then apply them consistently;

b) make judgements and accounting estimates that are reasonable and prudent;

c) state whether they have been prepared in accordance with UK-adopted International Accounting Standards;

d) prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

The directors are responsible for keeping adequate accounting records that are sufficient to show and explain the company's transactions and disclose with reasonable accuracy at any time the financial position of the company and enable them to ensure that the financial statements comply with the requirements of the Companies Act 2006. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Annual Governance Statement

31 March 2026

INTRODUCTION

The Solihull Community Housing (SCH) Board acknowledges its overall responsibility for establishing and maintaining a system of governance, risk management and internal control to review the company's effectiveness and protect and make the best use of public funds.

The Board consists of ten members and meets at least four times per year. It also has four committees, namely the Audit and Risk, Building Safety, Housing Operations and Human Resources, Equalities and Remuneration committees. The Board and Committees are responsible for the strategic governance of the company. In addition, individual Board members take on specific roles as champions for health and safety and customer engagement. The Board have agreed a change to the Committee Structure for 2026/27. The new committees are Performance and Safety, Customer Experience, Audit and Risk and Remuneration. We have also set up a Finance Working Group which will report to the Board.

The Annual Governance Statement (AGS) covers SCH's significant corporate systems, processes, and controls, including in particular those designed to ensure that:

- Laws and regulations are complied with;
- Policies are implemented in practice and required processes are adhered to;
- High quality services are delivered efficiently and effectively;
- The company's values and ethical standards are met;
- Performance and financial statements and other published information are reliable; and
- Human, financial, and other resources are managed efficiently and effectively.

The AGS is reviewed by the Audit and Risk Committee prior to its approval by the Board. Once approved, it is signed by the Chair and the Chief Executive before being published on SCH's website.

THE GOVERNANCE FRAMEWORK

SCH's governance framework comprises the policies, systems, and processes that SCH is directed and controlled by. SCH has a 5-year strategic vision and one year delivery plan which provide strategic direction and accountability. The SCH values of **H**onesty, **E**xcellence, **A**chieving together, **R**espect and **T**ransparency underpin the framework and all the activities undertaken by the organisation. The framework also ensures that there are proactive processes for identifying, evaluating, and managing significant risks faced by the company. These systems are designed to manage, rather than eliminate, the risk of failure to achieve business objectives, and to provide reasonable, and not absolute, assurance against material misstatement or loss.

In addition to having a robust governance framework in place, SCH seeks to continuously refine and monitor the effectiveness of its governance arrangements and assurance. To further this approach, 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. It annually reviews compliance with the code and action planning, with the last review being November 2025. The National Housing Federation is the trade body for Registered Social Landlords rather than ALMOs and therefore some of the requirements of the Code do not apply to SCH.

As a wholly owned subsidiary of Solihull Metropolitan Borough Council (SMBC), SCH is also guided by the governance principles set out in the CIPFA/SOLACE Framework for Delivering Good Governance in Local Government (2016). Given below are some key highlights of how SCH delivers its governance commitments in line with the principles of the Framework:

Annual Governance Statement

31 March 2026

(**continued**)

Behaving with integrity, demonstrating strong commitment to ethical values, and respecting the rule of law

- Regulatory compliance to the Financial Conduct Authority regulations.
- Regulatory compliance with the requirements of Companies House.
- Compliance with the Housing Act 1985, Housing Act 1996 and the Homelessness Reduction Act 2017.
- Regulatory compliance with all Building Safety and Compliance regulatory requirements for Building Safety, Fire Safety, Asbestos, Awaab's law, Gas Safety, Electrical Safety, Passenger lifts, and Water Safety.
- Building Safety Framework developed to set out how our commitment to provide residents with safe homes will be achieved. SCH's approach is driven by data with a focus on statutory and regulatory obligations, and providing assurance that SCH is fully compliant at a legislative level.
- Work continues to ensure SCH complies with social housing regulation and in particular the consumer standards and can respond to any changes and detailed guidance in regulatory requirements for the social housing sector. External reviews have been commissioned to provide additional assurance and to identify areas for improvement.
- SCH have a robust set of policies either in place or in progress, relating to the services they deliver, which are tracked through the Policy Tracker, and progress reviewed through the Improvement and Inspection Steering Group in preparation for regulatory inspection.
- Our new Performance management framework was introduced in 2025/26 and reflects the new social housing regulation regime The new framework aims to simplify and strengthen the approach identifying our key stakeholders and how they interplay with our framework.
- The Complaint Handling Code became statutory on 1 April 2024 and requires landlords to conduct a yearly self-assessment against the Code. SCH has produced a Service Improvement Plan to address the one remaining area of partial compliance.
- Anti-fraud and corruption policies provide clear guidance and procedures for reporting conflicts of interest and the receipt of gifts and hospitality, including a mandatory annual declaration of interests by all staff and SCH Board Members. At the start of every year SCH Board and Committee meeting members are asked to declare any interests arising from items on the agenda.
- A code of conduct for employees, including a Disciplinary Policy and a Resolution Policy to enable individual cases to be resolved fairly, consistently and in a timely manner.
- A code of conduct for contractors to protect the interests of SCH tenants and leaseholders for whom SCH provides services, and protect contractors who deliver those services on behalf of SCH. The code includes guidance on not only conduct, safeguarding and confidentiality, but also provides clear direction on diversity and inclusion.
- Standing Orders incorporating Rules for Contract and Financial Regulations reviewed annually and made available for all staff on the intranet.
- SCH has compliant procurement processes for securing new suppliers and services. The Rules for contract and other key documentation have been updated primarily to reflect the changes under the Procurement Act 2023.
- SCH provides a housing options and homelessness service on behalf of the Council. SCH Domestic Abuse Safe Accommodation meets the requirements of the Domestic Abuse Act 2021. SCH also have a Customer Domestic Abuse Policy and have ambitions to be accredited with DAHA (Domestic Abuse Housing Alliance).
- SCH hold membership with the Domestic Abuse Partnership Board and Domestic Homicide Review Executive Group and attend MARAC and MAPPA meetings.
- SCH are active members of Solihull's Safeguarding Partnerships and Committees, including Adults, Childrens, Exploitation, and Neglect and represent SCH on relevant Child Protection Case Conferences.

Ensuring openness and comprehensive stakeholder engagement

Engagement with SCH customers and staff**:**

- Three of the ten places on the SCH board are reserved for tenants/ leaseholders.
- Multiple channels of communication have been developed, including regular business bulletins sent out via email with key updates and information for staff and residents.

- The customer engagement framework includes a wide range of mechanisms and activities to engage residents in the work of SCH including the Virtual Improvement Panel, SCHape panel and building safety advocates. The outcomes of this engagement shape the Delivery Plan.
- Introduction of a new Voice of the Customer Framework across the organisation. A resident voice section is included in all Executive Leadership Team (ELT), committee and board reports.
- Development and implementation of a building and resident safety forum
- Stronger onboarding for residents to ensure all residents understand roles and responsibilities, standards, and accountability.
- Customer data is captured under the umbrella of the Everyone Matters approach. SCH collect and update data relating to protected characteristics, other household details, and additional needs/ vulnerabilities. This enables us to provide tailored and accessible services and enables us to evidence that we are fair and equitable in our service delivery.
- The SCHape panel have considered the repairs service and complaints management. Recommendations presented to Board.
- Regular employee surveys to assess the culture of SCH with the aim of targeted actions to improve satisfaction and creating a positive workplace culture.
- HR, Equalities and Remuneration committee receives reports at each meeting on staff wellbeing and absence trends.

Wider Community

- Working with partners such as the Council and the Police, for example through the multi-agency Safer Solihull Partnership Tasking and Coordination Group, and 'business as usual' Meetings with West Midlands Police.
- Presence in the Family Hubs- providing housing services triage, referral and signposting services to residents in the borough.

SCH as part of its ongoing engagement with SMBC maintains accountability in the following ways:

- Quarterly Monitoring Board comprising of elected members, SMBC and SCH officers monitor performance, delivery plan, and risk management.
- Regular Joint Executive meetings between SMBC and SCH to review performance and discuss strategic issues at officer level.
- A delivery plan agreed and approved by the Council goes through SMBC scrutiny process and then SMBC cabinet decision-making.
- Rolling 5-year management agreement agreed by the Council.
- Participation in the Strategic Housing Board with SMBC colleagues.
- A 10-year joint Asset Management Strategy (AMS) between SCH and SMBC.

Defining outcomes in terms of sustainable economic, social, and environmental benefits

- The SCH delivery plan has been developed against a backdrop of capturing the context of the changing housing sector, current economic pressures, and the voice of the customer. The plan sets out how the landlord service is delivered to customers as well as wider objectives of the organisation to support. The plan is easy to understand and clarifies priorities, outcomes and how success will be measured.
- The SCH customer experience strategy has a customer first vision and clarifies that systems and processes follow from that. It is based on 7 themes, each with a set of key principles and deliverables to enable the desired outcomes.
- A joint workshop across SCH and SMBC with board member participation was conducted to focus on longer term asset management planning and the implementation of the strategy.
- SCH has a strategy in place to deliver net zero emissions in new build properties, to adopt:
    - a fabric-first approaches combined with renewable technologies.
    - super-insulated build systems with better energy performance and air tightness
    - in addition, SCH has an interim target for existing properties to get all homes to EPC band C by 2030
- There are plans to regenerate Kingshurst Village Centre to a high standard to offer a range of local services and play a strong role in building further social capital and local pride. Phase 1 properties are now occupied. These properties focus on thermal efficiency in the build and are equipped with a range of low carbon and renewable technologies to help generate heat and power. Works on phase 2 are progressing throughout 2026/27 and beyond working in partnership with the council.

Determining the interventions necessary to optimise the achievement of the intended outcomes

Interventions aimed at better customer experience and outcomes:

- Improving Customer Experience Group – reviewing customer satisfaction trends and developing action plans with service areas to improve the services SCH deliver.
- Social media trends are used to inform customer experience and interaction, and in addition, customer registration at SCH portal gives customers access to options for self-service.
- SCH is in transition to an IT system which will provide greater digital capability and ease of access for customers to SCH delivered services.
- A new complaints team has been established to centralise the management of complaints across the business to ensure customers are informed, updated and that the complaints are compliant. This will also allow more work to take place to investigate the root cause of a complaint and ensure learning is captured and acted upon.
- Embed Customer Experience into the onboarding, probation, and PDR processes for SCH staff.
- Every Contact Counts was launched to encourage staff to be more professionally curious, and support the reporting of behaviours and issues that could lead to harm or potential harm, such as exploitation, domestic abuse, damp and mould etc. Trialled and due for organisational rollout in 2026/27.
- Data held to ensure the services SCH provide are tailored to the needs of the resident, leading to more fair and equitable access for all residents. Needs on the day approach implemented to understand any transient or unknown long-term needs at the moment of service delivery.
- 'Everyone Matters' campaign to collect core household information from residents to improve the level of data held on residents.
- Operations services have been reviewed and revised service delivery models has been proposed which moves towards a more person-centred approach, anticipated go live in April 2026.
- Money advice service to maximise residents' income and identify unclaimed benefits, also working in collaboration with SMBC's Financial Inclusion Group.
- Fully utilising the range of tools in the ASB Crime and Policing Act 2014, reported through operational dashboards.
- Eviction prevention panel established to sustain tenancies, maximise support offered to those falling into arrears, and minimise the number of evictions.
- Annual temporary accommodation reduction plan to minimise budget hotel usage.

Interventions aimed at improving staff and stakeholder outcomes**:**

To enable SCH to achieve its goals and objectives of the Delivery Plan, leaders and managers need to be clear about what is expected of them. This has been formalised through

- Clear governance structure and escalation routes defined including ELT meeting calendar, establishment of Senior Leadership Team (SLT) and Wider Leadership Team (WLT) with defined roles, responsibilities, and accountability.
- The Leadership Pledge for Wider Leadership team
- Manager's Framework (Foundation Framework) developed with a working group of volunteer managers from across SCH.
- Clear, consistent Service Standards and protocols for individual communications from staff
  Staff Engagement group focusses on staff wellbeing, with a wellbeing calendar focusing on a series of events to help staff.

Developing the entity's capacity, including the capability of its leadership and the individuals within it

- Developed our Data, Knowledge and Information Management Strategy – a 5-year roadmap aimed at leveraging the potential of data to benefit our residents, streamline our operations, and foster stronger communities whilst meeting our regulatory and legislative responsibilities.
- People strategy in place to govern and shape our culture.
- A whole Organisational Learning and Development Plan has been developed to meet business-critical needs. Learning needs identified through the Performance development review (PDR) process is shared with the Organisation Development and Training manager to support ongoing organisational learning and development planning.
- Oracle Learning in Solihull Community Housing supports all employees to complete mandatory eLearning modules.
- Board and ELT Away days provide a helpful opportunity to discuss a number of key strategic issues affecting SCH and reflect on next steps for the organisation.
- WLT away days are used as opportunities to build leadership capability and strategic thinking.

- There is a commitment to run a Management Conference every 6 months to support and develop our leaders and managers within SCH.
- Centralised access to training and resources on Domestic Abuse, Exploitation, Prevent, Mental Health, Safeguarding Children and Safeguarding Adults, including sessions such as professional curiosity and trauma-informed practice.
- Active participation in, and learning, from multi agency safeguarding audits, Safeguarding Adult Reviews (SAR) and domestic homicide reviews (DHR). Learning is disseminated across the business through the intranet, Core Brief, and email.
- SCH are represented on the various safeguarding boards and forums across Children, Adults, Domestic Abuse and Exploitation.
- Strategic safeguarding is monitored through SCH's Safeguarding, Exploitation and Domestic Abuse Group (SEDA).
- Access to coaching and mentoring scheme for all employees.
- Promoting apprenticeship schemes across business areas to develop talent internally
- The Board has oversight of the skills mix of its membership and reviews this regularly, tailoring recruitment accordingly. The Board members have an annual appraisal.
- A programme of Board training takes place each year.

Implementing good practices in transparency, reporting, and audit to deliver effective accountability

- Board reports and statutory accounts are available for the public to view on the SCH website.
- Finance publishes expenditure over £250.
- Public sector equality duty statement published on the website.
- Published the gender pay gap report (annually).
- Published set of service standards on the SCH website.
- Compliance with the Freedom of Information framework.
- Performance and Voice of the Customer information is published on the website.
- Compliance with the Housing Ombudsman Code of Guidance published on the website.
- Information presented in accessible formats.
- Introduction of the Business Intelligence team has enabled SCH to strengthen its capability for driving improvement and ensuring that decision-making is evidence-led. A review of the KPIs has already been undertaken to ensure only relevant data is collected for improving services. This process reduced by half the number of indicators now monitored.
- Working group to look at the Housing Ombudsman's final determinations to improve services as a result of those findings.
- The SCH Building Safety Committee, Joint Executive and Quarterly Monitoring Board receive regular performance reports associated with building safety and legislative compliance requirements across all of SCH managed building (fire, gas, asbestos, Legionella, lifts and more recently damp, mould, and condensation).
- A new Chair of SCH Board has been appointed to replace the current Chair who has served his 6-year term.

Managing risks and performance through robust internal control and strong public financial management

- As a part of SCH's risk management approach the Audit and Risk Committee monitors the effective development and operation of risk management and considers compliance with the Risk Management Policy and Procedure. The Board receives an update on risk management each quarter.
- A formal programme of internal audit work, carried out by officers independent of the ELT reports review processes and internal control. The recommendations are agreed by the ELT and are considered in detail by the Audit & Risk Committee.
- Financial monitoring goes to the SCH Board on a quarterly basis so that all members take responsibility for financial oversight.
- Quarterly financial monitoring reports to the Board to highlight any anticipated unplanned significant expenditure.
- The SCH Medium Term Financial Strategy is produced to reflect the SCH Delivery Plan requirements and ensures these are affordable.
- Standing orders are reviewed annually.
- Regular regulatory compliance reporting to housing operations committee with assurance in a changing regulatory environment. Cross functional working groups set up with SMBC representation to prepare for regulatory changes and recruitment of resources to be regulations ready.

Annual Governance Statement

31 March 2026

(**continued**)

REVIEW OF EFFECTIVENESS

SCH undertakes an annual review of the effectiveness of its governance framework, including the system of internal control. The outcomes of the review are considered by the Chief Executive with support from the relevant officers, as well as the Audit and Risk Committee and the Chair. Once approved, the AGS is published alongside the Statement of Accounts.

ASSURANCE FROM MANAGEMENT

All Executive Directors have provided assurance that they are satisfied that staff within their sphere of control are compliant with the governance framework including Standing Orders, Rules for Contract, Financial Regulations, Health and Safety and Risk Management.

Each senior manager has also completed an individual self-assessment of their own area of control, highlighting any areas of concern or requiring further action to strengthen the control measures to safeguard company assets. Following this process, a detailed action plan has been developed, to further strengthen areas where Executive Directors highlighted any gaps in the control measures.

OTHER INTERNAL ASSURANCE

Internal Audit

Internal Audit provide SCH with an independent appraisal of risk, governance, and internal controls; the audit approach is based upon recognised auditing standards and the areas reviewed are included within an annual audit plan. The audit plan normally includes annual audits of core financial systems and other areas which are included within an audit plan based upon assessments carried out by Internal Audit, discussions with SCH senior management and the SCH Audit & Risk Committee.

In 2025/26, there were 9 audit reviews undertaken. All moderate, limited or no assurance audit recommendations are shared with ELT and the Audit and Risk Committee. Where original recommendation implementation dates change to later dates, there is a process is in place where Internal Audit are notified and review the reasons for the later date. Significant changes to dates or where recommendations have become overdue are escalated to senior management and reported to the Audit and Risk Committee.

Internal Audit's Investigation Team works with SCH to tackle social housing fraud. There have been 369 referrals to the Fraud Team (including right to buy applications) from SCH in the financial year to date, resulting in a total nominal value of properties recovered / applications rejected of £1,506,766. Our audit work for 2025/26 shows that internal controls, if not overridden, are in place to reduce / mitigate against the risk of fraud and error.

Internal Audit has a responsibility for maintaining the Council's and SCH's whistleblowing infrastructure and ensuring that issues raised through the Whistleblowing Policy are effectively dealt with. Internal Audit received 5 SCH-related whistleblowing matter in 2025/26.

Internal Audit report outcomes of it work to SCH Audit and Risk Committee and SMBC Audit Committee throughout the year.

Risk Management

Risk management advice and support is provided by SMBC. The Audit & Risk Committee monitors the effective development and operation of risk management with the Chair of the Committee taking responsibility for reporting issues of concern to the SCH Board.

During 2025/26, SCH has continued to promote the risk register hierarchy in place as well as escalation and oversight arrangements for operational risks. There has been a strong focus on making risk management and risk recording a part of business-as-usual activity and promoting a risk aware culture across the organisation. There has been a review of the corporate risk register and the development of joint registers with SMBC where there are shared responsibilities for managing risk: for example, in relation to building safety and social housing regulation. The ELT reviews both the corporate and joint risk registers on a quarterly basis, which is underpinned by operational monitoring of service and project risks

Annual Governance Statement

31 March 2026

(**continued**)

Performance Management

There are robust strategic and business planning processes which have included contributions from staff at all levels. An agreed suite of performance indicators (both local and national) is in place at team and corporate level, and these are monitored through regular reporting to management and the SCH Board, as well as by the council on a quarterly basis. Further reporting also takes place against the delivery plan, in respect of objectives, targets and outcomes. The Business Intelligence function has been strengthened as part of the restructure. A revised performance management framework took effect from 2025/26.

Data integrity has been identified as a key corporate focus area, and detailed interventions and actions plans have been put in place to improve the quality of data captured as well as linking multiple data systems to enable easy integration of data to inform better decision-making. This is set out in the Knowledge Information and Data Management Strategy. Third party assurance is currently being obtained from Housemark in regard to TSM methodology and accuracy.

Information Governance

SCH's approach to information governance is underpinned by policy, guidance, and training. This includes a full suite of policies based upon the information security standard BS ISO/IEC 27002:2013 and mandatory General Data Protection Regulation (GDPR) and Protecting Information training courses which all employees must complete (refresher every 2 years). There are clear management and accountability structures in place, which are outlined in the Information Governance Framework.

The SCH Governance Team works closely with the SMBC Information Governance Team to ensure full compliance with Freedom of Information and data protection requirements. Oversight of the internal governance arrangements is provided by both the ELT and Board, any failure to comply with statutory compliance with Companies House or Financial Conduct Authority would result in notifications from the relevant authorities. All data breaches were reported, investigated, and signed off by the relevant Executive Director. Learning points were identified from breaches, including staff being reminded of the need to be vigilant to avoid data breaches caused due to human error.

Financial Management

SCH's Standing Orders, Rules for Contracts and Financial Regulations are agreed annually by the Board (last updated on 2 June 2025). This document incorporates legal requirements and reflects CIPFA guidance. SCH continues to report its budget and savings proposals as part of the SMBC Budget process to ensure Council oversight and challenge of potential changes.

There is a robust financial monitoring process to identify non-compliance. Where this occurs, such as a forecast overspend, there are clear rules for escalation in place. Forecast overspend is reported to the SCH Board through a quarterly financial monitoring report and where possible a solution is recommended and agreed.

There was a significant forecast year-end overspend identified in the first quarter of 2025/26 mainly relating to Building Safety. This has been reported to the Board and the ELT throughout the year. The 2025/26 budget is supported by contributions from reserves and as at Period 11 this area is still overspent, however, there are compensating underspends elsewhere meaning that SCH can reduce its forecast use of reserves by almost £740,000.

Equalities Framework

SCH is committed to the principles of fairness, equality of opportunity, diversity and inclusion. We positively embrace and celebrate diversity and promote an inclusive culture in our role as an employer and a provider of homes and services. Our HEART values are Honesty, Excellence, Achieving together, Respect and Transparency. We are committed to becoming a diverse and inclusive organisation and placing our customers, staff and other stakeholders at the HEART of what we do.

Annual Governance Statement

31 March 2026

(**continued**)

Equalities Framework

Everyone we deal with, be it board members, staff, tenants, leaseholders, contractors, suppliers and others, know that we do not tolerate discrimination, harassment or victimisation and will act where our Equality, Diversity and Inclusion (EDI) policy is breached.

Our polices and operational practices are designed to protect people from discrimination on the grounds of protected characteristics covered in equality legislation. Board and staff members are recruited on merit. Reasonable adjustments are made for people with disabilities in line with accreditation under the Disability Confident Scheme.

The Equality, Diversity and Inclusion Policy and Action Plan support us to meet legal and obligations under the Equality Act 2010 and other relevant regulations such as the Housing Consumer Standards. Training on EDI is mandatory, which is supplemented by job specific training such as safeguarding, anti-social behaviour, domestic abuse and mental health.

Fairness and inclusion are reflected in decision making and when delivering day-to-day operations and customer services.

The Equality, Diversity and Inclusion Policy and Action Plan are linked to SCH's Business and Annual Delivery Plans. The Action Plan is monitored by the Executive Leadership Team and progress is reported to the Human Resources, Equalities and Remuneration Committee, which is accountable to the Board.

Our Equality. Diversity and Inclusion Staff Network provide a safe space for discussions and supports embedding of EDI in day-to-day work. Public accountability for achievements is demonstrated through annual Public Sector Equality Duty and Gender Pay Gap Reports. SCH has had no prosecutions or enforcement notices issued against it for breach of the Equality Act 2010 not has SCH been the subject of external investigations relating to equality issues.

Health and Safety

Occupational Health and Safety (Workforce/Places)

Health and safety performance reports are presented on a regular basis to the ELT and the SCH Board. The reports provide an overview of key performance, including the number of reported accidents/incidents, commentary on key aspects of health and safety including legislative updates. As such, the reports confirmed that:

- Health and safety arrangements are in place within SCH, but with some areas of improvement required. A health and safety action plan is in place in line with SCH's health and safety management system as part of continual improvement.
- There have been no regulatory interventions or enforcement action taken against SCH in the last year.

Services and teams have access to SCH health and safety policies and guidance which have been produced to assist managers and employees to comply with health and safety legislation and statutory requirements. A programme of audits and inspections were in place in 2025/26.

Over the last year, SCH has maintained its health and safety governance arrangements that were put in place the previous years. The Safety Leadership Group, chaired by the Chief Executive, meets quarterly, and receives reports from the various health and safety working groups, each chaired by an Executive Director.

Regulatory Readiness

All managers have confirmed in the AGS process that staff were briefed on and made aware of any requirements that needed to be complied with in their day-to-day activities to be compliant with the Regulator of Social Housing's Consumer Standards.

During the year we worked closely with SMBC to develop a specification to source external expertise to support us in our preparation for inspection by the Regulator of Social Housing. SMBC commissioned Campbell Tickell to provide this support. Campbell Tickell noted that there has clearly been significant and senior attention paid to the regulatory requirements of the RSH and we found a level of self-awareness across the Council and ALMO in terms of some of the current challenges. In addition to a range of oversight and assurance activities relating directly to the standards (for example specific building safety oversight across the joint executive

Annual Governance Statement

31 March 2026

(**continued**)

teams of Council and ALMO and the approval of a new strategic performance framework), external advice has been sought in relation to good governance, and overall compliance with the standards.

An action plan is in place identifying areas for improvement with progress monitored via SCH/ SMBC and joint governance structures.

Assurance from Customers (Complaints and Compliments) and Ombudsman Complaints

A Self-assessment against the Housing Ombudsman Code of Guidance for complaint handling was completed and submitted to Board for approval in June 2025. This has been published on the SCH website and submitted to Housing Ombudsman Service (HOS).

Our centralised complaints pilot was successful in improving the speed and quality of complaints administration and has now been implemented in full.

Systems are in place for monthly monitoring of complaint handling compliance and follow up. Any issues of concern, including Ombudsman determinations are reported to the Executive Leadership Team, and to SMBC.

SCH received 782 formal complaints during 2025/26. The majority of these complaints were resolved at stage 1 (610) with 28% progressing to stage 2 (172). The Housing Ombudsman and Local Government Social Care Ombudsman concluded 11 cases throughout the year, 6 were declined to be investigated the remaining 5 resulted in 4 findings of no-maladministration, 3 findings of service failure, 1 finding of maladministration and 3 cases of fault found.

ASSURANCE FROM EXTERNAL INSPECTIONS

External Audit

The audit completion report issued by Bishop Fleming Audit Limited was presented to Audit and Risk Committee on 6 July 2026 and the SCH Board on 15 September 2026. Progress on the previously identified control points was updated during the course of the audit. Of the matters noted none are considered to be significant deficiencies in the system of internal control.

Areas of Improvement

Following completion of the annual review of SCH's internal control framework, officers have developed action plans to address areas self-assessed as needing improvement. In addition, ELT will monitor the actions listed below to improve its governance arrangements and provide the assurance SCH expects to have in place.

Area of improvement	Action Taken	Status
Effective contract management	Continue to build on the improvements made to processes, training and communication, data and risk management following as a result of the recommendations made by Internal Audit to address inherent risks and weaknesses in control.	Action in progress
Evidencing Equality, diversity and Inclusion focus	This is part of the corporate review process, with ELT oversight, to ensures that all service areas are reviewed through an EDI lens and that decision-making reflects SCH's commitment to fair treatment.	Action in progress
Effective Governance arrangements between SCH and SMBC	Implement the recommendations made by the task and finish group in response to the Trowers and Hamlins Governance review subject to approval by the SCH Board and SMBC Cabinet.	Complete
Compliant procurement processes	Action taken to ensure compliance with procurement processes including increased visibility and oversight at ELT. Regular meetings are in place between the Executive Director of Customer Experience and Corporate Support and Procurement.	Complete
Effective business continuity arrangements	ELT reviews the Business Continuity Plan annually. Proposed updates have been considered, and work is currently underway to refresh the associated Critical Incident Plans by SLT.	Action in progress

Annual Governance Statement

31 March 2026

(**continued**)

Areas of Improvement

Area of improvement	Action	Owner / Target date
Effective contract management	Continue to build on the strong foundational work and clear commitment to improving governance and controls identified by internal audit and embed.	Paul Edwards 30/9/26
Effective business continuity arrangements	Training session for Wider Leadership Team in June followed by a test exercise in the autumn.	Paul Edwards 31/12/26

CONCLUSION AND EVALUATION

As Chair and Chief Executive, we have been advised on the results of the review of the effectiveness of SCH's governance framework. Our overall assessment is that this Annual Governance Statement is a balanced reflection of the governance environment, and the arrangements continue to be regarded as fit for purpose in accordance with the governance framework.

We commit to implementing any outstanding actions identified as part of this annual review of governance.

Simon Wilson — Chair

Lee Sugden — Chief Executive

15 September 2026

Independent Auditor's Report to the Members of Solihull Community Housing Limited

Opinion

We have audited the financial statements of Solihull Community Housing Limited (the 'company') for the year ended 31 March 2026 which comprise Statement of Comprehensive Income, Statement of Changes in Equity, Balance Sheet, Statement of Cash Flows and notes to the financial statements along with significant accounting policies and areas of judgement and risk management. The financial reporting framework that has been applied in their preparation is applicable law and UK-adopted international accounting standards.

In our opinion the financial statements:

- give a true and fair view of the state of the company's affairs as at 31 March 2026, and of its profit for the year then ended;
- have been properly prepared in accordance with UK-adopted international accounting standards; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

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

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

We have nothing to report in this regard.

Independent Auditor's Report to the Members of Solihull Community Housing Limited (continued)

Opinions on other matters prescribed by the Companies Act 2006

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

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

Matters on which we are required to report by exception

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

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

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

Responsibilities of directors

As explained more fully in the directors' responsibilities statement set out on page 20, the directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the directors determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditor responsibilities for the audit of the financial statements

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

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

- We have considered the nature of the sector, control environment and financial performance;
- We have considered the results of enquiries with management in relation to their own identification and assessment of the risk of irregularities within the entity;
- We have reviewed the group's documentation of their policies and procedures relating to:
  - Identifying, evaluation and complying with laws and regulations and whether they are aware of any instances of non-compliance;
  - Detecting and responding to the risks of fraud and whether they have knowledge of any actual, suspected or alleged fraud;
  - The internal controls established to mitigate risks of fraud or non-compliance with laws and regulations;
- We have considered the matters discussed among the audit engagement team regarding how and where fraud might occur in the financial statements and any potential indicators of fraud.

Independent Auditor's Report to the Members of Solihull Community Housing Limited (continued)

As a result of these procedures, we have considered the opportunities and incentives that may exist within the organisation for fraud and identified the higher area of risk to be in relation to revenue recognition and accounting estimates. In common with all audits under ISAs (UK) we are also required to perform specific procedures to respond to the risk of management override.

We have also obtained an understanding of the legal and regulatory frameworks that the company operates in, focusing on provisions of those laws and regulations that had a direct effect on the determination of material amounts and disclosures in the financial statements. The key laws and regulations we considered in this context included the UK Companies Act, UK-adopted international accounting standards, and UK tax legislation. In addition, we considered the provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which may be fundamental to the company's ability to operate or avoid a material penalty, including landlord health and safety laws and regulations covering fire risks, gas safety, water hygiene, electrical safety and asbestos.

Our procedures to respond to risks identified included the following:

- Reviewing the financial statement disclosures and testing to supporting documentation to assess compliance with provisions of relevant laws and regulations described as having a direct effect on the financial statements;
- Performing analytical procedures to identify unusual or unexpected relationships that may indicate risks of material misstatement due to fraud;
- Reviewing Board minutes;
- Enquiring of management in relation to actual and potential claims or litigations or areas of non-compliance with laws and regulations;
- Performed detailed testing in relation to the recognition of revenue, with a particular focus around year-end cut off;
- In addressing the risk of fraud through management override of controls, testing the appropriateness of journal entries and other adjustments; assessing whether the judgements made in accounting estimates are indicative of potential bias; and evaluating the business rationale of significant transactions that are unusual or outside the normal course of business.

We communicated identified laws and regulations and potential fraud risks to all members of the engagement team and remained alert to possible indicators of fraud or non-compliance with laws and regulations throughout the audit.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. The risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities is available on the Financial Reporting Council's website at:https://www.frc.org.uk/auditors/audit-assurance/auditor-s-responsibilities-for-the-audit-of-the-fi/description-of-the-auditor%E2%80%99s-responsibilities-for. This description forms part of our auditor's report.

Use of our report

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

Nathan Coughlin FCA (Senior Statutory Auditor)

For and on behalf of
Bishop Fleming Audit Limited
Chartered Accountants
Statutory Auditors
Salt Quay House
4 North East Quay, Sutton Harbour
Plymouth
PL4 0BN

Date:

Statement of Comprehensive Income

For the year ended 31 March 2026

	Note	2026 £'000	2025 £'000
REVENUE	1	54,989	56,978
Operating expenses	3	(54,501)	(56,360)
PROFIT FROM OPERATIONS		488	618
Finance income	4/16	1,651	938
PROFIT BEFORE TAXATION		2,139	1,556
Income Tax expense	6	-	(6)
PROFIT FOR THE YEAR	14	2,139	1,550
OTHER COMPREHENSIVE INCOME/ (EXPENDITURE), NET OF TAX			
Actuarial gain / (loss) on defined benefit obligations	17	957	(1,027)
Gain on property revaluation	8	383	-
TOTAL COMPREHENSIVE INCOME FOR THE YEAR		3,479	523

The profit from operations for the year arises from the Company's continuing operations (note 3)

The profit for the year is entirely attributable to its sole member (note 13)

Statement of Changes in Equity

For the year ended 31 March 2026

	Note	Total Equity & Reserves £'000
BALANCE AT 1 April 2024		**3,069**
Profit for the financial year to 31 March 2025		1,550
Actuarial loss relating to the pension scheme	17	(1,027)
		523
BALANCE AT 31 March 2025		**3,592**
Profit for the financial year to 31 March 2026		2,139
Revaluation gain		383
Actuarial loss relating to the pension scheme	17	957
TOTAL COMPREHENSIVE INCOME FOR THE YEAR		3,479
BALANCE AS AT 31 March 2026		**7,071**

Balance Sheet

For the year ended 31 March 2026

	Note	2026 £'000	2025 Restated* £'000
ASSETS			
NON-CURRENT ASSETS			
Property, plant and equipment	8	2,443	2,108
Right of use assets	16	16	9
CURRENT ASSETS			
Inventories	9	112	117
Trade and other receivables	10	5,921	5,566
Cash and cash equivalents	15	7,177	7,022
TOTAL ASSETS		15,669	14,822
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	11	(8,292)	(7,355)
Current tax liabilities	6	-	(6)
Lease liabilities	16	(4)	(4)
Borrowings	7/12	(44)	(42)
		(8,340)	(7,407)
NON-CURRENT LIABILITIES			
Borrowings	7/12	(246)	(290)
Lease liabilities	16	(12)	(5)
Retirement benefit net obligations	17	-	(3,528)
TOTAL LIABILITIES		(8,598)	(11,230)
NET ASSETS		7,071	3,592
EQUITY – Attributable to parent			
Retained earnings		6,573	3,275*
Revaluation Reserve		498	317*
TOTAL EQUITY – ATTRIBUTABLE TO MEMBER	14	7,071	3,592

* The restated opening balances relate to the property valuations completed in 2021; whereby the split between Retained Earnings and Revaluation Reserve was not recognised at that time.

The financial statements on pages 34 to 59 were approved by the Board and authorised for issue on 15 September 2026 and are signed on their behalf by:

Mr Simon Wilson
Chair

Mr Mark Thrasher
Chair of Audit and Risk Committee

Statement of Cash Flows

For the year ended 31 March 2026

	Note	2026 £'000	2025 £'000
OPERATING ACTIVITIES			
Cash inflow/ (outflow) from operations	15	219	(5,373)
Interest paid	4	(13)	(16)
NET CASH (USED IN) GENERATED BY OPERATING ACTIVITIES		206	(5,389)
INVESTING ACTIVITIES			
Purchase of property, plant and equipment	8	-	17
NET CASH USED IN INVESTING ACTIVITIES			
FINANCING ACTIVITIES			
Repayment of borrowings	12	(42)	(40)
Repayment of lease liabilities	16	(9)	(116)
NET CASH USED IN FINANCING ACTIVITIES		(51)	(156)
NET (DECREASE)/ INCREASE IN CASH AND CASH EQUIVALENTS		155	(5,528)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR		7,022	12,550
CASH AND CASH EQUIVALENTS AT END OF YEAR	15	7,177	7,022

Significant Accounting Policies

31 March 2026

LEGAL STATUS

The Company is limited by guarantee and registered under the Companies Act 2006.

BASIS OF ACCOUNTING

The financial statements have been prepared on the historical cost basis other than the revaluation of freehold properties. The principal accounting policies are set out below. The financial statements have been prepared in accordance with International Financial Reporting Standards and International Financial Reporting Interpretations Committee (IFRIC) interpretations as endorsed by the European Union ("IFRS") and the requirements of the Companies Act 2006 applicable to companies reporting under IFRS.

GOING CONCERN

The accounts have been prepared on a going concern basis. The Strategic Report sets details of the delivery plan and the five-year Strategic Vision which is the basis on which the directors have been able to make this assumption. This includes consideration of the trading activities of the Company along with the five-year rolling Management Agreement signed on 24 April 2015. The Council, at the Full Cabinet meeting on 12 February 2026, approved the roll-over of this agreement for the period 2026/27 to 2030/31. The Company also has sufficient cash reserves available should it be required to draw upon them.

The Council has provided the Company with a letter of support that confirms the Council has no plans to request repayment of the outstanding creditor balance in the period to the end of September 2027. This added to the ongoing unaffected level of revenue management fee for 2026/27 reinforces the accounts being prepared on a going concern basis.

REVENUE

Revenue consists of the invoiced value (excluding VAT) for goods and services supplied. The revenue taken to the Income Statement reflects the Company's right to consideration in exchange for performance.

Revenue is recognised when revenue and associated costs can be measured reliably, and future economic benefits are probable. Revenue is measured at the fair value of the consideration received or receivable for goods and services provided in the normal course of business, net of discounts, VAT and other sales related taxes.

Revenue from services is recognised on a time-apportioned basis by reference to the provision of services set out in the Management Agreement, applicable Service Level Agreement or contract for services.

Sales of goods or property are recognised when goods are delivered and title has passed. Delivery occurs when the risks and rewards of ownership have been transferred to the customer.

PROPERTY

Housing properties were initially recorded at cost less any identified impairment loss until the date of the first revaluation which took place on 31 March 2016. All Housing properties are now included within the accounts at Existing Use Value (Social Housing).

Completed properties are then subject to a full re-valuation every 5 years by an independent valuer who is a member of the Royal Institution of Chartered Surveyors - the market values for the properties being then adjusted to Existing Use Value - Social Housing (EUV-SH).

This method applies a reduction to the market value of the property in order to reflect the service potential of the asset in its delivery of social housing objectives. The percentage reduction applicable to the assets is that defined by the Ministry for Housing, Communities and Local Government. Where a change in the percentage applied to arrive at the EUV-SH value is considered to result in a material change in the value of the Company's assets, this change will be applied immediately as a desktop exercise, even where a full revaluation is not yet due.

The change in the EUV-SH percentage itself is assumed not to materially change the underlying value of the property.

Significant Accounting Policies

31 March 2026

(continued)

Any amounts arising as a result of revaluation, exceeding the historical cost, are credited to the revaluation reserve.

DEPRECIATION

Depreciation is calculated so as to write off the cost or revalued amount of an asset, less its estimated residual value, over the useful economic life of that asset. Depreciation is calculated using the straight-line method at rates set out below. A full year's depreciation is charged in the year of acquisition and no depreciation in the year of disposal.

Freehold Land and Assets in the Course of Construction are not depreciated.

In accordance with International Accounting Standard 16 (IAS16), SCH's housing properties are split into their underlying components as defined by the BCIS "Component Life Survey" and each component is depreciated separately. SCH uses the following components with useful lives as shown:

- Substructure (over 50 years)
- Superstructure (over 50 years)
- Internal Finishes (over 40 years)
- Fittings (over 15 years)
- Services (over 25 years)
- External works (over 35 years)

HOUSING PROPERTIES

Depreciation is calculated on each component of the asset so as to write off the cost, less its estimated residual value, over the lower of 50 years or the useful economic life of each component. The useful economic life is determined separately for each development.

Revaluation gains and losses are applied across land and structure as appropriate.

IMPAIRMENT OF PROPERTY

At each reporting date, the Company reviews the carrying amounts of its property assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any). Recoverable amount is the higher of fair value less costs to sell and value in use. In assessing value in use, the estimated future cash flows are discounted to their present value using a pre-tax discount rate that reflects current market assessments of the time value of money and the risks specific to the asset for which the estimates of future cash flows have not been adjusted.

If the recoverable amount of an asset is estimated to be less than its carrying amount, the carrying amount of the asset is reduced to its recoverable amount. An impairment loss is recognised as an expense immediately, unless the relevant asset is carried at a re-valued amount, in which case the impairment loss is treated as a revaluation decrease.

Where an impairment loss subsequently reverses, the carrying amount of the asset is increased to the revised estimate of its recoverable amount, but so that the increased carrying amount does not exceed the carrying amount that would have been determined had no impairment loss been recognised for the asset in prior years. A reversal of an impairment loss is recognised in profit or loss immediately, unless the relevant asset is carried above historical cost, in which case the reversal of the impairment loss is treated as a revaluation increase.

SHARED OWNERSHIP PROPERTIES

Properties acquired or constructed for re-sale are recorded as a current asset (within Inventories) at the lower of cost and net realisable value. Cost comprises materials, direct labour and direct development overheads. Net realisable value is based on estimated sales price after allowing for all further costs of completion and disposal.

Significant Accounting Policies

31 March 2026

(continued)

SHARED OWNERSHIP PROPERTIES (continued)

Where a property is acquired for re-sale on shared ownership terms, the proportion of the asset related to the first “tranche” for sale is recorded as a current asset (as set out above) until it is sold, the balance is held as a non-current asset within Housing Properties and depreciated accordingly. The non-current asset element is revalued in line with the accounting policy (for Property) set out above. Revenue from the initial first “tranche” sales of shared ownership properties is recognised as revenue. Sales of subsequent tranches are recognised as the disposal of a non-current asset, with the profit or loss on disposal being credited to the Statement of Comprehensive Income.

GOVERNMENT GRANTS

Grants in respect of revenue activities are credited to the Statement of Comprehensive Income in the same period as the expenditure to which they relate, once reasonable assurance has been gained that the Company will comply with the conditions attaching to them and that the funds will be received.

The Company adopts the revaluation model for its housing properties and any related income from government grants is, therefore recognised by crediting the grant to revenue under the performance model.

Government grants released on sale of a property may be repayable but are normally available to be recycled are credited to a Recycled Capital Grant Fund and included in the Balance Sheet as a liability, where applicable.

OTHER GRANTS

Grants received from non-government sources are recognised using the performance model. A grant which does not impose specified future performance conditions is recognised as revenue when the grant proceeds are received or receivable. A grant that imposes specified future performance-related conditions on the Company is recognised only when these conditions are met. A grant received before the revenue recognition criteria are satisfied is recognised as deferred income and included as a liability in the Balance Sheet.

INVENTORIES (excluding Shared ownership properties)

Inventories are stated at the lower of cost and estimated value in use. Cost comprises direct material costs and (where applicable), direct labour costs and those overheads that have been incurred in bringing the inventories to their present location and condition. Cost is calculated using the First in First Out (FIFO) method.

LEASES

IFRS 16 is the Lease Accounting Standard that came into effect from April 2019. The adoption of this new Standard resulted in SCH recognising a right-of-use asset and related lease liability in connection with all former operating leases, with the exception of:

- leases with a remaining lease term of less than 12 months from the date of initial application, or
- leases with a right of use asset opening net present value of less than £5,000

The standard has been applied using the cumulative catch-up approach with the right-of-use asset under leases being measured at an amount equal to the lease liability.

Depreciation has been applied to right-of-use assets on a straight-line basis from date of transition for existing leases or lease commencement date for leases entered into within the current financial year.

Significant Accounting Policies

31 March 2026

(continued)

FINANCIAL INSTRUMENTS

Financial assets and financial liabilities are recognised when the Company has become a party to the contractual provisions of the instrument.

Financial assets

Receivables: Trade and other receivables are classified as loans and receivables and are initially recognised at fair value. They are subsequently measured at their amortised cost using the effective interest method less any provision for impairment.

A provision for impairment is made where, in the opinion of the Directors, there is a reasonable likelihood that amounts will not be recovered in accordance with the original terms of the agreement. The level of the provision depends on the nature of the debt and the customer's payment history. The carrying value of the receivable is reduced through the use of an allowance account and any impairment loss is recognised in the Income Statement.

Cash and cash equivalents/liquid resources: Cash and cash equivalents comprise cash at bank and in hand and other short-term deposits held by the Company with maturities of less than three months.

Bank overdrafts are presented within current liabilities.

Investments: Short-term investments, comprising short term deposits with maturities of three months or more, are stated at cost and classified as current assets.

Borrowings: Interest bearing loans and overdrafts are recorded initially at their fair value, net of direct transaction costs. Such instruments are subsequently carried at their amortised cost and finance charges, including premiums payable on settlement or redemption, are recognised in the Income Statement over the term of the instrument using an effective rate of interest.

Payables: Trade and other payables are initially recognised at fair value and subsequently at amortised cost using the effective interest method.

TAXATION

The relationship between the Company and its parent undertaking has been recognised as non-trading in nature. Consequently, any activities that the Company carries on with its parent under its Management Agreement are not liable to corporation tax.

Where the Company has trading income from outside its parent Company, this may be liable to Corporation Tax. The tax payable is based on taxable profit for the year. Taxable profit differs from accounting profit as reported in the Statement of Comprehensive Income because it excludes items of income or expense that are taxable or deductible in other years and it further excludes items that are never taxable or deductible. The Company's liability for current tax is measured using tax rates that have been enacted or substantively enacted by the reporting date. The tax expense represents the sum of the current tax expense and deferred tax expense.

DEFERRED TAXATION

Deferred tax assets are recognised to the extent that it is regarded as more likely than not that they will be recovered.

Deferred tax is measured at the tax rates that are expected to apply in the periods when the timing differences are expected to reverse, based on tax rates and law enacted or substantively enacted at the balance sheet date. Deferred tax assets and liabilities are not discounted.

Where law or accounting standards require gains and losses to be recognised in the Statement of Changes in Equity, the related taxation is also taken directly to the Statement of Changes in Equity in due course.

Significant Accounting Policies

31 March 2026

(continued)

PENSIONS

All permanent employees of the Company are entitled to join the local government "defined benefit" pension scheme, the West Midlands Pension Fund, which is administered by Wolverhampton City Council and provides members with defined benefits, related to pay and service. During the year, the Company paid an employer's contribution rate of 24.8% (2025: 21.8%) into the fund in addition to meeting all pension payments relating to added years benefits awarded during the year, together with any related increases.

In accordance with IAS 19 "Employee benefits" revised, the service cost of the pension provision relating to the period, together with the cost of any benefits relating to past service, and the administration cost is charged to the Income Statement. A net interest charge on the defined benefit liability based on the discount rate at the start of the year is included in the Income Statement under "Finance costs".

The difference between the fair value of the assets of the scheme and the present value of the accrued pension liabilities is shown as an asset or liability on the balance sheet net of any deferred tax. Any difference between the expected return on assets and that actually achieved is recognised in the Statement of Comprehensive Income along with differences arising from experience or assumption (financial and demographic) changes.

Through its defined benefit pension scheme the company is exposed to a number of risks, the most notable being:

- Investment risk. The Fund holds investment in asset classes, such as equities, which have volatile market values and while these assets are expected to provide real returns over the long-term, the short-term volatility can require additional funding to be required if a deficit emerges;
- Interest rate risk. The Fund’s liabilities are assessed using market yields on high quality corporate bonds to discount future liability cashflows. As the Fund holds assets such as equities the value of the assets and liabilities may not fluctuate in the same way;
- Inflation risk. All of the benefits under the Fund are linked to inflation and so deficits may emerge to the extent that the assets are not linked to inflation; and
- Longevity risk. In the event that the members live longer than assumed a deficit will emerge in the Fund. There are also other demographic risks.

Further information on pension arrangements is set out in Note 17 to the accounts.

STANDARDS ADOPTED EARLY BY THE COMPANY

The Company has not adopted any standards or interpretations early in either the current or the preceding financial year.

At the date of authorisation of these financial statements there are no Standards and Interpretations which have not been applied in these financial statements which were in issue but not yet effective.

Areas of Judgement and Risk Management

31 March 2026

CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGEMENT

The Company makes estimates and assumptions concerning the future that are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results.

The Strategic Report set out on pages 6 to 17 of these accounts sets out a commentary on the current and future trading activities of the Company as well as the key risks underlying its operations. The evidence gathered in this exercise forms a key element of the Directors' assessment of whether SCH continues to be a going concern.

The estimates (and related assumptions) that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities are in relation to the pension scheme and the property revaluations. The detailed assumptions in relation to the pension scheme are set out in Note 17 to the accounts. Solihull Community Housing's ("SCH") parent, Solihull Council confirms on an annual basis that they expect SCH to make best endeavours to maintain a fully funded scheme by complying with any guidance issued by the actuary with regard to contribution levels. In line with the Company's accounting policies its property portfolio is revalued every five years. The first such revaluation took place on 31 March 2016 with the most recent full revaluation taking place on 31 March 2026. Details are set out in Note 8 to the accounts.

FINANCIAL RISK MANAGEMENT

The Board of SCH is responsible for identifying, evaluating and managing the significant risks faced by the Company. The Chair of the Audit and Risk Committee jointly champions risk management (including the management of financial risks) throughout SCH on an ongoing basis together with the Chief Financial Officer

The Chief Executive and SCH's Executive Leadership Team (ELT) are collectively responsible for managing strategic risks as well as being responsible for managing operational risks in their individual areas of responsibility.

SCH maintains a Corporate Risk register and each Executive Director maintains a supporting Service Risk Register. These registers set out the identified risks and the mitigating actions in place to deal with these risks, as well as clearly defined management responsibilities for their identification, evaluation and control. A joint risk register with SMBC is in place to record and monitor risks that are shared with the Council. SCH has defined its risk appetite specifying the types and level of risk it is willing to hold – there is a clear process of assessment and escalation of all out of appetite risks. The Executive Leadership Team (ELT) carry out formal reviews of the corporate risks and these are reported to the Audit and Risk Committee. A process is in place to conduct scheduled reviews of the operational risk registers by the Senior Leadership Team (SLT) to enable peer challenge and identification of the interdependencies between business areas. Corporate risks are reported to the Board annually.

Monitoring exposure to financial risks forms a key part of SCH's overall risk management processes. The Annual Governance Statement set out on pages 21 to 30 of these accounts sets out a more detailed explanation of SCH's approach to the management of both financial and operational risk.

Liquidity Risk and Credit Risk

SCH's objective is to meet its liabilities as they fall due whilst maintaining sufficient funds to enable the Company to react to unexpected changes in market conditions.

The Company is largely dependent on its largest customer, Solihull Council. The Capital and Revenue Management Fees and income from Service Level Agreements from Solihull Council represent 89% (2025: 89%) of SCH's income and are receivable monthly in advance. SCH is dependent on Management Fee income in order to maintain the necessary cash flow to operate effectively.

Areas of Judgement and Risk Management

31 March 2026

(continued)

Solihull Community Housing is exposed to liquidity risk principally in the event that the Council were to experience cash flow difficulties in paying the management fee monthly. Taking into account the Councils current financial position, it is still considered by the Board that the likelihood of this risk arising is remote.

The Company's maximum exposure to credit risk, gross of any collateral held, relating to its financial assets is equivalent to their carrying value. All financial assets have a fair value which is equal to their carrying value.

Liquidity Risk and Credit Risk (continued)

Credit risk predominantly arises from trade receivables of the Company's total 2026 financial assets, £4,557,000 (2025: £3,143,000) is owed to the Company by Solihull Council and the SCH Board therefore also consider that the likelihood of this risk arising is remote. The remainder are cash/cash equivalents and amounts due from third parties. Other trade receivables are limited in value.

SCH has joint banking arrangements with Solihull Council but the Company's arrangements reflect its independence (e.g. a separate bank account, bank mandate and signatories).

Solihull Council carries out Treasury Management on behalf of SCH under a Service Level Agreement (SLA). Surplus funds for both Solihull Council and SCH are pooled and deposited overnight and on longer arrangements, under a formal agreement between the two parties. The resulting interest is credited to the Council's Housing Revenue Account (HRA), and thus supplements the Management Fee payable to SCH.

Interest rate risk

SCH's interest rate risk is limited to the following areas:

- The rate that the Housing Revenue Account (HRA) earns on its balances - which directly affects the management fee payable to SCH (see above).
- Solihull Council's Consolidated Rate of Interest (CRI) on the loan to finance SCH's developments and Planned Preventative Maintenance programme

All the Company's 2026 and 2025 Financial Assets are non-interest bearing.

All the Company's 2026 and 2025 Trade and Other Payables are non-interest bearing. The interest rates applicable to the Company's 2026 and 2025 Borrowings are set out in Note 12 to these accounts, where these amounts are analysed by interest type.

Capital Management

The Company's main objective when managing capital is to ensure that it maintains sufficient capital to ensure that the Council's tenants continue to receive an excellent housing management service from the Company. The level of management fee agreed with the Council annually in respect of the Management Agreement and the Company's level of operating efficiency are the principal determinants of the level of equity that the Company is able to retain. As a Company limited by guarantee, the only equity capital of the Company is represented by its retained earnings reserves.

The Company's level of debt is not significant. "Net debt" is defined as including short and long-term borrowings (including overdrafts and lease obligations) net of cash and cash equivalents and represents net positive funds of £6,872,000 at 31 March 2026 (2025: £6,681,000).

The Company does not have any externally imposed capital requirements and has not made any changes to its capital management during the year.

Notes to the Financial Statements

For the year ended 31 March 2026

1. REVENUE

Sales were made wholly in the United Kingdom and derived from the Company's principal activity of housing management, including rental of properties.

2. SEGMENT INFORMATION

IFRS8 requires the provision of segmental information for the Company on the basis of information reported internally to the chief operating decision-maker for decision-making purposes. The Company considers that the role of chief operating decision-maker is performed by the Company's Board of Directors and all results are reported as a single segment.

3. PROFIT FROM OPERATIONS

(Loss) / profit from operations is stated after charging:	2026 £'000	2025 £'000
Inventories		
- cost of inventory recognised as an expense	974	1,009
Depreciation of owned property, plant and equipment	48	48
Depreciation of leased assets	4	116
Auditor's fees:		
- audit services	34	35
- taxation	3	3
Rentals under operating leases	332	210

The following table analyses the nature of expenses:		2026 £'000	2025 £'000
Staff costs	5	14,217	13,788
Asset management		29,131	31,603
Housing management		6,209	6,212
Corporate services		4,944	4,757
Total expenditure		54,501	56,360

4. FINANCE INCOME / (COST)		2026 £'000	2025 £'000
Interest on net pension asset	17	1,665	954
Prudential borrowing interest		(14)	(15)
Interest on lease liabilities	16	-	(1)
Net Income		1,651	938

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

5. STAFF COSTS

	2026 No	2025 No
The average monthly number of persons employed by the Company during the year was:		
Non-executive Directors	10	11
Executive Management Team	3	3
Housing and Communities	102	118
Asset Management and Development	103	102
Customer Service Transformation and Business Support	66	61
	284	295

Staff costs, including directors:	2026 £'000	2025 £'000
Wages and salaries	9,815	9,583
Social security costs	1,276	965
Other pension costs	1,383	1,798
Modernisation and redundancy costs	83	23
Sub-total employed staff costs	12,557	12,369
Agency costs	1,660	1,419
Total Staff costs	14,217	13,788

Remuneration of key management personnel:

The remuneration of the non-Executive directors and the Executive Management Team of the Company in aggregate is as follows:

	2026 £'000	2026 Average per full time equivalent	2025 £'000	2025 Average per full time equivalent
Short term employee benefits (Pay & Employers NI)	492	164	461	154
Termination Benefits	76	25	-	-
	568	189	461	154

The role of the Chief Financial Officer in SCH is undertaken by the Council's Assistant Director of Finance and Property Services and spends approximately 55% of her time on SCH business. This 55% costs the Council £77,000 (2025: £74,000). This is not included within the staffing details above as the role forms part of an overall Service Level Agreement (SLA) paid by SCH to the Council at a total cost of £2,150,000 (2025: £2,061,000). The SLA provides the company with support services for Finance, Human Resources, Information Technology, Health and Safety and Equalities.

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

5. STAFF COSTS (continued)

The remuneration of the Main Board of the Company in aggregate is as follows:

	2026 £'000	2025 £'000
Chair	11	10
Committee Chairs	11	10
Other Board Members	22	28
	44	48

In addition to above, in total Board Members incurred and were reimbursed £1,000 for incidental expenses associated with attending Board meetings and formal events in their capacity as Board members (2025: £1,000).

6. INCOME TAX EXPENSE

ANALYSIS OF CHARGE IN YEAR	2026 £'000	2025 £'000
Current Tax:		
UK – Current year	-	10
Adjustment in respect of prior year	-	(4)
	-	6

Current tax reconciliation:	2026 £'000	2025 £'000
Profit before tax	2,139	1,556
Depreciation	52	164
IAS19 adjustments:		
- Other finance (income)/ costs	(1,665)	(954)
- Past and present service costs	1,303	1,748
	1,829	2,514

	2026 £'000	2025 £'000
Tax at the standard rate of corporation tax 25% (2025: 19%)	457	478
Effect of non-trading activities with member not subject to corporation tax	(457)	(468)
	-	10

Where the Company has income related to trading outside of the council, this is taxable. During the reporting year income from the ownership and management of the company's own developments and from the company's 'Better Places' service were subject to Corporation Tax. A taxable loss of £3,000 arose in the year and is reflected in these statements (2025: profit of £54,000).

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

6. INCOME TAX EXPENSE (continued)

On the basis that we are not expecting to sell the housing properties owned by the Company, no allowance has been made within these financial statements for deferred taxation as a result of revaluations of housing properties undertaken (last revaluation: 31 March 2026). Any such sales are only taxable if sold to a party other than the Council.

7. FINANCIAL INSTRUMENTS

Assets at amortised cost:		**2026 £'000**	**2025 £'000**
Current financial assets			
Trade and other receivables	10	4,618	4,011

Liabilities at amortised cost:		**2026 £'000**	**2025 £'000**
Current financial liabilities			
Trade and other payables	11	7,988	7,087
Borrowings	12	44	42
		8,032	7,129
Non-current financial liabilities			
Borrowings	12	246	290
Lease Liabilities	16	12	5
Total other financial liabilities		8,290	7,424

MATURITY ANALYSIS

Financial Assets

The table below analyses the Company's financial assets which are considered to be readily saleable or are expected to generate cash inflows to meet cash outflows on financial liabilities.

		2026 £'000	**2025 £'000**
Within 6 Months			
Trade and other receivables	10	4,618	4,011

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

7. FINANCIAL INSTRUMENTS (continued)

Financial Liabilities

The table below analyses the Company's liabilities on a contractual gross undiscounted cash flow basis into maturity groupings based on amounts outstanding at 31 March 2026 up to the contractual maturity date:

		2026 £'000	2025 £'000
Within 6 Months			
Trade and other payables	11	7,988	7,087
Borrowings	12	44	42
1 to 5 Years			
Lease Liabilities	16	12	5
Borrowings	12	246	290
Total		8,290	7,424

The Company would normally expect that sufficient cash is generated in the operating cycle to meet the contractual cash flows as disclosed above through effective cash management.

8. PROPERTY

	Freehold Land	Completed Properties available for letting		Total
		Rented	Shared Ownership	
	£'000	£'000	£'000	£'000
Valuation:				
At 1 April 2024	770	1,729	252	2,751
Disposals			(22)	(22)
At 31 March 2025	770	1,729	230	2,729
Revaluation	44	306	33	383
At 31 March 2026	814	2,035	263	3,112
Accumulated depreciation and any recognised impairment losses:				
At 31 March 2024	-	(503)	(75)	(2,274)
Charged in the year	-	(42)	(6)	(48)
Reversal of accumulated depreciation	-	-	5	5
At 31 March 2025	-	(545)	(76)	(621)
Charged in the year	-	(42)	(6)	(48)
At 31 March 2026	-	(587)	(82)	(669)

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

8. PROPERTY (continued)

	Freehold Land	Completed Properties available for letting		Total
		Rented	Shared Ownership	
	£'000	£'000	£'000	£'000
Net book value:				
At 31 March 2026	814	1,448	181	2,443
At 31 March 2025	770	1,184	154	2,108
At 31 March 2024	770	1,226	177	2,173

The depreciation expense of £48,000 (2025: £48,000) has been charged to operating expenses within the Income Statement.

In line with our accounting policy, all properties owned by Solihull Community Housing were subject to a full revaluation at 31 March 2026 which resulted in a revaluation gain of £383,000 which is recognised in the Statement of Comprehensive Income. Of this figure, £181,000 has been credited to the revaluation reserve, where valuations exceed historical cost, the remaining £202,000 has been credited to the profit and loss reserve.

The next full revaluation of these properties is due in 2030/31.

SCH received a total of £781,000 of Social Housing Grant towards the development of these properties; this sum was recognised as income in 2015/16 in line with the first full revaluation.

Had the Company adopted the Cost Model the carrying value of the assets would be as follows:

	Freehold Land	Completed Properties available for letting		Total
		Rented	Shared Ownership	
	£'000	£'000	£'000	£'000
Historic Cost	613	1,806	163	2,582
Accumulated Depreciation at 31 March 2026	-	(785)	(74)	(859)
At 31 March 2026	613	1,021	89	1,723

9. INVENTORIES	2026 £'000	2025 £'000
Raw materials and consumables	112	117

Raw materials and consumables to both are carried at the lower of cost and net realisable value. The replacement cost of the above stocks would not be significantly different from the values stated.

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

10. TRADE AND OTHER RECEIVABLES	2026 £'000	2025 £'000
Trade receivables	11	529
Owed by Solihull MBC	4,557	3,143
Accrued income and prepayments	600	671
Other tax and social security debtor	745	1,209
Other receivables including rent	8	14
	5,921	5,566

The average credit period taken on provision of services is 13 days (2025: 23 days).

An allowance has been made for estimated irrecoverable debtors of £156,000 (2025: £143,000). This allowance has been based on the knowledge of the financial circumstances of individual customers at year-end.

The following table provides an analysis of trade and other receivables that were past due at 31 March but not impaired. The Company believes that these balances are ultimately recoverable based on a review of past payment history and the current financial status of the customers.

	2026 £'000	2025 £'000
Up to 3 months	4	3
Up to 6 months	-	10
Greater than 6 months	3	27
	7	40

The movement in the allowance account was as follows:	2026 £'000	2025 £'000
Opening balance as at 1 April	143	118
Provision for receivables impairment	26	51
Receivables written off during the year	(4)	(18)
Unused amounts reversed	(9)	(8)
Closing balance as at 31 March	145	143

At the year end all trade and other receivables were denominated in sterling.

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

11. TRADE AND OTHER PAYABLES	2026 £'000	2025 £'000
Amounts payable relating to invoiced amounts	1,662	2,898
Accruals and deferred income	5,760	3,405
Owed to Solihull MBC	190	415
Other tax and Social Security	252	235
Other creditors	428	402
Current trade and other payables	8,292	7,355

Trade and other payables principally comprise amounts outstanding for trade purchases and ongoing costs. The average credit period taken for trade purchases is 21 days (2025: 14 days).

The Directors consider that the carrying amount of trade payables approximates to their fair value.

At the year end all trade and other payables were denominated in sterling.

12. BORROWINGS	2026 £'000	2025 £'000
Less than 1 year		
Prudential borrowing from SMBC	44	42
Greater than 1 year		
Prudential borrowing from SMBC	246	290
	290	332

Interest Rate Summary	2026 £'000	2025 £'000
Floating rate	290	332

A floating rate loan from Solihull Council to finance SCH's development of properties for rent and shared ownership - £290,000 (2025: £332,000). This is a floating rate loan repayable over 22 years from 2010/11 to 2031/32. Interest is charged at the Council's Consolidated rate of Interest (CRI). The loan is secured on the developed properties.

13. COMPANY LIMITED BY GUARANTEE

The Company is limited by guarantee, incorporated in the United Kingdom, and is governed by its Memorandum and Articles of Association. The guarantor is its sole member, Solihull Metropolitan Borough Council, (see note 18) as listed in the Company's Register of Members. The liabilities in respect of the guarantee are set out in the Memorandum of Association and are limited to £1 per member of the Company.

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

14. EQUITY AND RESERVES

	Revaluation Reserve	Retained Earnings	Total Equity and Reserves
Retained earnings	£'000	£'000	£'000
Balances at 1-Apr-25 (restated*)	317	3,275	3,592
Retained profit for the year	-	2,139	2,139
Other Comprehensive Income	181	1,159	1,340
Balances at 31-Mar-26	498	6,573	7,071

* The restated opening balances relate to the property valuations completed in 2021; whereby the split between Retained Earnings and Revaluation Reserve was not recognised at that time.

Reserves consist of a retained earning reserve which is used to recognise the cumulative profit and loss net of any distributions for future specific activities on the pension reserve which is used to record the current pension fund deficit.

15. CASHFLOWS

	2026 £'000	2025 £'000
Reconciliation of operating profit to net cash inflow/ (outflow) from operating activities		
Operating profit before tax	488	618
Depreciation and amortisation	52	164
(Gain) / loss on revaluation of fixed assets	4	(3)
Pension contributions paid in the period	(2,283)	(1,971)
Pension contributions charged in the period	1,377	1,793
Decrease in inventories	5	7
Decrease/ (increase) in debtors	(355)	(1,172)
Increase/ (decrease) in creditors	937	(4,804)
Decrease in Corporation tax Creditor	(6)	(5)
Net cash inflow / (outflow) from operating activities	219	(5,373)

CASH AND CASH EQUIVALENTS	2026 £'000	2025 £'000
Cash and cash equivalents represent:		
Cash at bank and in hand	7,177	7,022

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

16. COMMITMENTS UNDER LEASES

Right-of-use assets	Plant and machinery £'000
Balance at 1 April 2025	9
Depreciation charge for the year	(4)
Lease modifications recognised during the year	(5)
Additions to right of use assets during the year	16
Balance at 31 March 2026	16

Total value of lease commitments:	Plant and machinery 2026 £'000	Plant and machinery 2025 £'000
Expiry of lease:		
Within 1 year	18	120
Between 2-5 years	13	4
After 5 years	-	1
Total undiscounted lease liabilities at 31 March 2026	31	125
Lease liabilities in the statement of financial position at 31 March	16	9
Current	4	4
Non-current	12	5

Amounts recognised in statement of comprehensive income	2026 £'000	2025 £'000
Expenses relating to short-term leases	332	211

Amounts recognised in statement of cash flows	2026 £'000	2025 £'000
Cash outflow for leases	9	326

17. RETIREMENT BENEFIT OBLIGATIONS

The most recent actuarial valuations of plan assets and the present value of the defined benefit obligation were carried out as at 31 March 2026 for the purposes of the IAS 19 valuation for inclusion in these financial statements prepared by Hymans Robertson LLP, a registered actuary engaged by West Midlands Pension Fund. The present values of the defined benefit obligation, the related current service cost and past service cost were measured using the projected unit method.

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

17. RETIREMENT BENEFIT OBLIGATIONS (continued)

	2026 %	2025 %
Key assumptions used:		
Future salary increases	4.00	3.75
Future pension increases	3.00	2.75
CPI increases	3.00	2.75
Discount rate	6.20	5.80

Mortality rate assumptions are based on publicly available data in the UK.

The average life expectancy for a pensioner retiring at 65 on the reporting date is:	2026	2025
Male	87	86
Female	90	89

The average life expectancy for a pensioner retiring at 65, aged 45 at the reporting date is:	2026	2025
Male	87	87
Female	90	90

The sensitivity of the overall pension liability to changes in the weighted principal assumptions is:

	Change in Assumption	Overall Impact on Liability
Discount rate	Decrease by 0.1%	Increase of £971,000
Short term salary increase	Increase by 0.1%	Increase of £47,000
Pension growth rate	Increase by 0.1%	Increase of £923,000
Rate of mortality	Increase by 1 year	Increase of £2,657,000

Amounts recognised in profit or loss in respect of this defined benefit scheme are as follows:

	2026 £'000	2025 £'000
Current service cost	1,303	1,748
Net interest on asset / liability	(1,665)	(954)
Administration cost	74	45
Total operating charge	(288)	839

Of the charge for the year: £1,377,000 has been charged to operating costs (2025: £1,793,000);
£1,665,000 has been credited to finance costs (2025: £954,000).

Actuarial gains and losses are reported as other comprehensive income and expense:

Gain recognised is £957,000 (2025: loss of £1,027,000);

Cumulative gain is £15,855,000 (2025: £14,898,000)

The actual return on scheme assets was a loss of £2,977,000 (2025: £8,238,000).

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

17. RETIREMENT BENEFIT OBLIGATIONS (continued)

The amounts included in the Balance Sheet arising from the Company's obligation in respect of the defined benefit retirement scheme are:

	2026 £'000	2025 £'000
Fair value of scheme assets	100,822	91,182
Present value of defined benefit contributions	(66,425)	(62,925)
Surplus in scheme	34,397	28,257
Effect of the Asset Ceiling valuation	(34,397)	(31,785)
Asset / (Liability) recognised in the Balance Sheet	-	(3,528)

Movements in the liability recognised in the Balance Sheet in the current period:	2026 £'000	2025 £'000
At 1 April	(3,528)	(3,633)
Current service cost including curtailments	(1,303)	(1,728)
Past service cost	-	(20)
Interest cost	(3,639)	(3,445)
Remeasurement arising from changes in assumptions	3,034	10,978
Other experience losses/ (gains)	(3,278)	632
Expected return on scheme assets	5,304	4,399
Actuarial gains/ (losses)	3,813	(4,074)
Administration expenses	(74)	(45)
Employer contributions	2,283	1,971
Effect of the Asset Ceiling valuation	(2,612)	(8,563)
At 31 March	-	(3,528)

Movement in the present value of defined benefit obligations in the current period:	2026 £'000	2025 £'000
At 1 April	62,925	71,091
Current service cost including curtailments	1,303	1,728
Past service cost	-	20
Administration expenses	74	45
Interest cost	3,639	3,445
Remeasurement arising from changes in assumptions	(3,034)	(10,978)
Other experience losses/ (gains)	3,278	(632)
Contributions by plan participants	628	598
Benefits paid	(2,388)	(2,392)
At 31 March	66,425	62,925

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

17. RETIREMENT BENEFIT OBLIGATIONS (continued)

Movement in the fair value of scheme assets in the current period:	2026 £'000	2025 £'000
At 1 April	91,182	90,680
Expected return on scheme assets	5,304	4,399
Actuarial (losses)/ gains	3,813	(4,074)
Employer contributions	2,283	1,971
Employee contributions	628	598
Benefits paid	(2,388)	(2,392)
At 31 March	100,822	91,182

Analysis of the scheme assets and the expected rate of return at the reporting date:

	Expected return		Fair value of assets	
	% 2026	% 2025	£'000 2026	£'000 2025
Equity instruments	6.20	5.80	56,140	40,712
Debt instruments	6.20	5.80	38,444	33,425
Property	6.20	5.80	6,238	6,160
Alternatives	6.20	5.80	-	4,329
Cash	6.20	5.80	-	6,556
	6.20	5.80	100,822	91,182

Since 2016 the overall rate of return on scheme assets is calculated with reference to the overall discount rate. These were previously determined by reference to relevant indices.

The five-year history of experience adjustments are as follows:

At 31 March:	2026 £'000	2025 £'000	2024 £'000	2023 £'000	2022 £'000
Fair value of plan assets	100,822	91,182	90,680	83,190	84,139
Present value of defined obligation	(66,425)	(62,925)	(71,091)	(70,283)	(98,226)
Effect of the Asset Ceiling valuation	(34,397)	(31,785)	(23,222)	-	-
Surplus/ (deficit) in the plan	-	(3,528)	(3,633)	12,907	(14,087)
Re-measurement on Assets	3,732	(4,074)	4,118	(3,285)	5,205
Experience adjustments on plan liabilities	(3,197)	632	(2,183)	(3,544)	(212)
Gain on financial assumptions	1,482	10,852	4,059	36,181	5,496
Gain on demographic assumptions	1,552	126	421	592	562
Effect of the Asset Ceiling valuation	(2,612)	(8,653)	(23,222)	-	-
Total Actuarial gain/ (loss) for year	957	(1,027)	(16,807)	29,944	11,051

The estimated amounts of contributions expected to be paid to the scheme during the financial year ending 31 March 2026 is £912,000.

Notes to the Financial Statements

For the year ended 31 March 2026

(continued)

18. RELATED PARTY TRANSACTIONS

The Company's parent and ultimate parent is Solihull Metropolitan Borough Council. Their consolidated Financial Statements are available from Solihull Metropolitan Borough Council, The Council House Complex, Manor Square, Solihull, B91 3QB.

Solihull Community Housing Limited is an Arm's Length Management Organisation with a contract from the ultimate parent (Solihull Metropolitan Borough Council) which passes on responsibility for the management and maintenance of the Council's homes and other related buildings.

During the year the Company:	2026 £'000	2025 £'000
- supplied goods and services to SMBC	49,683	48,909
- purchased goods and services from SMBC	5,907	5,825
At 31 March		
- included in year-end Debtors owed by SMBC	4,557	3,143
- included in year-end Creditors owing to SMBC	(190)	(264)
- included in year-end Borrowings owing to SMBC	(290)	(332)
- included in year-end Deferred income from SMBC	-	(151)
- Net balance due from SMBC	4,077	2,396

Included in the above figures is a loan from Solihull Council to fund SCH's own development of properties for rent and shared ownership. Further details are set out in note 12. The loan is secured against the assets that it was used to develop. As at 31 March 2026 the balance outstanding was £290,000 (2025: £332,000).

Apart from this loan the amounts outstanding that are recorded in the accounts are unsecured, carry or bear no interest and will be settled in cash. No provisions have been made for doubtful debts in respect of the amounts owed by related parties.

During the year the company also purchased good or services from the below companies. Housemark Limited and the National Federation of ALMOs Limited have current Directors who are also serving Board members of SCH:

	2026 £'000	2025 £'000
Housemark Limited		
- purchased goods or services	20	22
National Federation of ALMOs Limited		
- purchased goods or services	17	15
At 31 March		
- Included in year-end Debtors	21	22
- Included in year-end Creditors	4	-

19. CONTINGENT LIABILITY

As at 31 March 2026 the company has no material contingent liabilities.



Get in Touch

Join us on social media:

Solihull Community Housing
@SolihullHousing
@SolihullCommunityHousing

Freepost RLSS-UEBA-RTUZ
Solihull Community Housing
Endeavour House
Meriden Drive
Solihull B37 6BX

Phone: 0121 717 1515

Typetalk: 18001 0121 717 1515

Email: info@solihullcommunityhousing.org.uk

Website: www.solihullcommunityhousing.org.uk

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Item 14 Appendix C

ANDREW FELTON
DIRECTOR OF RESORCES
Resources Directorate
Financial Operations Division
P.O. Box 9 Council House
Manor Square
Solihull West Midlands B91 3QB
Tel. 0121 704 6506
Email: Hema.Savani@solihull.gov.uk
www.solihull.gov.uk

Mr Paul Edwards
Company Secretary
Solihull Community Housing
Endeavour House
Meriden Drive
Solihull
B37 6BX

Our Ref. AF/HS/JJ

Please ask for: Hema Savani

Date: 17 June 2026

Dear Paul,

Letter of Support for Financial Year Ending 31 March 2026

To the Board of Solihull Community Housing Limited

We, Solihull Metropolitan Borough Council, write to confirm our continued financial support to Solihull Community Housing Limited (the "Subsidiary") for the financial year ending 31 March 2026.

We acknowledge the Subsidiary's reliance on our financial support to address its going concern requirements and ensure it continues to meets its financial obligations as they fall due. To this end, we provide the following assurances:

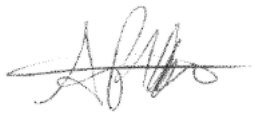
1. **Financial support**
   Solihull Metropolitan Borough Council undertakes to provide financial assistance to Solihull Community Housing Limited to ensure it has adequate resources to meet its liabilities and operational commitments as and when they fall due, for at least twelve months from the date of signing the financial statements for the year ended 31 March 2026.

2. **Commitment to Business Continuity**
   We reaffirm our commitment to the Subsidiary's strategic goals and operational sustainability. We will work closely with Solihull Community Housing Limited to support its business objectives.

3. **No Withdrawal of Support**
   We commit not to withdraw financial or operational support during the aforementioned period, ensuring that Solihull Community Housing remains a going concern.

This letter of support is provided as a good faith commitment from Solihull Metropolitan Borough Council and serves to support the Subsidiary's preparation of financial statements on a going concern basis.

Yours sincerely,



Andrew Felton
Director of Resources

For and on behalf of Solihull Metropolitan Borough Council

cc
Muhummad Khan
Bishop Fleming LLP
1 – 3 College Yard
Worcester
WR1 2LB

Solihull Community Housing
Shaping our neighbourhoods

Endeavour House, Meriden Drive
Solihull B37 6BX
Phone: 0121 717 1515
Typetalk number: 18001 0121 717 1515

Bishop Fleming Audit Limited
1-3 College Yard
Worcester
WR1 2LB

Please ask for: Simon Wilson

Date: 15 September 2026

Dear Sirs

FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2026

The following representations are made on the basis of enquiries of management and staff with relevant knowledge and experience such as we consider necessary in connection with your audit of the financial statements of Solihull Community Housing Limited (the company) for the year ended 31 March 2026. These enquiries have included inspection of supporting documentation where appropriate and are sufficient to satisfy us that we can make each of the following representations. All representations are made to the best of our knowledge and belief.

1. Responsibility for the financial statements

We have fulfilled our responsibilities as directors under the Companies Act 2006 for preparing financial statements which give a true and fair view and for making accurate representations to you.

2. Completeness of information

All the transactions undertaken by the company have been properly reflected and recorded in the accounting records. All the accounting records have been made available to you for the purpose of your audit. We have provided you with unrestricted access to all appropriate persons within the company, and with all other records and related information requested, including minutes of all management and shareholder meetings.

The financial statements are free of material misstatements, including omissions.

3. Internal control and fraud

We acknowledge our responsibility for the design, implementation and maintenance of internal control systems to prevent and detect fraud and error. We have disclosed to you the results of our assessment of the risk that the financial statements may be materially misstated as a result of fraud.

We have disclosed to you all instances of known or suspected fraud affecting the entity involving management, employees who have a significant role in internal control or others that could have a material effect on the financial statements.
We have also disclosed to you all information in relation to allegations of fraud or suspected fraud affecting the entity's financial statements communicated by current or former employees, analysts, regulators or others.

4. Laws and regulations
We have disclosed to you all known instances of non-compliance or suspected non-compliance with laws and regulations whose effects should be considered when preparing the financial statements.

5. Legal claims
We have disclosed to you all claims in connection with litigation that have been, or are expected to be, received and such matters, as appropriate, have been properly accounted for and disclosed in the financial statements.

6. Transactions with directors and other related parties
Related party relationships and transactions have been appropriately accounted for and disclosed in the financial statements. We have disclosed to you all relevant information concerning such relationships and transactions and are not aware of any other matters which require disclosure in order to comply with the requirements of company law or accounting standards.
In addition, the company has not granted any advances or credits to, or made guarantees on behalf of, the directors other than those disclosed in the financial statements.

7. Control
We confirm that the company is controlled by Solihull Metropolitan Borough Council by virtue of its majority shareholding in the company.

8. Going concern
We believe that the company's financial statements should be prepared on a going concern basis on the grounds that current and future sources of funding or support will be more than adequate for the company's needs. We have considered a period of twelve months from the date of approval of the financial statements.
We have also considered the adequacy of the disclosures in the financial statements relating to going concern and are satisfied that no further disclosures relating to the company's ability to continue as a going concern are required in order to give a true and fair view.

9. Accounting Estimates and Fair Values
The methods, data and significant assumptions used by us in making accounting estimates, and their related disclosures, are appropriate to achieve recognition, measurement and disclosure that is reasonable in the context of the applicable financial reporting framework.

10. Subsequent events
All events subsequent to the date of the financial statements which require adjustment or disclosure have been properly accounted for and disclosed.

11. Assets and liabilities

The company has satisfactory title to all assets and there are no liens or encumbrances on the company's assets, except for those that are disclosed in the notes to the financial statements.

All actual liabilities, contingent liabilities and guarantees given to third parties have been recorded or disclosed as appropriate.

We have no plans or intentions that may materially alter the carrying value and, where relevant, the fair value measurements or classification of assets and liabilities reflected in the financial statements.

12. Uncorrected misstatements

We confirm that we believe the uncorrected misstatements in Appendix I to be immaterial to the financial statements of the company.

We acknowledge our legal responsibilities regarding disclosure of information to you as auditors and confirm that so far as we are aware, there is no relevant audit information needed by you in connection with preparing your audit report of which you are unaware.

We have taken all the steps that we ought to have taken as directors in order to make ourselves aware of any relevant audit information and to establish that you are aware of that information.

Yours faithfully

.....
Chair of the Board
On behalf of the Board of Directors

Appendix I – Schedule of Uncorrected Misstatements

	Balance sheet Dr	Balance sheet Dr	Profit and loss Dr	Profit and loss Dr
Masons Close impairment reversal accounting treatment				
Other Comprehensive Income	£202k			
Depreciation / reversal of impairment in P&L				£202k
	£202k			£202k

Solihull Community Housing Limited - Registered in England No. 04462630
Registered Office: Endeavour House, Meriden Drive, Solihull B37 6BX - VAT No. 825 1655 32

Meeting of the Board

Report title:	Financial Monitoring and Forecast – June 2026 (Quarter 1)	
Meeting date:	15 September 2026	
Report from:	Samantha Gilbert, Chief Finance Officer	
Report author/ lead officer:	Tony Higgins 0121 704 6080	SCH Senior Accountant tohiggins@solihull.gov.ukw
Report type:	~~Confidential~~ Open	
Decision type:	~~Assurance~~	~~Approval~~ Information

1. Report overview/purpose

1.1 To update the Board on the forecast financial performance as at the 3 months to 30 June 2026 (Quarter 1).

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 2026/27.
(2) **NOTE** the current and forecast reserves position.
(3) **NOTE** the progress of savings delivery for the next three years.
(4) **NOTE** the age of outstanding Accounts Receivable and Rent Debt.

3. Background/context

3.1 This report summarises the Revenue and Capital forecast financial performance based on the three-month period to 30 June 2026. 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 net revenue position shows a forecast outturn position of a £159,000 overspend (0.6%).

3.4 The capital position shows a forecast outturn position to budget.

3.5 The forecast reserves position shows available balances of £3.952 million and £28.051 million of SCH and HRA balances respectively.

3.6 The savings tracker shows that £81,000 (34.0%) of the savings targets agreed for 2026/27 are currently rated Red.

3.7 Outstanding SCH Accounts Receivable debt features on the revised dashboard, there are no significant issues of concern to highlight as at Quarter 1.

4. Matters for consideration

Commentary on Revenue Financial Performance 2026/27

4.1 As at 30 June 2026 the Executive Directors are forecasting an overspend against budget of +£159,000 by the end of the financial year.

4.2 Significant expected variances are set out in Appendix A; the most notable areas of overspend being electrical +£178,000 and gas +£176,000 day to day repairs costs, where forecast activity is expected to be similar to 2025/26. There are further pressures of +£83,000 on Communal cleaning, following the addition of blocks formerly under a good neighbour agreement (GNA) and Mews blocks – additional income will be received into the Housing Revenue Account to offset; and +£81,000 for savings targets currently rated red (see paragraph 4.10).

4.3 These pressures are partly offset by (£200,000) underspend on vehicle leases, where the retender process has been deferred, (£55,000) uncommitted Chief Executive's budget and (£50,000) Support Services SLA estimated underspend.

Impact on SCH Medium Term Financial Strategy (MTFS)

The consequences of issues highlighted within this report will be considered as part of the preparation for the SCH MTFS. Oversight of these implications and savings delivery will remain a major focus for the Executive Leadership Team as part of their monthly financial monitoring processes.

Commentary on Capital Financial Performance 2026/27

4.4 At the Full Cabinet meeting on 12 February 2026 the base housing capital budget of £33.225 million was approved for 2026/27 to be delivered by SCH on behalf of the Council.

4.5 This budget was subsequently increased by £5.271 million rephasing of net underspends from the 2025/26 outturn position as approved by Cabinet on 25 June 2026, resulting in a revised delegated capital budget of £38.496 million.

4.6 As at 30 June 2026 the revised programme is expected to outturn to budget.

SCH and HRA Reserves Position

4.7 The total SCH Reserves as at 1 April 2026 were a net positive balance of £7.071 million, which includes the Revaluation Reserve balance of £498,000. This balance is not included on the Reserves schedule within the Financial Dashboard.

4.8 The remaining positive reserves of £6.573 million, includes the Budget Strategy Reserve of £3.501 million, of which £490,000 is earmarked for restructure costs, the £1.572 million earmarked reserves to fund Board approved projects and the minimum working balance of £1.500 million. As detailed on Appendix A £3.952 million out of this total balance remains available (i.e. not committed or earmarked).

4.9 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 2026 were £35.185 million made up of £13.223 million revenue reserves and £21.962 million capital reserves. As detailed on Appendix A of these total balances £8.522 million and £19.529 million remain available in revenue and capital reserves respectively (i.e. not committed or earmarked).

Savings Tracker

4.10 The savings tracker included within Appendix A shows the RAG rating for the savings approved for the period 2026/27 to 2028/29. Details are also given of targets rated as red in the current financial year, totalling £81,000. These are included within the overall net variance position.

Accounts Receivable Debt

4.11 The accounts receivable information provided within Appendix A show a total outstanding due debt of £526,000 at 3 July 2026, of which £480,000 (91.2%) is owed by the Council. There are no significant areas of concern to be highlighted at this time.

HRA Rent Collection and Debt Impairment (Information Items)

4.12 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 93.32%, the equivalent collection figure for SCH owned property debt is not currently available.

4.13 The Debt Impairment is what was historically known as the 'Bad Debt Provision'. The dashboard shows that for Quarter 1 we have a requirement to provide for an additional £294,000 of HRA debt impairment compared to an annual budget of £896,000.

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 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

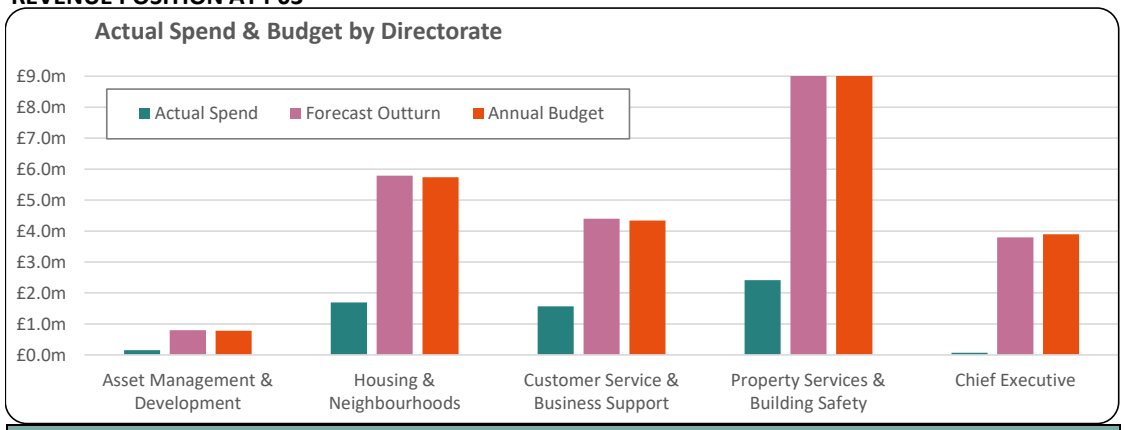
Appendix A – Q1 Financial Dashboard

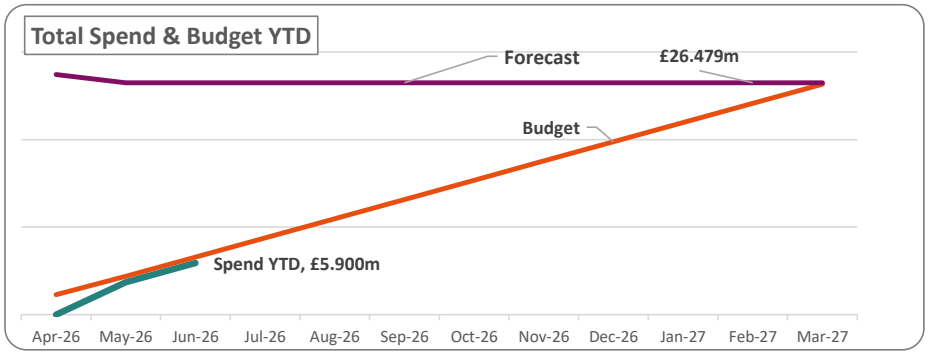
12. Background documents

SCH Board 2026/27 Revenue and Capital Budget report 17 November 2025.

Item 15 - Appendix A FINANCIAL DASHBOARD AS AT JUNE 2026

REVENUE POSITION AT P03



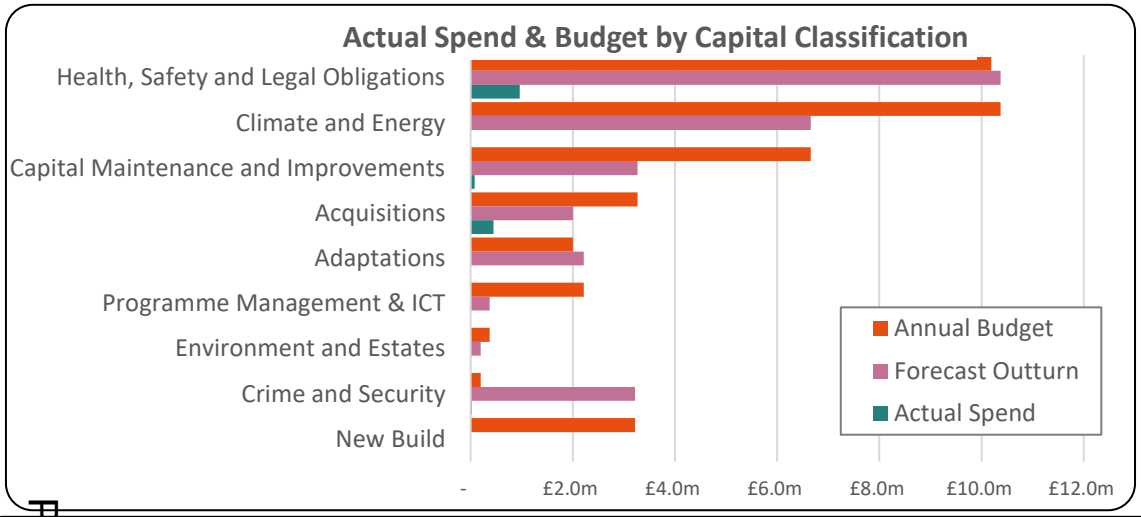


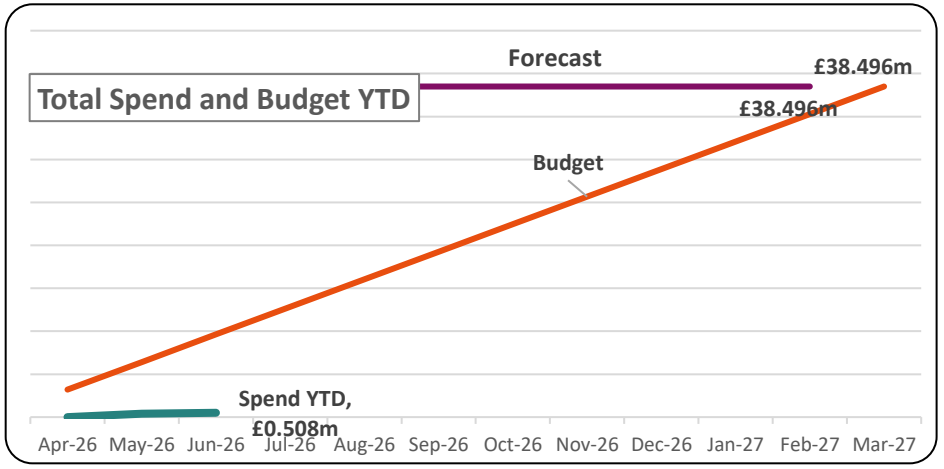
Service Area	Annual Budget	Actual Spend	Forecast Outturn	Forecast Variance	Variance Split Between Payroll	Non-Pay	Income	Forecast Variance P02	Movement from Forecast
	£000	£000	£000	£000	£000	£000	£000	£000	£000
Asset Management & Development	784	153	800	16	-	16	-	-	16
Housing & Neighbourhoods	5,735	1,693	5,788	53	(59)	124	(12)	-	53
Customer Service & Business Support	4,343	1,565	4,398	55	(64)	83	36	-	55
Property Services & Building Safety	11,559	2,418	11,699	140	(20)	160	-	-	140
Chief Executive	3,899	71	3,794	(105)	-	(105)	-	-	(105)
Revenue sub-total	**26,320**	**5,900**	**26,479**	**159**	**(143)**	**278**	**24**	**-**	**159**
Revenue Management fee	(26,339)	(6,600)	(26,339)	-	-	-	-	-	-
Contributions to/ (from) SCH Reserves	332	-	332	-	-	-	-	-	-
Contributions to/ (from) HRA Reserves	(313)	-	(313)	-	-	-	-	-	-
Net Revenue Position	**-**	**(700)**	**159**	**159**	**(143)**	**278**	**24**	**-**	**159**

Service Area	Variance £000	Explanation of Variances
Asset Management	16	+£16,000 Savings target rated RED
Housing & Neighbourhoods	53	+£83,000 Communal cleaning follows addition of ex-GNA and Mews blocks to the contract (income received into HRA to offset), +£48,000 Savings targets rated RED and +£22,000 utility costs in Temporary Accommodation. Part offset by (£59,000) payroll underspends, (£39,000) additional RTB Administration income based on 40x sales in year and (£2,000) Other.
Customer Service Transformation & Business Support	55	+£29,000 IT Licences, +£18,000 Wellbeing non-pay and income position and +£17,000 Savings target rated RED. Part offset by (£9,000) other minor net variances.
Chief Executive	(105)	(£55,000) balance of uncommitted budget available to offset pressures, (£50,000) Support Services SLA initial estimate (awaiting confirmation from Council).
Building Safety & Compliance	140	+£178,000 Electrical and +£176,000 Gas day to day repairs, forecast in line with 2025/26 activity levels. Part offset by (£200,000) due to deferring of vehicle lease retender and (£14,000) other minor variances.
Revenue sub-total	**159**	
Management fee/ Use of Reserves	-	no variance
Net Revenue Position	**159**	

FINANCIAL DASHBOARD AS AT JUNE 2026

CAPITAL POSITION AT P03





Capital Classification	Annual Budget £000	Actual Spend £000	Forecast Outturn £000	Forecast Variance £000	Explanation of Significant Variances
Health, Safety and Legal Obligations	10,190	(385)	10,190	-	YTD credit position from 25/26 accruals reversed but not yet paid.
Climate and Energy	10,369	962	10,369	-	
Capital Maintenance and Improvements	6,659	(633)	6,659	-	YTD credit position from 25/26 accruals reversed but not yet paid.
Acquisitions	3,270	79	3,270	-	
Adaptations	2,000	451	2,000	-	
Programme Management & ICT	2,218	1	2,218	-	
Environment and Estates	370	(2)	370	-	
Crime and Security	200	11	200	-	
New Build	3,220	24	3,220	-	
Capital Total	**38,496**	**508**	**38,496**	**-**	Overall budget of £33.225m as approved by Cabinet 12-Feb-26. Further net carry forwards of £5.271m added, follows approval by Cabinet 25-Jun-26.

FINANCIAL DASHBOARD AS AT JUNE 2026

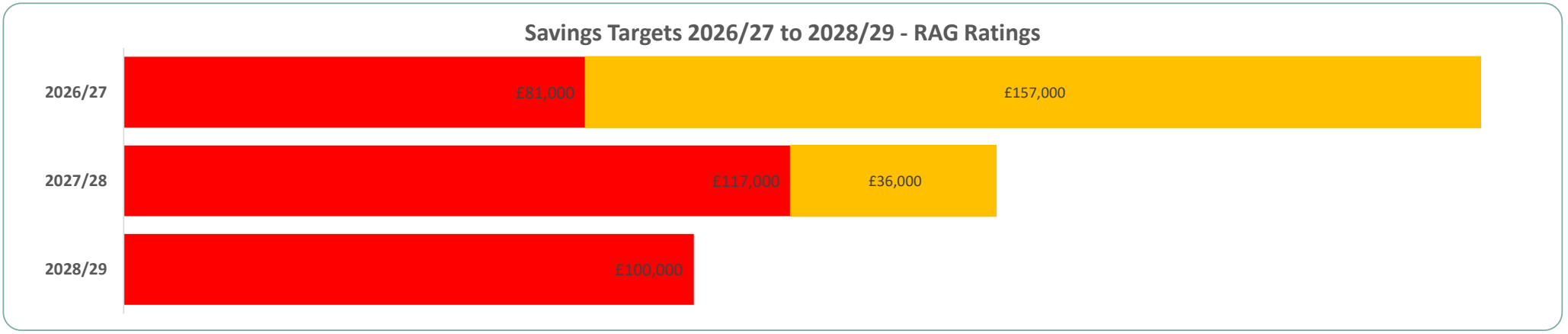
RESERVES

Solihull Community Housing Reserves (excluding Pension Reserve)	Balance 1-Apr-26 £000	Expected Use 2026/27 £000	Balance 31-Mar-27 £000	Committed/ Earmarked £000	Comments/ Notes on committed & earmarked use	Available Balances £000
Minimum Working Balance	1,500	-	1,500	(1,500)	Minimum requirement agreed with Auditor.	-
Budget Strategy Reserve (BSR)	3,011	941	3,952	-		3,952
BSR: Earmarked for Restructures	490	-	490	(490)		-
BSR: Other Earmarked Sums	1,572	(768)	804	(804)	Board approved use of SCH Reserves	-
Total SCH Reserves	6,573	173	6,746	(2,794)		3,952
Any under-achievement of savings targets (see below) may result in a further call on reserves.						

Housing Revenue Account Reserves REVENUE	Balance 1-Apr-26 £000	Expected Use 2026/27 £000	Balance 31-Mar-27 £000	Committed/ Earmarked £000	Comments/ Notes on committed & earmarked use	Available Balances £000
HRA Balances/ General Reserves	8,166	(2,615)	5,551	(3,921)	£2.0m working balance required, £3.758m Earmarked/ committed use of reserves.	1,630
Future Capital Investment	5,057	2,135	7,192	(300)		6,892
CAPITAL						
Major Repairs Reserve	3,493	(2,336)	1,157	-		1,157
Capital Receipts Reserves (inc.RTB)	18,213	3,239	21,452	(3,336)		18,116
Capital Receipts Unapplied	256	-	256	-		256
Total HRA Reserves	35,185	423	35,608	(7,557)	Council HRA Reserve Balances	28,051

SAVINGS TRACKER

RED & AMBER Rated Savings Targets 2026/27:		
Customer Services & Business Support	£ 50,000	CS04 - Business Processes and Support Review a. implementing 'one person one device' to make savings on telephone budgets b. centralising administration functions
Asset Management	£ 30,600	AM01 - Increase income from solar panels (or even wind turbines)
Property Services & Building Safety	£ 157,000	AM12 - Increased capital investment to replace components on lifecycle and condition rather than on asset failure, such as Boilers



FINANCIAL DASHBOARD AS AT JUNE 2026

RENT & CHARGES DEBT

HRA Income	
Overall Income Due	£13,414,198
HRA Income	£12,518,062
Rent Roll	£13,075,355
Percentage rent collected of rent due	93.32%
Percentage rent collected of rent due excl. arrears b/fwd	95.74%

SCH Income	
SCH Rents collectable	not available
SCH income of rent due	
SCH Collection percentage	

HRA Arrears	Total HRA Debt £	Impairment Required £
05-Apr-26	4,897,466	3,859,024
03-Jul-26	5,513,253	4,152,711
Increase/ (Decrease)		**293,687**
Add: Net Write offs YTD		-
TOTAL CHARGE TO DEBT IMPAIRMENT		**293,687**
Budget available (revised per draft 26/27 HRA MTFS)		896,000

SCH Arrears	Total SCH Debt £	Impairment Required £
31-Mar-26	129,275	121,727
03-Jul-26	130,414	113,854
Increase/ (Decrease)		**(7,873)**
Add: Net Write offs YTD		-
TOTAL CHARGE TO DEBT IMPAIRMENT		**(7,873)**
Budget available		20,000

ACCOUNTS RECEIVABLE DUE DEBT

As 3-Jul-26	Current (0-30)	31-60	61-90	91-180	181-365	365+	Total Due	% of Due Debt
Council Debtors	£ 4,560	£ 475,194	£ -	£ -	£ -	£ 173	**£ 479,927**	*91%*
Other Debtors	£ 1,354	£ 4,875	£ 351	£ 7,504	£ 6,332	£ 25,740	**£ 46,156**	*9%*
Total AR Debtors	£ 5,914	£ 480,069	£ 351	£ 7,504	£ 6,332	£ 25,913	**£ 526,083**	

At 31-Mar-26

Council Debtors	£ -	£ -	£ -	£ -	£ -	£ 173	**£ 173**	*0%*
Other Debtors	£ 629	£ 2,120	£ 1,368	£ 3,066	£ 7,698	£ 21,914	**£ 36,794**	*100%*
Total AR Debtors	£ 629	£ 2,120	£ 1,368	£ 3,066	£ 7,698	£ 22,087	**£ 36,967**	

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Meeting of the Board

Report title:	Solihull Council Housing Tenancy Agreement	
Meeting date:	15 September 2026	
Report from:	Carol Trappett – Head of Housing & Neighbourhoods	
Report author/ lead officer:	Carol Trappett	Head of Housing & Neighbourhoods caroltrappett@solihull.gov.uk
Report type:	Open	
Decision type:	~~Assurance~~	~~Approval~~ Information

1. Report overview/purpose

1.1 This report sets out proposed changes to the Council's social housing tenancy agreement, which has been in place since 2012.

1.2 This change affects just under 10,000 council tenancies. The Council is the landlord for these homes, which are managed on its behalf by Solihull Community Housing (SCH).

1.3 The new agreement is a comprehensive modernisation reflecting legislation introduced since 2012 – including the Domestic Abuse Act 2021, the Fire Safety Act 2021, the Building Safety Act 2022 and the Social Housing (Regulation) Act 2023 – together with the Regulator of Social Housing's strengthened consumer standards, sector learning on damp and mould, and current operational risks.

2. Recommendations

2.1 The Board is asked to:

(1) Note the reasons why the tenancy agreement requires updating and modernisation
(2) Note that SMBC's Economic Development Managed Growth and Skills Scrutiny Board on 29 July approved progression to consult on the proposed changes
(3) Note that following statutory tenant consultation, a further report will be presented to a Cabinet Portfolio Holder decision making session for approval

3. Background

3.1 It is a legal requirement under the Housing Act 1985 to provide tenants with a written statement of the terms of their tenancy, including their rights and obligations, rents and other charges, and repair responsibilities. The same requirement applies under the Regulator of Social Housing's Tenancy Standard.

3.2 A tenancy exists even if a written agreement is not issued, but failure to provide the written particulars would place the Council in breach of statutory duty and amount to non-compliance with regulatory standards.

3.3 The current tenancy agreement has been in place since 2012 and reflected the legal, regulatory and operational environment then in force. While it has served the Council and its tenants well, the environment has changed substantially. In particular, the current agreement does not adequately reflect:

- The Fire Safety Act 2021, which clarified fire safety duties in multi-occupied residential buildings including fire doors
- The Building Safety Act 2022, which introduced a strengthened building safety regime, clearer resident responsibilities, and provisions supporting landlord access to undertake safety work
- The Social Housing (Regulation) Act 2023, which strengthened the consumer regulation regime, including the framework for Awaab's Law requirements relating to damp, mould and other hazards
- The Domestic Abuse Act 2021 and its statutory definitions
- Modern data protection requirements
- Emerging housing management issues, including hoarding, the use of CCTV and video doorbells, e-bikes, e-scooters and battery charging risks, mobility scooters, and more complex forms of anti-social behaviour including cyber harassment and social media related anti-social behaviour

3.4 The proposed revisions have also been informed by sector learning following high-profile building safety failures, damp and mould cases, and Housing Ombudsman findings, all of which have highlighted the importance of clear tenant and landlord responsibilities and effective arrangements for identifying and addressing risks within tenants' homes.

3.5 While many of these requirements are addressed operationally through policies and procedures, they are not adequately reflected in the current tenancy agreement. This reduces clarity for tenants and creates operational risk for SCH and legal and regulatory risk for the Council as the landlord.

3.6 The new agreement is therefore a comprehensive modernisation rather than a minor revision. It is written in plain English with a clear structure, including a quick guide for tenants, definitions, and a clear separation of tenant and landlord

responsibilities, and it aligns the contractual tenancy conditions with current legislation and housing policies.

3.7 A final legal review of the draft agreement is currently being undertaken prior to statutory tenant consultation, and any resulting amendments are expected to relate to drafting, clarification or legal precision rather than the overall approach reflected in the proposed agreement.

3.8 Importantly, the new agreement does not remove any statutory tenant rights. Existing legal rights relating to security of tenure, success, mutual exchange, right to repair, and right to buy remain protected in accordance with legislation.

4. Key Improvements in the New Agreement

4.1 A more accessible format: a quick guide summarising key information, clearer explanation of legal rights and tenancy types, and plain English definitions.

4.2 Stronger safety provisions, aligned with the Fire Safety Act 2021 and the Building Safety Act 2022; new sections covering fire safety responsibilities, building and communal area safety, clear spaces requirements, mobility scooters, and battery powered transport devices and hazardous materials and storage.

4.3 Modernised behaviour standards; additional provisions covering hate crime and harassment, domestic abuse (reflecting the Domestic Abuse Act 2021 definitions), abuse of staff and contractors, misuse of CCTV, video doorbells and other surveillance equipment, and tenancy fraud.

4.4 Greater clarify around enforcement; what happens when tenancy conditions are breached, how legal action may be pursued, circumstances where recharges may apply, and the Council's commitment to taking proportionate and reasonable action.

4.5 Updated rights and responsibilities; clearer information regarding mutual exchange, succession, lodgers and subletting, improvements and alterations, ending a tenancy, and rent and service charges.

5. Clarifying the Landlord Relationship

5.1 External feedback has recently indicated that some tenant-facing material does not make sufficiently clear that the Council is the landlord of these homes.

5.2 The new agreement addresses this directly. It explicitly identifies Solihull Metropolitan Borough Council as the landlord with SCH identified as the managing agent acting on the Council's behalf.

5.3 This supports compliance with the Regulator of Social Housing's Transparency, Influence and Accountability Standard, which requires landlords to be clear with tenants about who their landlord is and how their homes are managed.

6. What options have been considered and what is the evidence telling us about them?

6.1 Retaining the current tenancy agreement was considered and rejected. The agreement no longer reflects current legislation, regulation or operational risk, and continuing with it would leave the Council exposed to regulatory non-compliance and legal challenge.

6.2 A limited amendment of the existing agreement was also considered and rejected. The scale of legislative and regulatory change since 2012 – including the Fire Safety Act 2021, the Building Safety Act 2022 and the Social Housing (Regulation) Act 2023 warrants a full rewrite rather than a piecemeal revision and a rewrite provides the opportunity to significantly improve clarity and accessibility for tenants.

6.3 Retaining the current agreement would also mean tenants do not benefit from the improved clarity provided by the proposed agreement regarding safety responsibilities, reporting of hazards, access arrangements, standards of behaviour and the respective responsibilities of the Council as landlord and SCH as the managing agent.

7. Reasons for recommending preferred option

7.1 The new agreement modernises the contractual relationship between the Council and its tenants, reflects current legislation and best practice, and provides greater clarity for tenants and staff.

7.2 Adopting it will support compliance with current legal and regulatory requirements, strengthen the Council's ability to manage its homes safely and effectively, reduce the risk of disputes, complaints and legal challenge, and improve consistency between tenancy conditions, housing policies and operational practice.

8. Consultation and Scrutiny

8.1 Consultation to date has been undertaken with Solihull Community Housing service teams including Neighbourhood Services, Estate Services, Property Services and Building Safety. The SMBC Client Team for Housing and SMBC Legal Services have also been consulted.

8.2 It is a statutory requirement under the Housing Act 1985 to consult all secure tenants on significant changes to the terms of their tenancy. An 8-week consultation will be undertaken, likely to operate from end of August to end of October.

8.3 Feedback from the consultation will be considered and a further report, incorporating any proposed final amendments, will be presented to a Cabinet Portfolio Holder decision-making session for approval.

8.4 Subject to approval, the new terms and conditions will be brought into effect through the statutory variation process, with all tenants adopting the new agreement from April 2027. This aligns implementing with the start of the new financial year and the annual rent-setting cycle. There is no statutory requirement for tenants to sign a new tenancy agreement.

9. Financial implications

9.1 The financial implications are predominantly linked to consultation. Budgets have been appropriately allocated for 2026/27 to accommodate consultation costs, in the region of £18-£20k.

10. Legal implications

10.1 Variation of secure tenancy terms must follow the statutory procedure in sections 102 and 103 of the Housing Act 1985, comprising a preliminary notice inviting tenant comments, consideration of those comments, and service of a notice of variation.

10.2 SMBC Legal Services have been actively involved in reviewing the proposed tenancy agreement. The agreement remains subject to final legal review before consultation. Any amendments arising from the consultation process will also be subject to legal review before the final agreement is presented for approval.

11. Risk Implications

11.1 Risks relate to tenant perception of increased enforcement or a ‘tightening’ of rules, and resistance to new provisions particularly around safety and communal areas. These risks will be mitigated through clear and accessible communication and ongoing tenant support and engagement during implementation.

11.2 The new agreement reduces the risk for the Council compared with the current agreement; clearer drafting reduces ambiguity; enforcement and recharge provisions are more defensible; and the agreement aligns with current legislation including the Domestic Abuse Act 2021, the Fire Safety Act 2021, the Building Safety Act 2022 and the Social Housing (Regulation) Act 2023. It also improves consistency between tenancy conditions, housing policies and operational practice.

11.3 While safety matters are managed through policies, procedures and operational practice, retaining the current agreement would mean tenants do not benefit from the clearer expectations and responsibilities, reporting hazards within the home and access arrangements for inspections and repairs.

12. Equality Implications

12.1 A Fair Treatment Assessment has been completed in conjunction with SMBC's Equality and Diversity Team and will be updated following full tenant consultation to ensure tenant feedback and comments on the proposals are taken into account.

13. List of appendices

- Appendix A – Current tenancy agreement
- Appendix B – New proposed tenancy agreement
- Appendix C – Comparison table of changes
- Appendix D – Fair Treatment Assessment

Your Tenancy Agreement

Solihull Community Housing
Shaping our neighbourhoods

Solihull Metropolitan Borough Council

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1. Welcome to your new home

This agreement explains the conditions of your tenancy and says what we must do as your landlord, and what is expected of you as our tenant.

There is a list of definitions at the end of this tenancy agreement to help you understand it. If you do not understand a part of or all of the agreement, you should ask us to explain it more fully to you. Alternatively you may wish to contact a Housing Advice Centre, a Law Centre, Citizens Advice Bureau or a Solicitor to get independent advice.

You can contact us by:

- Filling in the form on our website www.solihullcommunityhousing.org.uk
- Phoning 0121 717 1515,
- Sending a text message to 07781 474 722,
- Writing to us at Freepost RLSS-UEBA-RTUZ, Solihull Community Housing, Endeavour House, Meriden Drive, Solihull, B37 6BX, or
- Calling into a Solihull Connect or area housing office.

Becoming a tenant means that you take on certain responsibilities both to us, as your landlord, your neighbours, and to the wider community, in which you live. You should think very carefully about signing this tenancy agreement and make sure you understand what it says.

If this is a joint tenancy, each of you is responsible for keeping to all the conditions in this agreement. Even if one tenant leaves the home, the other tenant must still keep to these conditions, which include continuing to pay the rent.

If you are a new tenant then during the first year of the tenancy we will regularly review how you are doing. This is known as the ‘probationary period’. If you have any problems maintaining your tenancy during the probationary period or you have breached the terms of this agreement, we may end the tenancy and ask you to move out. As an alternative to ending the tenancy we may instead extend the probationary period by a further 6 months if we consider it is appropriate and fair to do so.

If at the end of the probationary period we are satisfied that you are able to maintain your tenancy, this agreement will continue. However this is subject to any right you or we have to end this agreement early or any fixed-term ends.

We are committed to ensuring that your home and the services we provide are of high quality. We want you to live in a peaceful neighbourhood free from anti-social behaviour. We expect you to look after your home and to treat your neighbours in the way you would like to be treated. You must pay your rent and any service charge on time.

If we do not meet our responsibilities under this agreement you must tell us about it and give us the opportunity to put things right. Equally, if you break your side of the agreement we will tell you what has gone wrong and give you a chance to put things right. If you fail to take this opportunity then we may take legal action and you may

lose your home or your tenancy may be demoted. We feel this firm approach means all local residents can live happily in their homes.

In developing our services, we work very closely with tenants. If you would like to be involved in taking decisions which affect where you live, please telephone the Customer Engagement Team on 0121 717 1515 to find how you can become involved.

We hope you enjoy living in your new home.

2. Types of Tenancy

There are five types of tenancy that we operate. The front cover (called a schedule) to this tenancy agreement explains the type of tenancy that you have been offered.

2.1 Introductory tenancies

If you have an introductory tenancy your tenancy will last for 12 months (unless we extend the probationary period by 6 months). At the end of the introductory tenancy, your tenancy will become a secure tenancy, which may be for a fixed term. If you break the conditions of your introductory tenancy we will carefully consider what action to take and it is possible you will be evicted from your home.

2.2 Introductory tenants do not have the same rights as a secure tenant. This means that you are not allowed to buy your home, vote to change your landlord, exchange your home (mutual exchange), take in a lodger, assign your tenancy, sublet, or make any alterations to your home unless there are exceptional circumstances.

2.3 Starter tenancies

If you have a starter tenancy your tenancy will last for 12 months (unless we extend the probationary period by 6 months) and will be an assured shorthold tenancy. At the end of the starter tenancy your tenancy will become either an assured tenancy or an assured shorthold tenancy for a fixed term.

2.4 If you break the conditions of your starter tenancy we will carefully consider what action to take and it is possible you will be evicted from your home.

2.5 As a starter tenant you do not have the same rights as an assured tenant. This means that you are not allowed to buy (acquire) your home, vote to change your landlord, exchange your home (mutual exchange), take in a lodger, assign your tenancy, sublet, or make any alterations to your home unless there are exceptional circumstances.

2.6 Secure tenancies

If you have a secure tenancy your rights are set out in the Housing Act 1985. We will not interfere with your right to live in your home unless we have to take legal action to end your tenancy because you have broken any of the conditions of this tenancy agreement or we serve you with a notice to demote your tenancy. However, we are not allowed to evict you from your home or demote your tenancy without proving our case in court and obtaining a court order to do so.

2.7 Assured tenancies

If you have an assured tenancy your rights are set out in the Housing Act 1988. We will not interfere with your right to live in your home unless we have to take legal action to end your tenancy such as if you have broken any of the conditions of this tenancy agreement or we serve you with a notice to demote your tenancy. However, we are not allowed to evict you from your home or demote your tenancy without proving our case in court and obtaining a court order to do so.

2.8 Fixed-term (flexible) tenancies

If you have a fixed-term tenancy your rights are set out in the Housing Act 1985 (council tenancies) or the Housing Act 1988 (Solihull Community Housing tenancies) as modified by the Localism Act 2011.

2.9 The tenancy will typically last for either 2 or 5 years, depending on your circumstances. The schedule attached to this agreement will tell you how long this agreement is for.

2.10 During the fixed term we will not interfere with your right to live in your home unless we have to take legal action to end your tenancy such as if you have broken any of the conditions of this tenancy agreement. Before the end of your tenancy we will review your housing need and the way you have conducted your tenancy. If we decide to renew your tenancy we will grant you a further tenancy.

2.11 We will tell you at the review meeting what tenancy you will be offered.

2.12 As a fixed-term tenant you do not have the same statutory rights as a secure or assured tenant. However, we have contractually extended many of the rights you would have had. It is therefore important that you read this agreement carefully so that you know what your rights are and what is expected of you as our tenant.

3. General Terms

This section applies to all types of tenancy.

3.1 Rent

You pay a weekly rent for your home. This includes payment for basic rent and any service charges as stated in the schedule to this agreement. The service charge is based on the amount we expect to spend on services during the coming year. You pay the weekly service charge at the same time as the basic rent.

3.2 You must promptly pay your rent and any other charges due as notified to you by us.

3.3 You must not withhold any rent or other charges that you are liable for.

3.4 In the first year of this agreement, we may change the rent by giving you not less than one calendar month's notice in writing.

3.5 After the first change in rent (see clause 3.4 above), we may increase your rent by giving you not less than one calendar month's notice in writing. The notice will set out the rent proposed.

3.6 For the purposes of section 3.5 of this agreement (above) we will follow the procedure set out in either section 13 of the Housing Act 1988 (Solihull Community Housing tenants) or section 102 of the Housing Act 1985 (Council tenants).

3.7 Any debt, including rent, from a previous tenancy must be paid in full unless we have agreed a repayment schedule with you. Failure to maintain payments as agreed will be taken as a breach of this Agreement.

3.8 We may collect water rates on behalf of Severn Trent Water PLC and where this applies it is collected as part of the rent and may be changed by written notice.

3.9 Fuel charges, where they apply, are collected as part of the rent and may be changed by written notice.

3.10 If we temporarily move you from your home to another property, you remain liable for paying the rent and any other charges at this property.

3.11 If you receive Housing Benefit it is your responsibility to tell the housing benefit department immediately if your circumstances change.

3.12 If you are a joint tenant you are both jointly and separately responsible for paying the rent and other charges due. This means that we can ask either of you to pay the full amount due and any arrears even if one of you has left the property.

3.13 We operate a 50-week rent collection period, which allows two rent-free weeks unless you are behind with your scheduled payments or have rent arrears. You must continue to make payments and pay off any arrears during the rent-free weeks.

3.14 No adjustment by way of a refund will be made if you stop being a tenant before a rent-free week.

3.15 It is your responsibility to meet all outgoings for the property, such as council tax, water, gas and electric, for which you, as the tenant, are responsible.

3.16 If you have made any advance rent payments (known as credits) on your previous home's rent account we will add the credit to your current rent account to the oldest liability first (this is known as crediting your account).

3.17 If you leave your home to become our tenant in another home we will also be entitled to use all rent payments made on your new home to pay off any arrears on your old home. We will also be entitled to use any rent credits you have built up on your old home to cover the rent of your new home.

3.18 We can reduce the rent at any time.

3.19 Service Charge

You must pay any service charge due as part of your weekly payment, in addition to your rent. The service charge is your share of the cost of providing the services set out in the attached schedule to this tenancy agreement.

3.20 The schedule identifies what tenancy you have been offered and what you are likely to be offered after any probationary period (if you keep to the terms of this agreement and are able to satisfactorily manage your tenancy), together with the basic rent and what services you are required to make a payment for. The service charge is variable.

3.21 We may increase or decrease the service charge by giving you at least one months' notice of the change in writing.

3.22 For the avoidance of doubt, the service charge is part of the rent and will be varied using the procedure in section 3.6 of this agreement.

3.23 Tenancy Reviews

If you are an introductory, starter or fixed-term tenant we will review your tenancy before the agreement ends.

3.24 Introductory and starter tenants are required to participate in the tenancy reviews. Tenants who do not participate in the review process will be in breach of this agreement. This may result in possession proceedings being brought against the tenant or a decision that the probationary period should be extended.

3.25 The review will consider, for example, whether the rent is being paid, the continuing needs of tenants (such as whether the home has more bedrooms than needed), or any problems that might have arisen during the tenancy. You will find a list of review criteria in the Local Tenancy Strategy and Tenancy Policy. Both policies are available to view on our website www.solihullcommunityhousing.org.uk.

3.26 Possible outcomes of a tenancy review are:

- You may be given a new tenancy and stay in your current home.
- You may be given a new tenancy in a different home (for example, you may need fewer bedrooms).
- You may be given a ‘lifelong’ secure tenancy and stay in your current home.
- You may be given a ‘lifelong’ secure tenancy and moved to a different home.
- You may be given notice that your tenancy is being terminated, or
- We may give you notice to extend the probationary period for six months.

3.27 Altering this agreement

We may vary the other conditions of the tenancy by giving you a minimum of four weeks written notice of the variation. Before doing this, we will first invite your comments on the proposed change and take any comments you make into consideration.

3.28 Section 3.27 (above) does not apply to a term of a tenancy which is implied by an enactment.

3.29 For the purposes of section 3.28 (above) an enactment includes an enactment comprised in subordinate legislation (within the meaning of the Interpretation Act 1978).

3.30 Data Protection

As a data controller, we will handle details we have about you in line with current data protection legislation and our policies, which may change, for the purpose of managing your tenancy.

3.31 Your information may also be shared with other council services and partner organisations to ensure our records are kept accurate and to help us identify services or benefits you may be entitled to or interested in. We may also need to share your information for the prevention and detection of fraud and / or other crimes or as the law requires. For further information about how we use your information please refer to Solihull Community Housing's Privacy Statement on www.solihullcommunityhousing.org.uk/ or contact by email: info@solihullcommunityhousing.org.uk or telephone: 0121 717 1515

3.32 In line with data protection legislation, we will allow you reasonable access to other personal information that we have about you or members of your family. This will not apply if other people have given us this information about you in confidence. There may be a small administrative charge to cover our reasonable costs.

3.33 Notices to you

You agree that we may serve notices (including notices of legal proceedings) or other formal communication arising from this agreement on you either personally or by posting them to or leaving them at your home (if different) to your last-known address.

3.34 Right to fix wires etc.

We have the right to:

- Erect, attach, fix and maintain any wires, poles, brackets, fixtures and fitting in, over or upon your home for the purpose of supplying radio and television service to any property;

- Install and maintain or improve in your home and in the shared areas, cables, wires, fixtures or other equipment for provision by us of emergency alarm or security systems.

4. Our Responsibilities

4.1 Repairs

We will maintain the outside and structure of your home. This includes:

- Drains, gutters, sewers and external pipes (except where the drains and sewers are the responsibility of a water company, when defects will be reported to that company);
- The roof;
- Outside walls, outside doors, windows, windowsills, window catches, sash cords, window frames, including necessary outside painting and decorating; internal walls, floors, ceilings and skirting boards, but not including internal painting and decoration or minor repairs to plaster that you could carry out in the course of preparing for decoration;
- Chimneys, chimney stacks, annual service of solid fuel systems and flues but not including sweeping;
- External plasterwork and rendering;
- Integral garages and stores;
- Boundary fencing but not dividing fencing.

4.2 We will keep in repair and proper working order any installations we provide for heating, water heating and sanitation and for the supply of water, gas and electricity within your home. This includes:

- Basins, sinks, baths, toilets, flushing systems and waste pipes, water pipes, taps and stop taps;
- Electric wiring including sockets, light fittings and switches; water heaters, fireplaces, fitted fires and central heating installations and gas pipes;
- Shared fire alarm systems;
- Shared door entry systems;
- Mains-wired pull cord systems;
- Mains-wired smoke detectors (where applicable);

- Battery operated smoke detectors, which we installed (where this applies you are responsible for maintaining batteries that work).

4.3 We are not responsible for providing or repairing gas, electricity or water meter cupboards. Nor will we pay for the provision of or repair meter cupboards.

4.4 We are not responsible for repairing or replacing damaged items resulting from deliberate damage, neglect or carelessness by you, members of your household, visitors to your home or pets.

4.5 Subject to any service charge payable by you (if any) we will keep any communal entrances, halls, stairways, lifts, passageways, rubbish chutes and any other shared areas including their electric lighting in reasonable repair and fit for use by you and other occupiers and visitors to your home.

4.6 Anti-social behaviour and harassment

If you report antisocial behaviour, including noise nuisance, to us we will provide advice and assistance to help you resolve the situation. We will do all that we can to help and support you. We will record and investigate all reports of serious antisocial behaviour and we will visit you to tell you about any action we agree to take.

4.7 We will act straight away to deal with any incidents of harassment and will always help and support you. In cases of harassment, including racial harassment and hate crime, one of our officers will contact you and arrange to visit you.

4.8 Consultation

We will consult you or your representative if you are likely to be substantially affected by any proposed changes in, or additions to, our housing management services and maintenance (other than amounts charged for rents, service charges and water).

4.9 We will publish a summary of the rules for deciding priority in allocating housing, including transfers and exchanges and publish information at least annually about tenancies; housing management performance indicators, policies, complaints procedure and details of the Independent Housing Ombudsman.

4.10 In providing a housing service we will have regard to the appropriate regulatory framework and guidance issued by the Government or Social Housing Regulator, but neither the framework or guidance form part of this agreement.

4.11 We will provide you with information about how to use your home and gain access to our services when you need to.

5. Your Responsibilities

5.1 Use of premises

You must take possession of the property at the start of the tenancy and not part with possession of the property or sublet the whole of it. If there are joint tenants at least one of you must occupy the property as your only or principal home.

5.2 You or someone on your behalf must tell us as soon as practicable if you will be away from the property for more than 28 days, for any reason, so that we know you have not abandoned your home. If you do not tell us that you are going away and we are of the opinion that you have ceased to occupy the property as your only or principal home we may serve you with a notice to quit and change the locks.

5.3 You must not run a business from your home without our written consent and any planning or other consents that you may need from the Council or other relevant agencies. We will not usually refuse permission unless we feel that the business is likely to cause a nuisance to other people or damage the property. If, after we have given permission, we can give you notice withdrawing our permission.

5.4 You must not fix to or display on your home any notice, advertisement, sign or board on the outside of the property or inside the property so that it is visible from the outside without getting our permission beforehand and any relevant planning permission.

5.5 You must not damage deface or put graffiti on your home or any part of our property.

5.6 If you occupy a flat you must co-operate with us and your neighbours to keep communal areas clean, tidy and clear of any obstructions.

5.7 Overcrowding

You must not allow your home to be occupied by more people than are permitted by law.

5.8 Internal decoration

You must keep the inside of your home and any of our fixtures and fittings in repair. You must also keep your home in a good state of decoration, allowing for fair wear and tear. You must decorate all internal parts of your home as often as necessary to keep them in reasonable decorative order.

5.9 You must not damage your home. If you do, you must repair or replace anything belonging to us that has been damaged deliberately, accidentally or by neglect or that of a member of your family or your household guests to your home, whether invited or not. This does not include normal wear and tear.

5.10 If you do not repair the damage for which you are responsible, we may carry out the repairs and charge you for our costs for doing this.

5.11 If you, members of your household or guests to your home (whether invited or not) cause damage to neighbouring properties, whether deliberate or accidental, you are responsible for this repair. If you do not repair the damage for which you are responsible, we may carry out the repairs and charge you for our costs of doing this.

5.12 You must obtain our written permission before laying any hardwood/laminate flowing in your home. Careful consideration will be given to each request but other than in exceptional circumstances, permission is unlikely to be given if the premises are above the ground floor.

5.13 Minor repairs

You are responsible for doing minor repairs and replacements such as replacing broken glass (broken by you, your family, visitors or pets), locks, light bulbs, plugs, blocked sinks and washbasins, and tap washers as quickly as possible.

5.14 Access

You must allow us, our agents, contractors or workmen acting on our behalf to enter the property at all reasonable times for the purposes of inspecting the condition of your home, carrying out repairs, cleaning and removing items posing a potential health risk, disinfestations, improvements, alterations or other works to your home or adjoining property, carrying out a gas safety inspection or service. We will give you a minimum of three days notice, in writing.

5.15 You must give us access at least once every calendar year so that we can inspect gas installations and flues. If you do not give us access, we may take legal action against you for breach of your tenancy.

5.16 If an emergency arises or we believe that there is an imminent risk to any person or property, we have the right to enter your home at any time without notice using reasonable force, if necessary, and carry out any work to your home, your neighbour's home or to any communal parts near to your home.

5.17 If after we have given you reasonable notice (or in an emergency we believe that there is an imminent risk to any person or property) you restrict access to your property, we may take court action against you to gain access. We may ask the court to make an order for costs against you, including solicitors/barristers fees, the court fee and any other reasonable expenses incurred.

5.18 Improvements, alterations and additions

You may make improvements, alterations and additions to your home, including putting up aerials, external decoration and additions or alterations to our installations, fixtures and fittings as long as you get our written permission first and all necessary approvals (for example, planning permission or building regulations approval) beforehand.

5.19 We will not unreasonably refuse your request. All improvements must be done to our satisfaction. Any alterations or improvements will normally become our property when the tenancy is ended. Alternatively, at the end of your tenancy we may ask you to remove, at your own expense, any structures you have added, and make good to the fabric of the building.

5.20 Introductory and starter tenants do not have the right to carry out any alterations or improvements to their home.

5.21 You must not tamper with or damage gas or electricity supplies, meters, smoke detectors or any other equipment provided to or at your home.

5.22 If you wish to build your own shed, external store, walls or put up fences, you must get our permission in writing before doing so and you will be responsible for their maintenance in the future.

5.23 Reporting disrepair

You must promptly report to us any repairs needed that we are responsible for.

5.24 Gardens

You must keep any garden let to you as part of your tenancy in a reasonably tidy and cultivated condition and free of rubbish. If we have to clear any rubbish we will charge you with the cost of this work as extra rent.

5.25 You must not put up a shed, garage or greenhouse without getting our written permission first.

5.26 Except for routine trimming and pruning, you must not remove, alter or replace any hedge, fence, wall or tree at the property without our written permission.

5.27 You must not store any rubbish, furniture or appliances in the garden of the property. If you do we may have to remove the items and we will charge you with the cost.

5.28 You should keep any hedge around your garden maintained to a reasonable height and condition and not obstruct any footpath.

5.29 Rubbish collection

You must dispose of rubbish in line with council guidelines and instructions. You must comply with the requirements of the council in relation to putting your bins out for collection and you must take them in the same day as they are emptied. If recycling bins are provided, you must use them in accordance with council guidelines and instructions.

5.30 You must keep the property clean and tidy including any balcony. If we have to do work to bring it back to a reasonable standard, such as removing rubbish, we will charge you for this.

5.31 You must keep all shared areas such as entrances, stairways, corridors and landings clean and free from obstructions. You should not leave any personal belongings or rubbish in these areas. If we have to remove anything in these areas we may charge you with the cost of this work as extra rent.

5.32 You must keep washing and drying areas and any other shared areas clear of rubbish and obstacles.

5.33 Hazardous substances

You must not store dangerous, hazardous, flammable or explosive materials, liquids, gases or tools in your home or in any communal areas.

5.34 You must not keep or use liquid petroleum gas, paraffin or petrol in flats or communal areas.

5.35 Your neighbourhood and your behaviour

You, your family, friends and relatives or anyone living with or visiting you (including children) must not do any of the following:

- Anything which causes or is likely to cause a nuisance or annoyance to anyone in the local area;

- Anything which interferes with the peace, comfort or convenience of other people living in the local area;
- Harass or threaten to harass or use or threaten violence towards anyone in the locality of your home or the local area;
- Harass or threaten to harass or use or threaten violence towards our staff, agents or contractors or any tenant representatives;
- Use or threaten violence towards anyone living in the property;
- Use record players, radios, televisions, CD players, amplifiers, loudspeakers or musical instruments of any kind in a way that will annoy people, or so they can be heard outside the property;
- Use any domestic machinery or DIY equipment in such a way or at such times (e.g. at night or early in the morning) that it causes nuisance and annoyance to other people.

5.36 We may take legal action to evict you if you behave anti-socially or you are convicted of a crime committed at the property or in the locality.

5.37 You must not place any item or allow any item or items to be placed in such a position (either inside or outside of your home) so that access to and from your home or to and from any neighbouring property or land is restricted.

5.38 ## Harassment

You, your children, friends, relatives, any other person living in your home and visitors must not harass or threaten to harass or do anything that is likely to disturb or cause offence to any person on the grounds of their race, colour, ethnic or national origin, their religion, age or gender or sex or because of any disability they may have.

5.39 ## Domestic violence

You must not threaten or commit acts of domestic violence on any members of your household while in your home or neighbourhood.

5.40 **Illegal activities**

You must not use the property for any criminal, immoral or illegal purpose including selling, supplying or using any illegal drugs, storing or handling stolen goods or prostitution.

5.41 **Pets and other animals**

Tenants are responsible for the health and welfare of their pets. Under the Animal Welfare Act 2006, this is called a duty of care. This requires proper day-to-day management and care of the pet. If tenants have any questions about the care of their pet they should contact their vet.

5.42 You must not keep any animal that is prohibited by law, including any dog identified under the Dangerous Dogs Act 1991.

5.43 Any pets and animals that you keep in your home must not cause damage to your home and/or a nuisance to your neighbours and/or their lawful visitors.

5.44 The control of your pets and any pets visiting the property are your responsibility. If cats are allowed free access outside then you must take steps to ensure that they do not cause a nuisance to your neighbours.

5.45 Dogs must always be kept under control and on a lead when in public areas. They must never be allowed outside your property on their own - this includes communal balconies and stairwells. Dog faeces must always be removed immediately.

5.46 You must not install any large fish tank(s) or any large pet enclosures without getting written permission first. The purpose of this condition is to avoid structural damage being caused to your home as a result of weights being too heavy for your home to bear.

5.47 **Insects and vermin**

You must not do anything that encourages insects, pests or vermin into your home, or that could cause a health risk to you or others. If we consider that there is a health risk we may enter your home in order to rectify the situation. If you do not allow us to enter your home we may ask a court to allow us to enter without your permission.

5.48 **Vehicles and parking**

You, your family, friends or anyone living with you or visitors to the property must not do any of the following:

- Park a vehicle anywhere on the property unless it has a garage, parking space or driveway with hard standing and a dropped kerb;

- Park any vehicle on any land owned by us without a valid road fund licence or in an un-roadworthy condition;

- Park on land owned by us, except where it is designated for parking;

- Build a parking space, garage or drive without our written permission;

- Park such as to block roadways, grass verges, drives, footpaths or other vehicle or pedestrian access;

- Park caravans, trailers, boats or a business vehicle of over 1 tonne in weight at the property or on any land owned by us. If we have to remove such a vehicle we will give at least 24 hours' notice and will charge you for the cost of this and any costs of storage.

- Park without a valid permit, either for residents or their visitors, where there is a parking scheme in operation;

- Carry out repairs except running repairs to your vehicle. Where we believe you may be receiving payment for repairs we may ask you to prove that the vehicle belongs to you. Should any damage be done as a result of such repairs we may carry out work to make this good and charge you with the cost as extra rent;

- Sell, rent or give away any parking space or garage which we provide for you;

- Double park or park in such a way that you obstruct other vehicles or pedestrians.
- Where a proper place for parking is not provided, you should park on the road immediately outside the property, if parking is available and subject to any parking restrictions.

5.49 By signing this agreement you authorise us to remove any vehicle that you leave abandoned on the property, which breaks these conditions, or which we think has been abandoned or is dangerous.

5.50 You will be liable to pay our expenses or our contractors expenses for removing and disposing of any such vehicle.

5.51 **Local agreements**

You must comply with any local regulations applying to the estate or block where your home is. We can make local regulations or agreements after consulting any local tenant representatives; and we can change them from time to time after consultation. We will supply a copy to every tenant affected.

5.52 **Assignment (transfer)**

Assignment is not allowed except by way of mutual exchange, a court order in certain matrimonial, civil partnership or Children Act proceedings or to a person eligible to succeed to the tenancy.

5.53 A probationary tenancy cannot be assigned except in connection with matrimonial proceedings, Children Act proceedings or to a person who would be qualified to succeed the tenant if the tenant died immediately before the assignment. This also applies to a tenancy, which is not a probationary tenancy but would be if the tenant was occupying or continuing to occupy the property as their only or principal home.

5.54 We will only refuse permission to assign on one of the grounds listed in this agreement.

5.55 One joint tenant cannot assign their tenancy to the other joint tenant.

5.56 An assignment to a child is not permitted other than by way of a court order.

5.57 **Ending your tenancy**

If you wish to end the tenancy you must give us a minimum of 4 weeks' notice in writing beginning with the date on which the notice is served us. You must also include a forwarding address or contact address.

5.58 If there are joint tenants, any one of the joint tenants can end the tenancy and we will decide if any of the other joint tenants can stay in the home.

5.59 We may accept less than 4 weeks' notice in exceptional circumstances.

5.60 If you have a fixed-term tenancy we may dispense with the requirement that the notice be given in writing.

5.61 The tenancy will end on the date specified in the notice or (as the case may be) determined in accordance with arrangements made under sections 5.57 or 5.58 (above) of this agreement. If you have a fixed-term tenancy this agreement will only end on the date given in the

notice if on that date no arrears of rent are owed to us, and you are not otherwise materially in breach of a term of this agreement.

5.62 You must give us vacant possession of and return all the keys on or by the agreed termination date or the end of the tenancy. If the keys are not returned we will secure access to the property and change the locks. We will charge you for the reasonable costs of securing the property against re-entry.

5.63 The property must be left in a clean condition, clear of all rubbish, and free of your furniture and possessions.

5.64 If you install any fixtures, most of these will become our property, which you must not remove when the tenancy ends. If there is an item you wish to take with you, then you must obtain our permission before you remove it. If you remove fixtures, you may be charged the cost of them being replaced.

5.65 We will take steps to recover from you any reasonable costs we incur in replacing or repairing any missing or damaged items, replacing or repairing any alterations which do not comply with relevant regulations, replacing or repairing any alterations for which we did not give our written consent, meeting all reasonable removal and/or storage charges when items are left in the premises after the termination date, cleaning the property.

5.66 We will store any items left in the premises after the termination date for a maximum of 28 days. We will notify you at your last known address. If the items are not collected within 28 days period we will dispose of them and you will be liable for our reasonable costs of disposal.

5.67 In the event of your death, your next of kin or executor must notify us in writing of your death and terminate the tenancy. The tenancy will continue until we receive notice and failure to terminate the tenancy may incur further costs against your estate including unpaid rent.

5.68 If you go to court because of a divorce, a domestic dispute or a relationship breakdown, the court will decide whether to order the transfer of the tenancy to one or other of the partners. The tenancy rights will end for the other person who must leave the property.

5.69 You must allow us, or any person authorised to act on our behalf, access to view the property within the last 28 days of your tenancy and during normal working hours, for the purposes of accompanying a prospective tenant. We will give you at least 24 hours' notice in writing for these visits.

5.70 Termination of this tenancy agreement does not affect any other right or remedy that either party may have in relation to any earlier breach of this tenancy agreement.

5.71 Absence from your home

You must tell us in writing and in advance if you leave your home for a period of over four weeks (28 days). You must provide a contact address; return date and the name of anyone looking after your home in your absence.

5.72 Notices

If a notice has been properly sent or delivered in accordance with this clause, it will be deemed to have been received as follows:

- First class post (or other service which provides for delivery on the next business day): on the second day after it was posted, left with, delivered to or collected by the relevant service provider provided that day is a business day; or if not, the next business day after that day.

- Document exchange: the second day after it was left with, delivered to or collected by the relevant service provider provided that day is a business day; or if not, the next business day after that day.

- Delivering the document to or leaving it at a permitted address: if it is delivered to or left at the permitted address on a business day before 4.30 pm, on that day; or in any other case, on the next business day after that day.

- Fax: if the transmission of the fax is completed on a business day before 4.30 pm, on that day; or in any other case, on the next business day after the day on which it was transmitted.

- Other electronic method: if the e-mail or other electronic transmission is sent on a business day before 4.30 pm, on that day; or in any other case, on the next business day after the day on which it was sent.

- Personal service: if the document is served personally before 4.30 pm on a business day, on that day; or in any other case, on the next business day after that day.

5.73 For the purposes of this Agreement “your home” means your last known address.

5.74 To prove delivery, it is sufficient to prove that:

- If sent by pre-paid first-class post, the envelope containing the notice was properly addressed and posted; or
- If sent by fax, the notice was transmitted by fax to the fax number of the party and a transmission receipt was received; or
- If sent by email, the notice was transmitted by email to the email address of the tenant and no notice of non-delivery was received; or
- If sent by Document Exchange, the envelope containing the notice or other communication was properly addressed and put into the Document Exchange.

5.75 If the party receiving a letter, notice or court proceedings consist of more than one person, a notice to one of them is notice to all.

6. Your Rights

6.1 Right to occupy

Unless a fixed-term tenancy has come to an end you have the right to live in your home during the tenancy without interruption or interference by us unless:

- We need access to your home to inspect it, let a prospective tenant view it, carry out repairs, or check any installation in your home, or
- You break any term of your tenancy agreement, or
- You stop occupying the property as your only or main home.

6.2 Right to take in lodgers and sub-let part of your home

If you are a fixed-term, assured or secure tenant you have the right to take in a lodger but you must get our written permission before they move in. We will not refuse permission unreasonably. You must not allow the property to become overcrowded.

6.3 Probationary tenants cannot take in a lodger unless there are exceptional circumstances. You must get our written permission before they move in.

6.4 If you are a fixed-term, secure or assured tenant you have the right to sublet part of but not the whole of your home. You must get our written permission beforehand. We will not refuse permission unreasonably.

6.5 Probationary tenants cannot sublet any part of their home unless there are exceptional circumstances. You must get our written permission.

6.6 Right to consultation

We will consult you before making changes in matters of housing management or maintenance, which are likely to have a substantial effect on you, your home or tenancy.

6.7 Right to information

We will tell you about the way we manage the homes we own or are responsible for. We will follow any guidance issued under legislation.

6.8 We are subject to guidance on housing management practice issued by the Homes and Communities Agencies or its successors with the

approval of the Secretary of State. We will also follow the Tenant's Handbook as amended from time to time.

6.9 Right to exchange

You have the right to exchange this tenancy with one of our tenants or with another registered social landlord or council tenant, provided you first obtain our written permission and get written permission from the other tenant's landlord. We can also attach conditions to our consent. If either party pays money or offers another incentive to any other party to obtain an exchange, this will be a breach of this agreement. You may then lose your home. You do not have this right during the probationary period (including any extension period). This is subject to part 9 of this agreement.

6.10 Right to succeed

If a joint tenant dies, the tenancy will pass to the other joint tenant [this is called survivorship] and will count as a succession.

6.11 By law there is only one right to succession so a second succession is not possible.

6.12 If a sole tenant dies, the tenancy will automatically pass to the tenant's spouse or civil partner or a person living with the tenant as their spouse or civil partner at the time of death unless the deceased tenant succeeded to the tenancy.

6.13 If the tenancy does not pass to the tenant's spouse or civil partner or a person who was living with the tenant as their spouse or civil partner, we will consider whether to offer a new tenancy of the property or of another property to a member of their family or anyone who was living with the tenant before their death.

6.14 A person is a member of the tenant's family if they are their grandparent, child, grandchild, brother, sister, uncle, aunt, nephew, niece, step-relative or adopted child.

6.15 All claims to succeed to the tenancy must be made to us in writing within three months of the death of the tenant.

6.16 Right to acquire

You may have the right to acquire your home unless you live in housing excluded from this right by law. You do not have this right during the probationary period (including any extension period). Details are available on request.

6.17 **Right to buy**

If you are a 'qualifying person' (as defined in section 171B of the Housing Act 1985 (as amended)) you may have the right to buy your home. You do not have this right during the probationary period (including any extension period). Details are available on request.

6.18 **Right to repair**

You have the right to have qualifying repairs, which are our responsibility carried out in the timescales shown in the tenants' handbook. Where you have reported the need for a qualifying repair and we have confirmed this by sending a receipt to you but where we have, without good reason, failed to carry out the repair on time, you can request another contractor to complete the repair at no cost to you. Details are available on request.

6.19 **Right to compensation**

If the second contractor does not complete a qualifying repair on time you may be entitled to compensation. Details are available on request.

6.20 **Right to make improvements**

You may make improvements, alterations and additions to your home, including external decoration, fixtures and fittings, as long as you get our written permission and all other necessary approvals (for example, planning permission or building regulations approval) beforehand. When you move out we will ask you to pay the cost of putting right any alterations you have made to the property without our permission. You do not have this right during the probationary period (including any extension period).

6.21 **Right to compensation for improvements**

Depending on the type of improvements, you may be entitled to receive compensation for them if you end your tenancy. This will be explained further at the time you apply for permission to carry out the works. If a fixed-term tenancy comes to an end and another tenancy (of any description) is offered and accepted for the same property, then there will be no right to compensation for improvements.

6.22 **Security of tenure**

As long as you live in the property as your only or principal home we can only end the tenancy by getting a court order for possession. We may end your tenancy by giving you four weeks' notice in writing.

6.23 At any time during this tenancy, we may seek to end the tenancy by serving you with:

- A Notice Seeking Possession (secure tenants)
- A Notice of Proceedings for Possession (introductory tenants)
- A Notice of Forfeiture (fixed-term tenants)
- A Notice Requiring Possession (starter tenants and fixed-term assured shorthold tenants)
- A Notice of Seeking Possession (assured tenants)

Relying on one or more of the grounds for possession set out in this agreement.

6.24 We may decide to extend the probationary period of your tenancy. We will make this decision before the end of the first twelve months and will write to tell you the decision to grant the extension period. We may grant an extension period of up to six months. During this extension period you will continue to be either an introductory or starter tenant. You have the right to ask for a review of our decision.

6.25 If we serve you with a Notice of Proceedings for Possession, a Notice of Forfeiture or a Notice Requiring Possession, and we decide to go to court, you have the right to ask for a review.

6.26 When this tenancy is an assured or secure tenancy, we may seek a demotion order by serving you with a Demotion Notice. If this tenancy is demoted we may subsequently ask a court to make a possession order. You have the right to ask for a review of either decision.

6.27 Reviews

Probationary tenants have the right to request a review of a decision to extend the probationary period or to seek an order of possession.

6.28 A fixed-term tenant (or prospective fixed-term tenant) has the right to request a review of a decision to grant a fixed-term tenancy (whether or not on the coming to an end of an existing tenancy of any kind), or of a decision to serve a notice stating that, on the coming to an end of an introductory tenancy, it will become a flexible tenancy. The review may only be requested on the basis that the length of the term does not accord with our policy as to the length of the terms of the flexible tenancies we grant. A request for a review must be made within 21 days of the person concerned receives the offer or notice, or such longer period as we may in writing allow.

6.29 A fixed-term tenant has the right to request a review of our decision to seek an order for possession. A request for a review must be made within 21 days beginning with the day on which the notice is received.

7. Getting Permission

7.1 You must get our written permission before doing any of the following:

- Let anyone who you did not tell us about on your housing application move in with you for more than four weeks;
- Carry out any changes or improvements to the property;
- Put up a garage, shed or greenhouse in the garden;
- Build a parking space or drive;
- Remove, alter or replace any walls, fences, hedges or trees;
- Sublet any part of the property or take in a lodger;
- Exchange or transfer your home;
- Put up a satellite dish, radio aerial or TV aerial.

7.2 During the probationary period you do not have the right to do any of these things.

7.3 In any case where you have to get our written permission, we agree not to refuse permission unreasonably.

8. Grounds for Possession

The following are summaries of the only grounds and circumstances in which we will serve notice and seek to recover possession as set out in the relevant legislation detailed in Section 2 of this agreement. Please note that not all the grounds listed below are relevant to the types of tenancy that we currently offer.

8.1 You have eight weeks' or two months' rent arrears.

8.2 You have not paid the rent that is due.

8.3 You have persistently delayed in paying the rent that is due.

8.4 Any one or more of the conditions of this tenancy agreement have been broken or not performed.

8.5 You or anyone living in your home has caused the condition of your home to deteriorate.

8.6 You or anyone living in or visiting your home have caused or are likely to cause a nuisance or annoyance to anyone in the locality or you have been convicted of using your home for illegal or immoral purposes or of a serious criminal offence.

8.7 You or a person living in or visiting your home is guilty of conduct likely to cause nuisance or annoyance to the landlord, or someone employed in connection with their landlord's housing management functions, where the conduct relates to or affects those functions. There is no requirement for this conduct to have taken place within the locality of your home.

8.8 You or a person living with them has been convicted of an offence committed at the scene of a riot anywhere in the UK.

8.9 You, a member of your household or a person visiting the property has:

- Been convicted of a serious offence;
- You or a member of your household or a person visiting the property has been found by a court to have breached an injunction to prevent nuisance and annoyance;
- You, a member of your household or a person visiting the property has been convicted for breach of a criminal behaviour order;
- Your property has been closed under a closure order and the total period of closure was more than 48 hours;

- You, a member of your household or a person visiting the property have been convicted of a breach of a notice or order to abate noise in relation to your property under the Environmental Protection Act 1990.

8.10 Your home was occupied by you and your partner and your partner has left because of violence or threats of violence likely to be carried out by you to them (or a member of their family living in your home before they left) and we are satisfied that they are unlikely to return.

8.11 You or anyone living in your home have damaged any furniture provided under this tenancy agreement, causing it to deteriorate; and in the case of damage by a lodger or sub-tenant you have not taken the steps you should reasonably have taken to remove the lodger or sub-tenant.

8.12 Your home was let to you as a result of your employment with us and you are no longer in that employment.

8.13 The tenancy was granted to you as a result of you (or someone acting on your behalf) knowingly or recklessly making a false statement.

8.14 If the tenancy is passed under your will or if you die without making a will:

(a) We may bring proceedings to recover possession of your home within 12 months after your death or, if the court so directs, within 12 months after the date on which, in the opinion of the court, we became aware of your death;

(b) Where we have accepted rent after your death, this will create a new tenancy only if we agree in writing to a change in the amount of rent, or a period of the tenancy, or any other term of the tenancy agreement.

8.15 A fixed-term tenancy has come to an end.

8.16 At the end of the fixed term of an assured shorthold tenancy, we can end the tenancy using the procedure set out in section 21 of the Housing Act 1988 (as amended). The section 21 procedure requires us to serve you with two months' notice requiring possession before applying to court for a possession order. We are not required to rely on any ground for possession and a court hearing is not always required. Before serving the notice requiring possession we must also serve you with a notice at least six months before the end of the fixed term telling you why we are not minded to grant you a new tenancy when the term of the current tenancy expires.

8.17 For the purposes of section 8.16 above, the service of a section 21 notice is sufficient to act as activating any break clause in this agreement.

8.18 We can use the section 21 procedure outlined above to end a starter tenancy. We can serve you with a notice requiring possession at any time during the probationary period but the earliest we can enforce any order for possession made by the court is six months from the start.

8.19 If at any time the rent or any part of it is unpaid for 21 days after becoming payable (whether formally demanded or not), or at any time you fail to perform or observe any of your responsibilities in this agreement and/or at any time there may arise statutory grounds on which a court may make an order for possession, it shall be lawful for us or anyone duly authorised by us at any time thereafter to re-enter on the property or any part of it and this tenancy shall then terminate (but without affecting any right or remedy we may have against you in respect of any breach of your responsibilities in this agreement).

8.20 We may re-enter the property and end any tenancy if any of the following applies:

- The rent and/or other charges payable remains unpaid, wholly or in part, for 21 days after becoming due, whether formally demanded or not; or
- You do not use, or cease to use, the property as your only or principal home; or
- Any of your other obligations in this agreement is not complied with, or
- Any of the grounds for possession listed in Schedule 2 to the Housing Act 1985 or Housing Act 1988, which relate to secure and assured tenancies applies.

8.21 The tenancy was assigned to you, or to a predecessor in title of yours who is a member of your family and is residing in the property, by an assignment made by virtue of section 92 (assignments by way of exchange) and a premium was paid either in connection with that assignment or the assignment which you or predecessor himself made by virtue of that section.

8.22 ‘Premium’ means any fine or other like sum and any other pecuniary consideration in addition to rent.

8.23 The property forms part of, or is within the curtilage of, a building which, or so much of it as is held by us, is held mainly for purposes other than housing purposes and consists mainly of accommodation other than housing accommodation, and

- The property was let to you or a predecessor in title of yours in consequence of you or your predecessor being employed by us, or by a local authority, a development corporation, a housing action trust**,** an urban development corporation, or the governors of an aided school, and

- You or a person residing in the property has been guilty of conduct such that, having regard to the purpose for which the building is used, it would not be right for you to continue in occupation of the property.

- You are no longer employed by us, or by a local authority, a development corporation, a housing action trust**,** an urban development corporation, or the governors of an aided school, and the property is required for use by someone in the role formerly performed.

8.24 The property was made available for occupation by you (or a predecessor in title of yours) while works were carried out on the property which you previously occupied as his only or principal home and:-

- You (or predecessor) was a secure tenant of the other property at the time when you ceased to occupy it as his home,

- You (or predecessor) accepted the tenancy of the property of which possession is sought on the understanding that you would give up occupation when, on completion of the works, the other property was again available for occupation by you under a secure tenancy, and the works have been completed and the other property is so available.

8.25 The property is overcrowded, in such circumstances as to render you guilty of an offence.

8.26 We intend, within a reasonable time of obtaining possession of the dwelling-house to demolish or reconstruct the building or part of the building comprising the dwelling-house, or to carry out work on that building or on land let together with, and thus treated as part of, the property, and cannot reasonably do so without obtaining possession.

8.27 The property is in an area, which is the subject of a redevelopment scheme approved by the Secretary of State or the Housing Corporation, or Scottish Homes and we intend within a reasonable time of obtaining possession to dispose of the property in accordance with the scheme.

Or

Part of the property is in such an area and we intend within a reasonable time of obtaining possession to dispose of that part in accordance with the scheme and reasonably require possession of the property.

8.28 We are a charity and your continued occupation of the dwelling house would conflict with the objects of the charity.

8.29 The property has features which are substantially different from those of ordinary dwelling-houses and which are designed to make it suitable for occupation by a physically disabled person who requires accommodation of a kind provided by the dwelling-house and there is no longer such a person residing in the property, and we require it for occupation (whether alone or with members of his family) by such a person.

8.30 We are a housing association or housing trust which lets dwelling-houses only for occupation (whether alone or with others) by persons whose circumstances (other than merely financial circumstances) make it especially difficult for them to satisfy their need for housing, and either there is no longer such a person residing in the property or you have received from a local housing authority an offer of accommodation in premises which are to be let as a separate dwelling under a secure tenancy, and we require the property for occupation (whether alone or with members of his family) by such a person.

8.31 The property is one of a group of dwelling-houses which it is our practice to let for occupation by persons with special needs and a social service or special facility is provided in close proximity to the group of properties in order to assist persons with those special needs, there is no longer a person with those special needs residing in the property, and we require the property for occupation (whether alone or with members of his family) by a person who has those special needs.

8.32 The property is more extensive than you reasonably require and the tenancy vested in you by virtue of section 89 (succession to periodic tenancy), you being qualified to succeed by virtue of section 87(b) (members of family other than spouse), and notice of the proceedings for possession was served more than six months but less than twelve months after the date of the previous tenant’s death.

8.33 In this Agreement references to the landlord or us include any authority or body having an interest of any description in the property.

9. How we may take enforcement action against you

If you breach this agreement or commit acts of nuisance, Anti-social Behaviour, Harassment or domestic violence, we may use a range of enforcement action instead of or in addition to ending your tenancy.

Injunctions

We reserve the right to seek injunctions, including an injunction to prevent nuisance and annoyance, to require you to comply with, or to stop you breaching your obligations under this agreement. This includes, but is not limited to, giving us access to your home. This may be in addition to or as an alternative to any possession proceedings, under the grounds listed in this agreement. We may also claim damages and costs arising from any breach by you.

Anti-social Behaviour Order

We reserve the right to apply to court for an Anti-social Behaviour order (or similar), including a Criminal Behaviour Order (or its equivalent) against you, another member of your household, guest or visitor to your property, who has behaved in a way that is likely to have caused Harassment, alarm or distress to person(s) outside your household.

Parenting Order

We reserve the right to apply to court for a Parenting Order (or its equivalent) against you, if you are the parent of a child or young person and we believe that the child or young person has engaged in anti-social behaviour, and resides or appears to reside with you.

10. Grounds for refusing an application for an assignment or an exchange

(These grounds do not apply to fixed-term tenants)

Ground 1
The tenant or the proposed assignee is subject to a possession order or a suspended possession order or if proceedings against the tenant are pending before any court using a mandatory or discretionary ground for possession for anti-social behaviour.

Ground 2
A notice seeking possession is in force against the tenant or the proposed assignee under Grounds 1 - 6 of Schedule 2 of the 1985 Act or possession proceedings have begun against either party on one or more of those grounds (e.g. a Notice Seeking Possession has been served).

Ground 3
The accommodation is substantially larger than is reasonably required by the proposed assignee.

Ground 4
The size of the accommodation is not reasonably suitable for the needs of the assignee.

Ground 5
The dwelling forms part of, or is within the curtilage of, a building which is held mainly for non-housing purposes or is situated in a cemetery and was let to the tenant or his predecessor in connection with their employment with the landlord, or with a local authority, a new town corporation, housing action trust, Development Board for Rural Wales, or the governors of a grant-aided school.

Ground 6
The landlord is a charity and the proposed assignee's occupation would conflict with the objects of the charity.

Ground 7
The dwelling is designed to make it suitable for a physically disabled person and if the exchange took place, no such person would be living in the dwelling.

Ground 8
The landlord is a housing association or housing trust which provides accommodation only for persons whose circumstances, (other than merely financial circumstances), make it especially difficult for them to satisfy their housing needs and if the exchange took place there would be no such person living in the dwelling.

Ground 9
The dwelling is one of a group that is let to persons with special needs and a social service or special facility is provided close by in order to assist the tenants - if the exchange took place there would be no person with special needs living in the dwelling.

Ground 10
The dwelling is the subject of a management agreement where the manager is a housing association of which at least half the members are tenants subject to the agreement, and at least half the tenants of the dwellings are members of the association, and also that the proposed assignee is not such a member nor is willing to become one.

(These grounds apply to fixed-term tenants)

Ground 1
This ground is that any rent lawfully due from a tenant under one of the existing tenancies has not been paid.

Ground 2
This ground is that an obligation under one of the existing tenancies has been broken or not performed.

Ground 3
This ground is that any of the relevant tenants is subject to an order of the court for possession of the dwelling house let on that tenant's existing tenancy.

Ground 4
This ground is that either of the following conditions is met.

The first condition is that proceedings have begun for possession of a secure tenancy, and possession is sought on one or more of grounds 1 to 6 in Part 1 of Schedule 2 to the Housing Act 1985 (grounds on which possession may be ordered despite absence of suitable accommodation).

The second condition is that a notice has been served on a relevant tenant under section 83 of that Act (notice of proceedings for possession), and the notice specifies one or more of those grounds and is still in force.

Ground 5
This ground is that either of the following conditions is met.

The first condition is that proceedings have begun for possession of an assured tenancy, and possession is sought on one or more of the grounds in Part 2 of Schedule 2 to the Housing Act 1988 (grounds on which the court may order possession)

The second condition is that a notice has been served on a relevant tenant under section 8 of that Act (notice of proceedings for possession), and the notice specifies one or more of those grounds and is still in force

Ground 6
If proceedings against the tenant are pending before any court using a mandatory or discretionary ground for possession for anti-social behaviour.

Ground 7
This ground is that either of the following conditions is met.

The first condition is that a relevant order or suspended Ground 2 or 14 possession order is in force in respect of a relevant tenant or a person residing with a relevant tenant.

The second condition is that an application is pending before any court for a relevant order, a demotion order or a Ground 2 or 14 possession orders to be made in respect of a relevant tenant or a person residing with a relevant tenant.
For the purposes of Ground 6 a “relevant order” means—

- an injunction under section 152 of the Housing Act 1996 (injunctions against anti-social behaviour),
- an injunction to which a power of arrest is attached by virtue of section 153 of that Act (other injunctions against anti-social behaviour),
- an injunction under section 153A, 153B or 153D of that Act (injunctions against anti-social behaviour on application of certain social landlords),
- an anti-social behaviour order under section 1 of the Crime and Disorder Act 1998, or
- an injunction to which a power of arrest is attached by virtue of section 91 of the Anti-social Behaviour Act 2003;
- a “demotion order” means a demotion order under section 82A of the Housing Act 1985 or section 6A of the Housing Act 1988;
- A “Ground 2 or 14 possession order” means an order for possession under Ground 2 in Schedule 2 to the Housing Act 1985 or Ground 14 in Schedule 2 to the Housing Act 1988.

Ground 8
This ground is that the accommodation afforded by the dwelling house proposed to be let on the new tenancy is substantially more extensive than is reasonably required by the existing tenant or tenants to whom the tenancy is proposed to be granted.

Ground 9
This ground is that the extent of the accommodation afforded by the dwelling-house proposed to be let on the new tenancy is not reasonably suitable to the needs of the existing tenant or tenants to whom the tenancy is proposed to be granted, and the family of that tenant or those tenants.

Ground 10
This ground is that the dwelling house proposed to be let on the new tenancy meets both of the following conditions.

The first condition is that the dwelling-house forms part of or is within the curtilage of a building that, or so much of it as is held by the landlord is held mainly for purposes other than housing purposes, and consists mainly of accommodation other than housing accommodation, or is situated in a cemetery.

The second condition is that the dwelling-house was let to any tenant under the existing tenancy of that dwelling-house, or a predecessor in title of the tenant, in consequence of the tenant or the predecessor being in the employment of—

(a) the landlord under the tenancy,
(b) a local authority,
(c) a development corporation,
(d) a housing action trust,
(e) an urban development corporation, or
(f) The governors of an aided school.

Ground 11
This ground is that the landlord is a charity and the occupation of the dwelling house proposed to be let on the new tenancy by the relevant tenant or tenants to whom the new tenancy is proposed to be granted would conflict with the objects of the charity.

Ground 12
This ground is that both of the following conditions are met.

The first condition is that the dwelling house proposed to be let on the new tenancy has features that are substantially different from those of ordinary dwelling houses, and are designed to make it suitable for occupation by a physically disabled person who requires accommodation of the kind provided by the dwelling house.

The second condition is that if the new tenancy were granted there would no longer be such a person residing in the dwelling house.

Ground 13
This ground is that both of the following conditions are met.

The first condition is that the landlord is a housing association or housing trust which lets dwelling-houses only for occupation (alone or with others) by persons whose circumstances (other than merely financial circumstances) make it especially difficult for them to meet their need for housing.

The second condition is that, if the new tenancy were granted, there would no longer be such a person residing in the dwelling house proposed to be let on the new tenancy.

Ground 14
This ground is that all of the following conditions are met.

The first condition is that the dwelling house proposed to be let on the new tenancy is one of a group of dwelling houses, which it is the practice of the landlord to let for occupation by persons with special needs.

The second condition is that a social service or special facility is provided in close proximity to the group of dwelling houses to assist persons with those special needs.

The third condition is that if the new tenancy were granted there would no longer be a person with those special needs residing in the dwelling house.

Ground 15
This ground is that all of the following conditions are met.

The first condition is that the dwelling house proposed to be let on the new tenancy is the subject of a management agreement under which the manager is a housing association, and at least half the members of the association are tenants of dwelling houses subject to the agreement.

The second condition is that at least half the tenants of the dwelling houses are members of the association.

The third condition is that no relevant tenant to whom the new tenancy is proposed to be granted is, or is willing to become, a member of the association.

(References to a management agreement include a section 247 or 249 arrangement as defined by 250A (6) of the Housing and Regeneration Act 2008).

Additional ground for withholding consent to mutual exchange (all tenancies)

An injunction order under Section 153 Housing Act 1996 or an anti-social behaviour order or a demotion order or a possession order under Ground 2 for secure tenancies or Ground 14 for assured tenancies is in force or an application for one of those is pending either against the tenant, the proposed assignee or a person who resides with either of them.

An additional ground for refusing consent for assignment is that proceedings have been begun for possession under section 84A (absolute ground for possession for anti-social behaviour), or there has been served on the tenant or the proposed assignee a notice under section 83ZA (notice requirements in relation to proceedings for possession on absolute ground for anti-social behaviour) which is still in force. Additionally, assignment or an exchange may be refused if there is in force a suspended anti-social behaviour possession order or a suspended riot-related possession order.

11. Explanation of words used in this agreement

Abandonment
Voluntarily leaving your home without any obvious intention to return.

Assignment
This is about the transfer of legal rights (usually a tenancy) from one person to another.

Assured Tenancy
Assured tenants typically have landlords who are Registered Providers of Social Housing. The tenant must be an individual rather than a company or charity etc. The property must have been let as a separate place to live in. Assured tenants have long-term security of tenure.

Boundary Fencing
This refers to the fencing (or something similar), which marks out the extent of the land owned by your landlord (not including dividing fencing).

Council
The Metropolitan Borough Council of Solihull.

Communal Area
Any part of the building and land that all tenants can share or use.

Demoted Tenancy
Where a tenant (or a person who the tenant is responsible for) has been involved in anti-social behaviour, a court order may be obtained to downgrade the tenancy for 12 months.

It is easier to evict a demoted tenant because they have fewer rights and less security of tenure.

Dividing Fencing
This refers to a fence (or something similar), which divides your home from your neighbour's home.

Enforcement Proceedings
This means any legal action that we may take to require you to comply with the terms of this agreement or to stop you breaking the terms of this agreement.

Exchange
Swapping your home with another tenant by assignment. If both tenants agree to the exchange it is called a mutual exchange.

Eviction
This happens if you are required to leave your home after enforcement proceedings. We will not evict you without a court order.

Fixed-term Tenancy
A tenancy agreement for a specific period of time (usually either 2 or 5 years) after which time the contractual tenancy (this Agreement) automatically ends if it is not renewed.

Fixtures and Fittings
All appliances, lighting equipment and furnishings in the property including installations for supplying or using gas, electric or water.

Genuine Emergency
A real and immediate risk of harm to you, someone in your household or the immediate vicinity of your home or a real risk of serious damage to your home or to your neighbour's home (or all of these). We will decide whether a situation is an emergency or not.

Garden
Lawns, hedges, flowerbeds, trees, shrubs, slapped and paved areas, outside walls and fences.

Home
The property let to you under this agreement, including any garden, garage, outbuilding, fence or wall. This does not include anything let to you under a separate agreement, such as a garage or a garage site. The boundaries of your home are defined by the physical boundaries of your property at the date of this agreement.

Household
Anyone living at or staying in your home for any period of time.

Improvement
Any alteration or addition to the property that improves the facilities that was at your home when you first moved in.

Introductory Tenancy
A probationary tenancy for 12 months (which can be extended for a further 6 months) with reduced statutory rights.

Joint Tenancy
Two or more people who are tenants under the same agreement in which each has an interest in the whole of the property.

Legislation
A general term meaning Regulations and Acts of Parliament, including any enactment comprised in subordinate legislation, within the meaning of the Interpretation Act 1978.

Locality
The area around your home that is more than the road or street where your home is. We consider that locality means (at least) the whole of the Metropolitan Borough of Solihull.

Lodger
A person who has the tenant's permission to live in part of your home without having exclusive occupation of any part of it, whether or not they pay you any money.

Maisonette
A flat with more than one floor.

Member of Your Family
Your parent, child, grandchild, grandparent, brother, sister, uncle, aunt, nephew, niece, step-relative and adopted or fostered child.

Month
A calendar month

Neighbour
Everyone living in the local area, including people who own their own home and other tenants.

Partner
Your husband, wife (or civil partner) or anyone you live with as if they were your husband or wife (or civil partner).

Periodic
A period of this agreement (usually a week).

Pet
Any animal.

Possession Order
This is a formal instruction from a court that gives us permission to take action to make you leave your home.

Property
The property you live in, including any garden, but not including any communal or shared areas.

Probationary Tenancy
An introductory or starter tenancy.

Qualifying Successor
Someone who is entitled to take over your tenancy when you die.

Recklessly
Unreasonably or without care.

Rent
This is the total payment due from you to us as set out in this agreement (which may be increased from time to time).

Rent Free Weeks
There are two weeks every year when no rent is due from you to us. This does not apply if you have rent arrears.

Security of Tenure
A tenant's legal right to occupy their home. We will not remove a person from their home without a possession order unless you have ceased to occupy the property as your only or principal home.

Secure Tenancy
Secure Tenants have landlords who are public bodies such as local authorities (SMBC). The tenant must be an individual rather than a company or charity etc. The property must have been let as a separate place to live in.

Temporary accommodation given to homeless people will not be secure tenancies.

Shared Areas
Also called communal areas. This includes halls, stairways, entrances, landings, shared gardens, lawns and landscaped areas.

Starter Tenancy
A probationary tenancy for 12 months with reduced statutory rights. Similar to an assured shorthold tenancy.

Statutory Body
An organisation, such as the Homes and Communities Agency that performs certain tasks for an on behalf of the Government.

Subletting
Giving another person exclusive possession of part of your home.

Supported Housing
Includes charges for services, which provide support to the tenant to help them maintain their tenancy. Support may be funded from the supporting people grant.

Temporary Move
This is where we may need to move you from your home to somewhere temporary. Any offer of a temporary home is on the basis that you will return to your home as soon as practicable. Temporary accommodation has very limited security of tenure.

Tenancy Variation Date
Following consultation with tenants the date on which any proposed variation to their tenancy agreement becomes effective.

Vehicle
A car, bus, lorry, motorbike, bike, quad bike, boat, trailer, caravan or other means of transport.

We, us, our
Your landlord

Weekly Tenancy
Rent is paid weekly

Written permission/consent
Correspondence from us giving you permission to do something. If you need our consent to do something, we may ask you to put your request in writing.

You
The tenant, and in the case of joint tenants, any one or all of you.

Your Rights
The rights that are established by Parliament (as interpreted in a court) or the common law or this (and any supplementing or replacing) agreement.

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Item 17 -
Appendix B

Your Tenancy Agreement

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Solihull Community Housing
Shaping our neighbourhoods

Solihull Metropolitan Borough Council
URBS IN RURE

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PART A
Key Information (Quick Guide)

This section is a summary only.

About Your Tenancy at a Glance

- This is a legally binding agreement between you and your landlord, Solihull Metropolitan Borough Council (SMBC)
- Solihull Community Housing (SCH) manages council housing services for SMBC. In this quick guide, “we”, “our” and “us” mean SMBC as your landlord and where relevant, SCH acting on SMBC’s behalf.
- Your tenancy type (e.g. introductory, secure, fixed term) is shown in your tenancy schedule at the front of this agreement.
- Your type of tenancy affects your rights, including how long you can stay and how your tenancy can end.
- You must live in the property as your only or principal home.
- If you are a joint tenant, you are equally responsible for keeping to the agreement.
- You are responsible for your behaviour and the behaviour of anyone living in or visiting your home.

Your Rent and How to Pay

- Rent and any service charges must be paid in advance, weekly or monthly as stated in your schedule.
- Rent may change, usually once a year, with written notice.
- You are responsible for claiming any benefits you are entitled to including Housing Benefit or Universal Credit.
- If you are struggling to pay, you should contact us as soon as possible so we can help.

Your Key Responsibilities

- Pay your rent and service charges on time.
- Look after your home and report repairs promptly.
- Allow access for repairs, inspections and safety checks.
- Treat neighbours with respect and do not cause nuisance or anti-social behaviour.

- Follow safety rules, including fire safety requirements.

Our Key Responsibilities

- Respect your right to live in your home.
- Keep the structure and key installations in repair.
- Carry out safety checks and inspections required by law.
- Maintain communal areas.
- Respond to reports of anti-social behaviour
- Consult tenants where required.

When You Could Lose Your Home

You may lose your home if you:

- Do not pay rent
- Seriously or repeatedly breach the agreement
- Engage in criminal or anti-social behaviour
- Abandon or unlawfully sublet the property

Where to Get Help

- Contact Solihull Community Housing if you need advice or support
- You can also seek independent advice from Citizens Advice, a law centre or a solicitor.

IMPORTANT

This is only a summary.

You should read the full tenancy agreement in Part B for full details of your rights and responsibilities.

PART B
Your Tenancy Agreement

1. INTRODUCTION

Welcome to Your New Home

1.1 This tenancy agreement sets out your rights and responsibilities as a tenant and our responsibilities as your landlord.

1.2 Who Your Landlord Is:

Your landlord is **Solihull Metropolitan Borough Council (SMBC)**.

1.3 Solihull Community Housing (SCH) manages and delivers housing services on behalf of SMBC under a management agreement. SCH is responsible for the day-to-day management of council housing, including lettings, tenancy management, rent collection, repairs, estate management and customer services on behalf of SMBC.

1.4 Throughout this agreement, references to "we", "our" or "us" mean Solihull Metropolitan Borough Council as your landlord and, where relevant, Solihull Community Housing acting on the Council's behalf.

1.5 Any action, decision, notice, approval, consent or service provided by SCH under this agreement is carried out on behalf of SMBC unless otherwise stated.

1.6 Becoming a tenant means you take on responsibilities to us, your neighbours and the wider community in which you live.

1.7 We expect you to look after your home, treat neighbours considerately, and pay your rent and service charges on time.

1.8 You are responsible for anyone living in or visiting your home. This applies throughout this agreement including behaviour, safety and property condition.

1.9 When you sign for your tenancy, we will take your photograph. We will also do this if there are any changes to your tenancy at a later date, or you move to another council home managed by SCH on behalf of SMBC. Photographs help us to prevent social housing fraud, and for us to help you in the case of an emergency, for example in the event of a fire or flood.

About This Agreement

1.10 This agreement is a legally binding contract between you and Solihull Metropolitan Borough Council as your landlord. By signing the agreement, you agree to comply with all the terms and conditions set out in it.

1.11 You should read the agreement carefully. If there is anything in these conditions that you do not understand you should ask us to explain it more fully to you. Alternatively, you may wish to seek independent advice (for example from Citizens Advice, a law centre or a solicitor).

1.12 This tenancy agreement operates alongside legislation, regulatory requirements and policies (as amended from time to time) adopted by SMBC in its role as landlord and delivered by SCH on its behalf.

1.13 Where laws, regulations or statutory guidance change, your tenancy will be governed by the updated legal requirements.

1.14 A list of definitions explaining words used in this agreement is included at the end in Part C to help you understand it.

Joint Tenancies

1.15 If this is a joint tenancy, each tenant is equally responsible for keeping to all the conditions of this agreement.

1.16 Joint tenants are jointly and individually responsible for all obligations, including payment of rent and charges.

1.17 If letters, notices or legal documents are served on one joint tenant, they are treated as served on all joint tenants.

2. YOUR TENANCY

Type of Tenancy

2.1 Solihull Metropolitan Borough Council (SMBC) offers a number of tenancy types to Council tenants. Solihull Community Housing (SCH) manages these tenancies and delivers housing services on behalf of SMBC.

2.2 The type of tenancy you have been offered is shown in the front cover (called a schedule) attached to this agreement.

2.3 Your rights as a tenant differ depending upon the type of tenancy you hold.

Introductory Tenancies

2.4 If you have an introductory tenancy, your tenancy will last for 12 months. If you have any problems maintaining your tenancy or breach the agreement, we may extend your probationary period by a further 6 months or evict you from your home.

2.5 During this extension period you will continue to be an introductory tenant. You have the right to ask for a review of our decision.

2.6 At the end of an introductory tenancy, if we have not taken action to end, or extend the probationary period, it will normally become a secure periodic tenancy, unless the tenancy falls within a category identified in the Council's Tenancy Policy for a fixed-term tenancy.

Secure Tenancies

2.7 If you have a secure tenancy, your rights are set out in the Housing Act 1985 and other applicable legislation. We will not interfere with your right to live in your home unless we take legal action to end your tenancy because you have broken any of the conditions of this agreement, or we serve a notice to demote your tenancy.

Fixed Term Tenancies

2.8 If you have a fixed term tenancy, your rights are set out in the Housing Act 1985 and other applicable legislation, including the Localism Act 2011.

2.9 The schedule attached to this agreement will tell you the tenancy type you have and how long this agreement is for. During the fixed term we will not interfere with your right to live in your home unless we take legal action to end your tenancy because you have broken any of the conditions of this agreement.

Tenancy Reviews

2.10 Introductory and fixed term tenancies will be reviewed before the tenancy ends.

2.11 You must take part in tenancy reviews when requested.

2.12 Failure to participate in a tenancy review may be treated as a breach of this agreement and could result in legal action or an extension of a probationary period.

2.13 Reviews may consider matters such as rent payments, household circumstances, property suitability and conduct during the tenancy.

2.14 Prospective tenants and existing tenants have the right to ask us to review a decision. Details of the review process and criteria are set out in the Tenancy Policy.

Changes to Your Tenancy Type

2.15 If your tenancy is a secure tenancy and anti-social behaviour has occurred, we may apply to the court for a demotion order and serve you with a Demotion Notice.

2.16 This replaces a secure tenancy with a Demoted Tenancy.

2.17 If this tenancy is demoted, we may subsequently ask a court to make a possession order. You have the right to ask for a review of either decision.

2.18 Demoted tenancies usually last for 12 months but may be extended where legal action is ongoing.

2.19 Your tenancy type may also change following a court order, statutory process or policy decision made in accordance with the law.

3. RENT AND CHARGES

Your Rent and Service Charges

3.1 Your rent may be a social rent or an Affordable Rent, depending on the property and the tenancy you have been offered. The rent type, amount and any service charges will be shown in your schedule.

3.2 You must pay the rent and any service or other charges stated in your schedule. The rent and service charges together make up the total weekly or monthly charge payable under this tenancy.

3.3 If service charges apply to your tenancy, we may increase or decrease them where it is reasonable to do so. We will give you at least 28 days' written notice of any change. Service charges will normally be reviewed at the same time as your rent, but they may be changed at other times if services are added, removed or changed.

3.4 The way rent and service charges apply to your tenancy will depend on whether your home is let at a social rent or an Affordable Rent. Your schedule will state the rent type, the amount payable and whether any services are charged separately or included within the rent.

3.5 Where the property is let at an Affordable Rent, the rent will be set and reviewed by the Council in accordance with applicable legislation, the Government's rent policy, the Regulator of Social Housing's Rent Standard and any successor requirements. The rent may be increased or decreased from time to time, provided that it does not exceed any maximum level permitted by law or regulation.

How and When to Pay

3.6 Rent and service charges are payable weekly or monthly in advance with the first payment being due on the day you sign up for your tenancy.

3.7 You must pay your rent and any service or other charges in full and on time.

3.8 Direct debit is our preferred method of payment, but other payment methods may be available.

3.9 For weekly tenancies, if your tenancy starts on a day other than a Monday, you will be charged a pro-rata amount for the first week's rent.

Changes to Rent and Charges

3.10 In the first year of this agreement, we may change the rent by giving you not less than one calendar months' notice in writing.

3.11 Thereafter, we may increase your rent and/or service charges annually by giving you at least one calendar month's written notice.

3.12 The notice will set out the rent and/or service charge proposed. Normally any rent or service charge variation will take place at the start of the financial year (April).

3.13 For the purposes of sections 3.10-3.12 of this agreement, SMBC will follow the relevant statutory procedure for varying rent and service charges in accordance with applicable legislation.

3.14 If we temporarily move you from your principal home to another property, you will not be charged rent for the other property as long as you remain liable for the rent on your principal home.

3.15 If you have made any advance rent payments (known as credits) on your previous home's rent account with SMBC, we will add the credit to your new rent account.

3.16 If you move from one Council tenancy to another, any credit balances on your tenancy account may be used to clear or offset any related debts/charges such as recharges owed to SMBC.

3.17 If SMBC owes you any money, for example, as compensation for damage to your property or decorations, or for homeloss and disturbance, and you have rent arrears or other outstanding charges on your rent account, SMBC reserve the right to pay that money onto your current or former rent account.

Financial Responsibilities and Benefits

3.18 You are responsible for paying your rent in full, even if you are waiting for Housing Benefit or Universal Credit to be paid.

3.19 If you believe that you may be entitled to housing benefit, it is your responsibility to apply for this within the prescribed time to do so, and to ensure that all housing benefit is paid over to us to pay your rent. You are also responsible for advising SMBC's Income and Awards Team immediately if your circumstances change. You must comply with requests for documents or further information on time. Any failure to co-operate could lead to arrears accruing and possible possession action being taken against you.

3.20 If you believe that you may be entitled to, or if you receive Universal Credit, it is your responsibility to claim this. You are also responsible for advising the Department of Work and Pensions (DWP), SMBC's Income and Awards Team, and SCH immediately if your circumstances change. This includes where you gain or lose one or more household members.

3.21 We may apply to the DWP for your rent and housing costs to be paid directly to us.

3.22 If you have arrears, we may apply to the DWP, with your permission, to have the arrears taken directly from your Universal Credit personal allowance payment.

3.23 If you receive an overpayment that must be repaid, and we have to repay it on your behalf, we may recover that amount from you. We may do this by adding the amount to your rent account and recovering the debt from you as rent arrears or directly charging you for the full amount.

3.24 If you have trouble paying your rent or charges, you must contact us as soon as possible so we can offer advice or support.

3.25 You are responsible for other household outgoings, including council tax and utility bills (e.g. gas, electric, water), unless stated otherwise in your schedule.

3.26 You are responsible for insuring the contents of your home (your furniture and belongings). We are not responsible for loss of or damage to your possessions. This includes but is not exclusively limited to, flood damage (including sprinkler activations), fire, or accidental damage to your contents by other tenants or our contractors/agents/staff.

4. YOUR RESPONSIBILITIES

Living In Your Home

4.1 You must occupy the property as your only or principal home and take possession of it at the start of the tenancy.

4.2 You must not abandon your home, part with possession, or allow anyone else to live there instead of you.

4.3 If you fail to occupy the property as your only or principal home, or we have reason to believe you have vacated the property without giving due notice, or let someone else live there in your place, we may serve you with a Notice to Quit.

4.4 If you are away from your home for more than 28 days, you must tell us in advance and provide a contact address, return date, and the name of anyone looking after your home in your absence. If you do not tell us that you are going away and we are of the opinion that you have ceased to occupy the property as your only or principal home, we may serve you with a Notice to Quit and change the locks.

Paying Your Rent

4.5 You must pay your rent and any service or other charges in full and on time.

4.6 Joint tenants are jointly and individually responsible for all rent and charges due, including arrears.

Looking After Your Home

4.7 You must keep your home (including any balcony area) clean, tidy and hygienic.

4.8 You must keep the inside of your home and any of our fixtures and fittings in repair.

4.9 You must keep your home in a good state of decoration, allowing for fair wear and tear. You must decorate all internal parts of your home as often as necessary to keep them in reasonable decorative order.

4.10 You must take reasonable steps to ventilate your home to reduce condensation, damp and mould.

4.11 You must ensure that air vents and extractors are kept clear and that appropriate venting arrangements are made for the extraction of water vapour from appliance such as a tumble dryer, and for normal household activities such as cooking and bathing. You must not turn off any form of mechanical extraction/vents (i.e. fuse spurs).

4.12 You must wipe down surfaces affected by minor condensation and mould regularly and report any signs of damp, moisture build-up, or mould growth to us so we can investigate and remedy as appropriate.

4.13 You must not use textured coatings on your walls or ceilings. You must obtain our permission if you want to either use or remove textured coatings.

4.14 If you live in a flat above the ground floor, you must not fit wooden or laminate flooring in your home.

4.15 You must not cause damage to the property or allow damage by members of your household, visitors or pets, whether deliberate, accidental or through neglect.

4.16 You must not misuse the drainage system or put anything into it that may cause a blockage (for examples, wipes, oils or solid items).

4.17 Only use the things we have fitted in your home (e.g. gas/electric fittings, district heating systems, kitchen and bathroom fixtures and fittings), as they are meant to be used.

Repairs You Are Responsible For

4.18 You must promptly report to us, any repairs that we are responsible for.

4.19 You are responsible for minor repairs and maintenance as set out in the Tenant Handbook and our Responsive Repairs Policy.

4.20 You are responsible for repairing or paying for damage caused deliberately, through neglect, misuse, or carelessness, including by pets. If the repair is one that we have to carry out for safety reasons, or to make the property fit for occupation, we will recharge you for the cost of the repair.

4.21 You must not deface or put graffiti on your home or any part of our property, including neighbouring properties. If you do not repair the damage caused, we may carry out the remedial work and charge you our costs for doing this.

4.22 You are responsible for repairing damage, including decoration, caused by improvement or other work carried out by you or an outside contractor, including work that we did or did not give permission for you to carry out.

4.23 You are responsible for repairing damage to decoration caused by improvement works, unless we have agreed this with you before we complete the work.

4.24 You are responsible for the safe keeping of keys, locks and fobs. If these are lost or stolen, or you get locked out, you are responsible for their replacement. In exceptional circumstances where we may change the locks for you, you will be recharged the cost of the lock change.

4.25 You, and/or the utility provider are responsible for the cost of providing or repairing gas, electricity or water meter cupboards.

4.26 You are responsible for all appliances in the household, unless expressly stated in your schedule, and for ensuring they are safely and properly installed by qualified tradespersons. We will not fix or replace items such as cookers, washing machines, fridges. Any damage caused by incorrect fitting will be your responsibility to fix or repair.

4.27 If you use a gas cooker, you must ensure this is installed by a qualified installer on the Gas Safe register and that the cooker is regularly serviced.

Allowing Access to Your Home

4.28 Access to your home may be required by either us or contractors acting on our behalf.

4.29 You must allow us, or contractors acting on our behalf, reasonable access to your home to inspect it and carry out repairs, compliance works, and improvements.

4.30 You must allow us reasonable access to your home where we have any potential health and safety concerns. This includes inspecting the condition of your home, pest or vermin infestation, cleaning and removing items posing a potential risk, improvements, alterations or other works to your home or adjoining property.

4.31 You must allow us access to your home for the servicing and maintenance of gas systems, household electrics, heating systems, sprinklers, carbon monoxide and smoke detectors. If you live in a flat, you must also provide access for inspection of your front entrance door. Access must be at the intervals necessary for your safety.

4.32 In an emergency, we have the right to enter your home at any time without notice to protect people or property, using reasonable force if necessary, and carry out any work to your home, your neighbours' home or to any communal parts near to your home.

4.33 You must allow the fire service and other professional staff into your home to carry out a fire risk assessment when we consider it necessary and reasonable.

4.34 If you unreasonably refuse access to your property, we may apply to the court to gain access. We may ask the court to make an order for costs against you, including our legal fees, court fees, and any other reasonable expenses incurred.

4.35 To protect the health and safety of our employees and those working on our behalf, you must ensure your home is smoke free when our employees and contractors attend your home by appointment.

Health, Safety and Fire Precautions

4.36 You must comply with all health, safety and fire safety requirements relating to your home.

4.37 You must not tamper with fire safety equipment, gas or electrical installations, or safety systems.

4.38 You must not store items that create a health, safety or fire risk, obstruct access or escape routes, or prevent inspections or repairs.

4.39 You must not store, hoard or collect excessively large quantities of items in your home that could pose a health and safety or fire risk to you, any other occupants, visitors or neighbours or render the property unfit for occupation, or prevent us from carrying out our landlord responsibilities such as inspections, repairs or compliance checks. You will be asked to dispose of excess items that are or may cause a risk. If you fail to do so within a specified timeframe, we may enforce clearance by obtaining a court order.

Your Behaviour and Visitors

4.40 You, members of your household, and visitors, must not cause nuisance, harassment, intimidation, alarm or distress to others.

4.41 Anti-social behaviour, hate crime, harassment, victimisation, domestic abuse and criminal behaviour are breaches of this agreement.

Gardens and Outdoor Areas

4.42 You must keep any garden included with your tenancy tidy, cultivated and free from rubbish. This includes removal of self-setting trees and/or climbing plants.

4.43 You must not store any rubbish, furniture, appliance, scrap, dangerous or toxic substances, flammable items and material, or unsightly objects in the garden of the property. If we have to remove any items from your garden, we will charge you the cost of clearance and any remedial works.

4.44 You must not make alterations to gardens, boundaries or structures without our written permission, for example, sheds, greenhouses, fences, walls, hedges, patios, ponds, or trees. This list is not exhaustive.

4.45 You must not erect any dangerous materials around the perimeter of your home including your garden. This includes, but not exclusively, barbed wire, glass or razor wire.

4.46 You must not plant any climbing plants against the property which may damage the fabric of the building (for example, ivy).

4.47 You must keep hedges and boundaries maintained to a reasonable height and condition, ensuring no obstruction to alleyways, public footpaths, roads or neighbouring gardens. Guidelines for hedge height is no more than 6ft at the rear of your property, and no more than 4ft 7in at the front of your property.

4.48 You are responsible for any trees that fall within the boundary of your garden that is let to you as part of your tenancy, for example pruning, making safe, and clearing away branches. You must seek permission from us if you want to undertake any works to trees, for example felling, to ensure we provide you with professional guidance from SMBC’s Forestry Team.

Communal Areas

4.49 You must always keep communal and shared areas clean, tidy and free from obstruction.

4.50 You must not store personal belongings in any communal area.

4.51 You must comply with any local agreements or estate rules that apply to your building or neighbourhood.

4.52 Large items of play equipment such as swings, slides, paddling pools and trampolines are not permitted in communal areas.

4.53 You must not use any equipment or item in a communal area (shared garden, courtyard, or other shared space) which causes, or is likely to cause, a nuisance or obstruction to any other resident. This includes but is not limited to, powered DIY tools, and devices to play amplified sounds such as music.

4.54 You must not erect any structures or keep pets in any communal areas including shared garden spaces, for example, pet hutches, kennels, etc.

4.55 If your home is on an open plan estate, the front, side and rear areas must remain the way we have laid them out.

Pets and Animals

4.56 You are responsible for the health, welfare and behaviour of any pets or animals you keep. This requires proper day-to-day management and care of the pet.

4.57 You must not permit any pets or animals that you keep in your home to cause damage, nuisance or risk to neighbours and their lawful visitors, including excessive barking and/or odours.

4.58 All dog owners have a legal responsibility under the Dangerous Dogs Act 1991 for the behaviour of their dogs. It is your responsibility to ensure your dog is not a danger to people and comply with any requirements under that Act.

4.59 You must not sell, breed, give away or exchange any animal that is prohibited by law, including any dog identified under the Dangerous Dogs Act 1991.

4.60 You must not keep at the property any dog which it is illegal to own or have custody of under section 1 of the Dangerous Dogs Act 1991 or have such a dog as a visitor to the property, unless you (or the dog’s owner) has a valid exemption certificate and complies with the conditions in the Dangerous Dogs (Compensation and Exemption Schemes) (England and Wales) Order 2023.

4.61 For clarity, reference to the Dangerous Dogs Act 1991 in this tenancy agreement, includes successive legislation.

4.62 All dogs must have an identification chip and wear a collar and disc whilst in a public place.

4.63 Dogs must always be kept under control and on a lead when in public areas. They must never be allowed outside your property on their own which includes any communal spaces.

4.64 You must make proper arrangements to dispose of animal waste/faeces and not allow it to build up at your home or in your garden in such a manner that it causes a nuisance (for example, causes a foul smell or is unsightly).

4.65 You must take all reasonable steps to ensure your pet does not deposit faeces on any balcony or in any communal areas.

4.66 You must clean up and dispose of any animal faeces deposited by a pet which you own or are looking after.

4.67 You must not install any large fish tank(s) or any large pet enclosures without getting written permission first. This is to ensure that we avoid structural damage being caused to your home as a result of weights being too heavy for the floor structure in your home. Where we grant permission, if there are repeated water leaks into other resident homes as a result of the tank, we may withdraw these permissions.

4.68 You may not keep more than two large pets in your home (e.g. cats and dogs) without obtaining our written permission. Whilst we will not unreasonably refuse your request, we will give consideration to health and safety, the size of your home, whether you have access to outdoor space, and potential nuisance to your neighbours.

4.69 You must keep all dogs in a secure room when any of our employees, contractors or agents acting on our behalf, visit your home.

4.70 We reserve the right to withdraw permissions to keep pets or animals where there is identified mistreatment, or you are not capable of looking after their welfare.

Insects and Vermin

4.71 You must not unreasonably do anything that encourages insects, pests or vermin into your home, or that causes a health risk to you or others. If we consider that there is a health risk, we may enter your home to rectify the situation.

4.72 You are responsible for treating or removing vermin, pests and other animals (such as but not limited to), ants, bedbugs, bees, cockroaches, fleas, foxes, mice, pigeons, rats, squirrels and wasps. You must alert us to the presence in your home of rats, cockroaches or any other vermin.

4.73 If you identify vermin in communal areas, you must notify us immediately to enable us to treat them.

Waste and Recycling

4.74 You must dispose of household waste and recycling in accordance with council instructions which can be found on Solihull Council's website: Rubbish and recycling guides | Solihull Metropolitan Borough Council

4.75 Waste must be placed in the correct bins provided and not left in communal areas, or outside of bins.

4.76 If you have rubbish chutes, you must use these responsibly and take care not to block the chutes or cause a fire in them. Rubbish chutes are only intended for small bags of household waste. You must never leave bags of rubbish outside the front door of your home, on the floor in the chute room, or in any other communal area of the building including the main external bin store.

4.77 You must dispose of medical waste in the correct manner.

4.78 You must not dispose of litter, waste or rubbish in a manner that causes an obstruction, fire risk or a nuisance, and you must not perpetrate or allow fly tipping or illegal dumping of waste.

4.79 You must never throw items from window, communal windows, balconies, landings or corridors. This includes litter, foodstuff, drinks, packaging, cigarettes or any other item.

4.80 Fly-tipping, misuse of bins or disposal of waste in an unsafe or unlawful manner is a breach of this agreement and may result in recharges or legal action.

Running a Business

4.81 You must not run a business from your home without our written consent.

4.82 Where our consent is given, you must abide by any conditions that we set and obtain planning or other consents required from the Council or other relevant agencies.

4.83 We will not usually refuse permission unless we feel that the business is likely to cause a nuisance to other people or damage the property. We reserve the right to withdraw our permission.

4.84 You must not fix or display, any advertisement, sign or board, or notice, either outside the home, or inside that is visible to somebody outside your home, without getting our permission and any relevant planning permission.

False Statements and Tenancy Fraud

4.85 You must not make any statements or provide information to us regarding the occupation of your home, which you know, or should know, to be false.

4.86 Legal action can be taken if you have given false information to obtain the tenancy and/or if someone has given us false information on your behalf to obtain the tenancy. This may lead to your tenancy being terminated and you may also be liable for our legal costs.

Notices served upon us

4.87 Any written notice or other correspondence about your tenancy must be delivered or sent by post to us:

> In writing to Solihull Community Housing, Endeavour House, Meriden Drive, Kingshurst, Solihull, B37 6BX or alternatively through the 'Contact Us' webforms available on our website: How can we help? - Solihull Community Housing

4.88 We may change this address for service at any time. If the address changes, we will notify you of the new address. Pursuant to Section 196 of the Law of Property Act 1925 any notice you send will only be considered legally served if it is delivered to our current actively notified address.

5. OUR RESPONSIBILITIES

Your Right to Live in Your Home

5.1 We will not interfere with your right to live in your home as long as you comply with this tenancy agreement.

5.2 We will only interfere with your right to occupy your home where permitted by law, for example where we need to carry out inspections or repairs, in an emergency, or where a court order has been obtained.

5.3 If your home is required for redevelopment or demolition, we may require you to move temporarily or permanently. You may be entitled to compensation in accordance with the law unless you choose to move before we start the process for moving you.

Repairs and Maintenance

5.4 We have the right to:

- Erect, attach, fix and maintain any wires, poles, brackets, fixtures and fittings in, over or upon your home
- Install and maintain or improve in your home or in the shared areas, cables, wires, fixtures or other equipment for provision by us of emergency alarm or security systems, or any other purpose.

5.5 We will maintain the structure and exterior of your home and associated structures (including integral garages and integral stores), in accordance with

Section 11 of the Landlord and Tenant Act 1985 and relevant legislation. This includes:

- Drains, gutters, sewers and external pipes (except where the drains and sewers are the responsibility of a water company, when defects will need to be reported to that company)
- The roof
- Foundations, outside walls, outside doors, windows (where breakage is caused by fair wear and tear), windowsills, window catches, sash cords, window frames, necessary outside painting and decoration
- Internal walls, floors, ceilings and skirting boards, but not including internal painting and decoration or minor repairs to plaster that you could carry out while preparing for decoration
- Chimneys, chimney stacks, annual service of solid fuel systems and flues but not including sweeping

5.6 We will repair and maintain installations that we provide for heating, water heating and sanitation and for the supply of water, gas and electricity within your home. This includes:

- Basins, sinks, baths, toilets (but not the toilet seat), flushing systems and waste pipes, water pipes, water tanks, taps and stop taps
- Electric wiring including sockets, light fittings and switches
- Equipment for room and space heating (for example, gas fires, electric heating, boilers and radiators
- Water heaters, fireplaces, and gas pipes

5.7 Further details are set out in our Responsive Repairs Policy and Tenant Handbook.

5.8 Where you have exercised the Right to Buy or Right to Acquire, all existing repairs and/or planned works will be cancelled. We will only carry out emergency repairs or essential compliance works (such as gas and electrical compliance).

Safety and Compliance Checks

5.9 We will carry out gas safety checks, electrical inspections, fire safety checks (including your front door if you live in a flat) and other compliance checks as required by law.

5.10 We will repair and maintain shared fire alarm systems, communal alarms, shared door entry systems, carbon monoxide detectors and smoke detectors that we provide (where smoke detectors are battery operated, you are responsible for maintaining and replacing batteries).

5.11 We will give reasonable notice before carrying out inspections or works, except in emergencies.

Communal Areas

5.12 If you live in a flat requiring fob access, we will issue fobs to tenants named on the tenancy agreement. We publish details of fob management in the Tenant Handbook.

5.13 Where your home includes access to communal or shared areas (such as a shared entrance or landing), we will maintain those areas, including entrances, stairways, lifts, rubbish chutes, corridors, door entry systems, and any other shared areas including electric lighting that we have provided to those areas.

5.14 We will check the appearance of areas used by everyone in flats on a regular basis and through a rolling programme of stock condition surveys. If we think these areas require decoration, this will be completed on a planned programme of works.

5.15 We will only undertake health and safety works to trees in communal areas if SMBC's Forestry Team assess them as dead, diseased or dangerous. Other routine maintenance of trees will be undertaken on a cyclical programme by SMBC's tree maintenance contractor.

5.16 Some communal services may be subject to a service charge, as set out in your schedule.

Responding to Anti-Social Behaviour

5.17 We will investigate reports of anti-social behaviour, hate crime, harassment, victimisation and nuisance in accordance with our Anti-Social Behaviour Policy.

5.18 We will provide advice, support and take appropriate action where necessary, which may include working with partner agencies or taking legal action.

Equality, Diversity and Vulnerability

5.19 We will treat you fairly and with respect, and we will meet our duties under equality legislation.

5.20 Where you have a vulnerability or disability, we will consider reasonable adjustments to how we deliver services to you. You should tell us about any support needs so we can help.

Data Protection / Information Sharing

5.21 As a data controller, we will handle details we have about you in line with current data protection legislation and our policies, which may change, for the purpose of managing your tenancy.

5.22 Your information may also be shared with other council services and partner organisations to ensure our records are kept accurate, safeguard individuals, help

you manage your tenancy, and to help us identify services or benefits you may be entitled to or interested in.

5.23 We may also need to share your information for the prevention and detection of fraud and / or other crimes or as the law requires.

5.24 Further information about how SMBC and SCH use and share your information in connection with the management of your tenancy is available in our Privacy Notice on our website: Data Protection - Solihull Community Housing. You can also contact us using our online contact forms which are available through our website, or alternatively you can call us on 0121 717 1515. SCH processes personal information on behalf of SMBC in delivering housing services to council tenants.

5.25 In line with data protection legislation, we will allow you reasonable access to other personal information that we have about you or members of your family. This will not apply if other people have given us information about you in confidence. There may be an administrative charge to cover our reasonable costs.

Notices served upon you

5.26 We will serve any official notice in relation to your tenancy, and deem it to have been received, by using one or more of the following methods:

- delivering it to you personally
- delivering it to your home
- affixing it to the property
- sending it by post to your home
- sending it to you electronically (e.g. email)
- any other method approved by law
- informal notices may be sent by any of the above as well as by text

5.27 For the purposes of this agreement, ‘your home’ means your last known address.

5.28 To prove delivery, it is sufficient to assume that:

- If sent by post, the envelope containing the notice was properly addressed and posted; or
- If sent by email, the notice was transmitted by email to the email address of the tenant (held by us), you have agreed to receive communications electronically, and no notice of non-delivery was received by us.

5.29 If the party receiving a letter, notice or court proceedings consists of more than one person, a notice to one of them is notice to all.

6. LIVING IN YOUR HOME AND COMMUNITY

6.1 You must act considerately towards your neighbours and others living in the local area.

6.2 Your responsibilities extend beyond your home to the locality of your home.

Anti-Social Behaviour and Nuisance

6.3 You, your household, and visitors must not engage in any conduct or behaviour which may cause:

- Harassment, alarm, distress or offence to any person
- Nuisance or annoyance to a person in relation to that person's occupation of residential premises
- Housing related nuisance or annoyance to any person.

6.4 This applies to conduct in your home and in the locality of your home.

6.5 Anti-social behaviour includes, but is not limited to:

- Noise nuisance including loud music, loud arguments, slamming doors and foul and abusive language
- Littering and fly tipping
- Verbal or physical abuse or violence, or threatening behaviour
- Animal nuisance such as failing to keep pets under control, excessive barking, dog fouling, or breach of the Dangerous Dogs Act 1991
- Vandalism, property damage, or graffiti
- Garden nuisance including noise, smoke, smells, rubbish accumulation, or overgrown vegetation
- Public space loitering or abuse of communal areas
- Vehicle nuisance including parking in a way that causes obstruction, and engine noise
- Behaviour associated with substance or alcohol abuse
- Drug production/supply
- Exploitation
- Harassment or intimidation
- Criminal behaviour
- Prostitution

6.6 You will be held responsible for any form of unacceptable behaviour carried out by you, your household members including children and pets, and any visitors to your home. This includes inciting, instructing, allowing or encouraging anyone to act on your behalf, and includes direct and indirect behaviour that may be through various forms, such as letter, telephone calls, text message, email, or any form of social media. This is not an exhaustive list.

6.7 We will investigate all reports of anti-social behaviour and nuisance in line with our Anti-Social Behaviour Policy.

6.8 We may take legal action to evict you, or we may seek another form of legal action in line with legislation.

Hate Crime and Harassment

6.9 You, your household and visitors must not engage in any conduct or behaviour which may cause harassment, alarm, distress or offence to any person based on any protected characteristics that are defined in law. This includes, race, religion or belief, sex, age, disability, sexual orientation, gender reassignment, marriage or civil partnership and pregnancy or maternity.

6.10 We will investigate all reports of hate crime and harassment in line with our Anti-Social Behaviour Policy.

6.11 We may take legal action to evict you, or we may seek another form of legal action in line with legislation.

6.12 We may share information with relevant agencies to protect victims and take action against perpetrators.

Domestic Abuse

6.13 You, or any person living with you or visiting your home, must not support or perpetrate any forms of domestic abuse, as defined in the Domestic Abuse Act 2021.

6.14 Domestic Abuse is defined as any incident or pattern of incidents of controlling, coercive or threatening behaviour, violence or abuse, between those aged 16 or over who are or have been intimate partners, or family members regardless of gender or sexuality.

6.15 This can encompass but is not limited to psychological, physical, sexual, financial, and emotional abuse, and includes controlling and coercive behaviour, forced marriage and female genital mutilation, as defined in law.

6.16 If you are a perpetrator of domestic abuse, we may take action against you including seeking eviction under the relevant Housing Acts (and any subsequent amendments).

6.17 We may also share this information with other housing providers and agencies for the safety of victims/survivors and other service users.

Criminal Behaviour

6.18 You must not use your home or the surrounding area for any criminal or unlawful activity.

6.19 This includes but is not limited to:

- undertake or prepare for any terrorist actions, or participate in any banned extremist organisation
- supply, sell, or store illegal drugs categorised as Class A, B or C under the Misuse of Drugs Act 1971
- cultivate/produce/use/consume any Class A, B or C drug or allow others to gather at your property (either within your home or communal areas) to use, share or consume any Class A, B or C drug
- slavery or human trafficking
- selling, storing, using or handling stolen goods or belongings
- selling, storing, using or handling any item or equipment or software to commit a fraud, financial or otherwise
- store, carry in your possession, or keep in your home any offensive or banned weapon, knife, firearm, unless you hold specific authorisation. If you have a legal firearm, you must use and store it only in ways permitted in law
- use or allow your home to be used for prostitution or as a brothel
- cause criminal damage to any property or furnishings belonging to the council, landlord or others

6.20 Criminal behaviour may result in immediate legal action, including possession proceedings.

Abuse of employees and others

6.21 You must not threaten violence against, assault, obstruct, intimidate, harass, verbally abuse, or use insulting words or behaviour that is likely to cause alarm or distress, towards any Solihull Council or SCH employee, councillor, contractor or anybody else directly engaged in the delivery of the landlord service.

Use of Surveillance Equipment (e.g. CCTV, video doorbells)

6.22 Surveillance equipment such as CCTV, video doorbells, drones or similar devices must not be used in a way that causes nuisance, alarm or distress.

6.23 Such equipment must not be used in a way that interferes with the privacy or rights of others to enjoy their home or locality.

6.24 Such behaviour includes but is not limited to:

- Unlawful use of CCTV or surveillance equipment or software
- Any form of cyber bullying, e.g. through social media or messaging systems
- Intrusive use of devices such as drones, lasers, and video doorbells
- Storage and misuse of personal data in contravention of current Data Protection legislation and/or regulation.

6.25 Misuse of surveillance equipment may be treated as anti-social behaviour and dealt with under our Anti-Social Behaviour Policy.

Vehicles and Parking

6.26 You must not park a vehicle anywhere on the property unless it has a garage, parking space or driveway with hardstanding, and a dropped kerb.

6.27 You must not park untaxed, uninsured or unroadworthy vehicles on land owned by us.

6.28 You must not build a parking space, garage or driveway without our written permission and other relevant permissions.

6.29 You must only park on land designated for parking, and you must not park in disabled parking areas unless you hold a Blue Badge.

6.30 You must not park in such a way that is likely to block or obstruct other vehicles, grass verges, drives, footpaths or other vehicle or pedestrian access including double parking and designated disabled parking.

6.31 You must not park any caravans, trailers, boats or any vehicle of over 1 tonne in weight, at the property or on land owned by us, without our prior written permission. We may remove such vehicles with 24 hours' notice and recharge you any related removal and/or storage costs.

6.32 You must not allow anyone to live in a caravan or motorhome parked at, or in the vicinity of, your home.

6.33 You are not permitted to carry out repairs to any vehicle except basic running repairs to your own vehicle. Where we believe you may be receiving payment for vehicle repairs, we may ask you to prove that the vehicle belongs to you.

6.34 You must not sell, rent or give away any parking space or garage that we provide for you as part of your tenancy agreement.

7. SAFETY IN YOUR HOME

Fire Safety

7.1 Fire safety affects everyone. A fire in one home can quickly spread to others particularly in blocks of flats. You must act responsibly to prevent fires from happening, and comply with all fire safety legislation, instructions and landlord policies.

7.2 You, your household and visitors must follow any fire safety or evacuation instructions issued by us or the emergency services.

7.3 You must not remove, interfere with, or damage, any equipment for detecting or putting out fires in your home or shared areas, for example, smoke or heat detectors or sprinkler systems.

7.4 You must not remove, interfere with, or damage self-closing devices fitted to doors.

7.5 You must not wedge open main entrance doors or fire doors to communal areas.

7.6 If you live in a flat, you must not screw anything to your front door to ensure that your door remains fire compliant. If you do so and we have to change the door as a result, you may be charged the full cost of replacement or remedial works.

7.7 Bonfires are not permitted in your own garden or in any communal area.

7.8 Fireworks, fire pits, barbecues and other relevant external appliances in your own garden must be used safely and in line with manufacturer instructions and are not permitted in communal areas or on balconies.

7.9 Items must not be stored on balconies or in communal areas due to fire risk.

7.10 If you live in a flat and oxygen is used in your home, you must inform us so appropriate safety arrangements can be made. We may also pass this information onto the Fire Service to ensure they are aware of this in the event of a fire.

7.11 You must not fit security grilles or gates to your windows or doors (or anything else that may restrict access or exit from your home) without our written permission. If you live in a flat, permission will not be granted. Grilles and gates may make it difficult for the emergency services, including the fire service, to access your home or make it difficult for people inside the property to escape safely in an emergency.

7.12 You must not fix or drape any items to/from the external structure of your home (including window ledges, drainpipes and gutters) without our prior written permission. We are likely to permit festive external lights i.e. Christmas, Diwali or other celebrations for the reasonable length of time of the celebration.

Electrical and Gas Safety

7.13 You must not tamper/interfere with gas or electricity supplies, meters, pipes or any other equipment provided to or at, your home.

7.14 You must not illegally abstract gas or electricity, including bypassing meters or using communal supplies or a supply that does not belong to your property.

7.15 You must allow access for gas safety checks, electrical inspections, servicing of heating systems and maintenance of smoke and carbon monoxide detectors.

7.16 Any gas appliance you install, such as a cooker, must be fitted and maintained by a suitably qualified Gas Safe registered engineer.

Communal Safety Rules

7.17 We operate a Clear Spaces Policy for communal areas of flats. You must always keep communal and shared areas clear and free from obstruction. This includes communal landings, entrance halls, stairways (and under stairways), bin stores, drying rooms/areas, balconies, or any other shared areas such as communal wall spaces.

7.18 This is to reduce the risk of fire breaking out and compromising fire escape routes, as well as removing risk of obstruction and restricting access to the emergency services. You must comply with all conditions of the Clear Spaces Policy.

7.19 Smoking in any communal shared area is illegal and therefore prohibited. Vaping in shared communal areas is also not permitted.

7.20 You must not change locks, fit additional locks or otherwise restrict access to communal entrance doors or gates.

7.21 We may immediately remove any items that we identify in communal areas without giving you prior warning.

7.22 If the items are dangerous or hazardous as per section 7.23, or considered to be rubbish, we will dispose of them immediately. Otherwise, we will store them and give you chance to retrieve them before we dispose of them.

Storage and Hazardous Materials

7.23 You must not store dangerous, hazardous, flammable, explosive or toxic materials, liquids, gases or tools in your home, or in any communal areas, including petrol/diesel, and you must not use portable oil or paraffin heaters or gas heaters/portable gas cookers which run off bottled gas in your home.

7.24 Portable gas heaters, paraffin heaters, bottled gas cookers and similar appliances are not permitted.

7.25 You must not store excessive quantities of items that create health, safety or fire risks or prevent inspections, repairs or compliance checks.

Mobility Scooters and e-Transport

7.26 Charging of mobility scooters and e-transport is only permitted inside your home and must not be stored or charged in communal or shared areas at any time.

7.27 Mobility scooters, chargers and other e-transport of ancillary electric devices must be kept in a safe condition and charging equipment must be maintained in accordance with the manufacturer's instructions.

7.28 You will be responsible for the cost of repairing any damage caused by mobility scooters or e-transport to your home, communal areas or other property we own or manage.

7.29 Detailed information is available in our Mobility Scooter and E-Transport Policy.

8. YOUR RIGHTS

Rights Depending on Your Tenancy Type

8.1 Your statutory rights depend on the type of tenancy you hold, as set out in law and summarised in this agreement.

8.2 Some rights do not apply to introductory, starter or demoted tenancies, except in limited circumstances permitted by law.

8.3 Full details of the tenancy types and your rights are detailed in our Tenancy Policy.

Security of tenure

8.4 As long as you live in the property as your only or principal home, we can only end the tenancy by getting a court order for possession. We may end your tenancy by giving you four weeks' notice in writing.

8.5 At any time during this tenancy, we may seek to end the tenancy, relying on one or more of the grounds for possession set out in this agreement, by serving you with:

- A Notice Seeking Possession (secure tenants)
- A Notice of Proceedings for Possession (introductory tenants)
- A Notice of Forfeiture (fixed-term tenants)

8.6 If we serve you with a Notice of Proceedings for Possession, a Notice of Forfeiture or a Notice Requiring Possession, and we decide to go to court, you have the right to ask for a review.

Your Right to Occupy

8.7 Unless your tenancy has come to an end, you have the right to live in your home during the tenancy without interruption or interference by us unless any of the below apply:

- We need access to your home to inspect it, carry out compliance works, access in the event of an emergency, let a prospective tenant view it, carry out repairs, maintenance or improvement work, or check any installation in your home.
- You break any term of your tenancy agreement
- You stop occupying the property as your only or principal home
- Court grants an order for possession or closure of your home

8.8 The people who can live in your home are those you have told us about. You must also tell us within 28 days if there are any changes to your household, such as a new baby, adopted/fostered children, or anyone leaving your household, or a person resides at the property for more than 28 consecutive days.

Taking in Lodgers and Sub-Letting

8.9 You may take in a lodger, but you must get our written permission before they move in. We will not unreasonably refuse permission.

8.10 You must not allow your home to be occupied by more people than are permitted by law and/or in accordance with SMBC's Housing Allocation Scheme. If you want more than that number of people to live in the property, you will need our permission before they move in. We will not normally refuse permission if the increase is a result of your family growing, but we will not normally give permission for you to have lodgers that would result in the property being overcrowded.

8.11 You must never sublet the whole of your home to another person. Should you do so, you will lose your security of tenure and we may take action to end your tenancy.

8.12 You must obtain our permission before sub-letting part of your property (e.g. a bedroom in your home), to another person. If you sub-let part of your property without prior agreement, we may take action to end your tenancy. We will not normally give permission to sub-let part of the property if this resulted in the whole of the property being overcrowded in accordance with SMBC's Housing Allocation Scheme.

8.13 Short-term or holiday lets, such as Airbnb or similar arrangements, are not permitted under any circumstances.

8.14 Introductory tenants cannot take in a lodger or sub-let any part of the property unless there are exceptional circumstances.

Right to Exchange

8.15 You may exchange your home with another eligible tenant of SMBC, SCH, or another registered social landlord.

8.16 You must obtain written permission from all landlords involved before an exchange takes place.

8.17 We will only refuse permission where the law allows, such as where there is a possession order or where a notice of seeking possession has been served. We may attach reasonable conditions to our consent such as paying any rent arrears or putting right any other breach of the tenancy conditions.

8.18 If either party pays money or offers another incentive to any other party to obtain an exchange, this will be a breach of this agreement. You may then lose your home.

8.19 An exchange completed without written permission is a breach of this agreement and may result in legal action. If this occurs, you will not be able to return to your original property and will not automatically be offered alternative housing.

8.20 Introductory tenants (including any extension periods), and demoted tenants, do not have the right to exchange.

Assignment (transfer)

8.21 Assignment is not allowed except by way of mutual exchange, a court order in certain matrimonial, civil partnership or Children Act proceedings or to a person eligible to succeed to the tenancy.

8.22 An introductory or starter tenancy cannot be assigned except in connection with matrimonial proceedings, Children Act proceedings or to a person who would be qualified to succeed if the tenant died immediately before the assignment.

8.23 An assignment to a child under 18 is not permitted other than by way of a court order.

Right to Succeed

8.24 The rights of succession set out below comply with the Housing Act 1985 and Localism Act 2011.

For secure tenancies granted before 1 April 2012
8.25 A person will be qualified to succeed to the tenancy where they occupy the dwelling house as their only or principal home at the time of the tenant's death and is either:

- The sole tenant's spouse or civil partner
- Another member of the tenant's family and has resided with them for 12 months prior to their death

8.26 This will not apply where the sole tenant was themselves a successor. By law there is only one right to succession, so a second succession is not possible. If your

tenancy was passed onto you following the death of someone else, you cannot pass the tenancy on again to another person following your death.

8.27 Where there is more than one potential successor to a tenancy, the tenant's spouse or civil partner is preferred to another member of the tenant's family.

8.28 Where there are two or more other members of the tenant's family qualified to succeed, they should try to decide amongst themselves who is to succeed. If there is no agreement, we will make the final decision.

For secure tenancies granted on or after 1 April 2012

8.29 A person will only be qualified to succeed the tenant under a secure tenancy if he or she occupies the property as their only or principal home at the time of the tenant's death and is the tenant's spouse or civil partner.
A person who was living with the tenant as the tenant's wife or husband is treated as the tenant's spouse, and a person who was living with the tenant as if they were civil partners is treated as the tenant's civil partner.

8.30 We may, in our discretion, allocate a tenancy of the property to someone residing with a tenant at the time of the death of the former tenant even if they are not entitled to succeed to that tenancy, in circumstances where a tenant dies and another household member (who does not have succession rights to the tenancy) has been:

- living with the tenant for the year prior to the previous tenant's death and the property was their sole or principal residence for a year before the previous tenant's death; or
- has been providing care for the tenant and the property was their sole or principal residence for a year before the previous tenant's death; or
- has accepted parental or caring responsibility for the former tenant's dependants who were living in the property as their sole or principal residence at the time of the previous tenant's death and needed to live with them in order to do so
- and is eligible and qualifies under the Council Housing Allocation Scheme.

8.31 Where the tenancy of the property is not granted to the non-successor, but the Council agrees to offer alternative accommodation, the non-successor shall be placed in a priority band as set out in SMBC's Housing Allocation Scheme.

8.32 Property size will be assessed under the bedroom standard, detailed in SMBC's Housing Allocation Scheme. Only household members who can provide evidence that they were residing in the property for the year prior to the tenant's death will be included in the housing application.

8.33 Succession does not apply if a court has made an order under section 24 of the Matrimonial Causes Act 1973 (property adjustment orders made in connection with matrimonial proceedings), section 17(1) of the Matrimonial and Family Proceedings Act 1984 (property adjustment orders after overseas divorce), or paragraph 1 of Schedule 1 to the Children Act 1989 (orders for financial relief against parents).

8.34 All claims to succeed to the tenancy must be made to us in writing within three months of the death of the tenant.

8.35 Further details on succession rights are included in our Tenancy Policy.

Right to Buy

8.36 If you are a secure tenant and a ‘qualifying person’ (as defined in section 171B of the Housing Act 1985 (as amended)), you may have the Right to Buy your home.

8.37 These rights do not apply during probationary periods (including any extension period) or where the property is excluded by law.

Right to Repair

8.38 Secure tenants have the right to exercise a right to repair in certain circumstances if we do not complete certain urgent repairs in time.

8.39 Where you have reported the need for a qualifying repair and we have, without good reason, failed to carry out the repair on time, you can request another contractor to complete the repair at no cost to you.

8.40 If the second contractor does not complete a qualifying repair on time, you may be entitled to compensation.

Right to Make Improvements

8.41 You may make improvements, alterations and additions to your home, including putting up aerials, installation of external CCTV and/or video doorbells, external decoration and additions such as a shed, greenhouse, garage, external store or driveway, or alterations to our installations, fixtures and fittings, as long as you get our written permission first.

8.42 Where permission is granted, you will be responsible for future repairs and/or maintenance of the improvement, alteration or addition. All improvements must be completed to our satisfaction.

8.43 You must obtain all necessary approvals (for example, planning permission or building regulations approval) beforehand.

8.44 You must comply with any building regulations and other relevant regulations including gas, electricity and asbestos beforehand. It is your responsibility to ensure that all relevant permissions are obtained and to provide us with copies when requested.

8.45 If you do not obtain written permission, we may require you to remove unauthorised alterations or take another action to put things right. If you do

not comply with our request, we may take legal action such as an injunction or repossession of your home. We may also pursue a civil debt action if we have to put right any unauthorised alterations undertaken at your property.

8.46 If we give you permission, this may have conditions attached to it. We do not normally charge for giving you permission to do something, although you may incur costs to comply with a condition.

8.47 Any alterations or improvements will normally become our property when the tenancy comes to an end. Alternatively, at the end of your tenancy we may ask you to remove, at your own expense, any structures you have added, and make good the fabric of the building. This applies even if permission was granted to you to make the alteration or improvement. If you fail to do so and we have to put this right, you will be recharged for the cost of these works.

8.48 We will not unreasonably refuse your request to carry out alterations or improvements. If we do, we will inform you of our reasons.

8.49 Introductory and starter tenants do not have the right to carry out any alterations or improvements to their home (including any extension period).

Right to Compensation

8.50 Depending on the type of improvements, you may be entitled to receive compensation for them if you end your tenancy. This will be explained further at the time you apply for permission to carry out the works.

8.51 If a fixed-term tenancy comes to an end and another tenancy (of any description) is offered and accepted for the same property, then there will be no right to compensation for improvements.

Right to Be Consulted and Changes to This Agreement

8.52 We are committed to working in partnership with tenants.

8.53 We may change the terms of this tenancy agreement by serving a Notice of Variation, giving you at least four weeks' notice.

8.54 If we serve a Notice of Variation, we will first serve a Preliminary Notice in accordance with Section 102 and 103 of the Housing Act 1985 and consult you on any changes as legally required.

8.55 We will also consult you where changes to housing management or maintenance services are likely to have a substantial effect on you, your home or your tenancy.

8.56 Consultation does not apply to changes in rent or service charge levels.

8.57 Changes to a term of a tenancy which is implied by an enactment will apply automatically and does not require consultation. This includes an enactment comprised in subordinate legislation (within the meaning of the Interpretation Act 1978).

8.58 We will provide opportunities for tenants to influence and scrutinise our housing services and will publish information about performance and tenant satisfaction, including Tenant Satisfaction Measures required by the Regulator of Social Housing.

8.59 In providing a housing service we will have regard to the appropriate regulatory framework and guidance issued by the Government or Social Housing Regulator, but neither the framework nor guidance form part of this agreement.

Complaints

8.60 If you believe we have not met our responsibilities under this agreement, you may make a complaint in accordance with our Complaints Policy.

8.61 You must tell us how we have broken the conditions and give us the opportunity to put things right.

9. ENDING YOUR TENANCY

Giving Notice

9.1 If you wish to end your tenancy, you must give us notice in writing and provide a forwarding or contact address.

9.2 If you are a weekly tenant, you must give at least four weeks' written notice ending on a Monday.

9.3 If you are a monthly tenant, you must give at least one month's written notice, starting from the date the notice is served on us.

9.4 If you do not give the correct notice period you will continue to be responsible for the rent and other charges until the tenancy ends.

9.5 If this is a joint tenancy, either tenant may end the tenancy by giving notice.

9.6 Where a joint tenancy is ended, any remaining occupier does not automatically have the right to remain in the property and may need to apply for housing or seek legal advice. Where a remaining occupier wishes to remain in occupation, we may consider granting a new tenancy in accordance with the Council's Tenancy Policy.

9.7 If you go to court because of a divorce, a domestic dispute or a relationship breakdown, the court will decide whether to order the transfer of the tenancy to one or other of the partners. The tenancy rights will end for the other person who must leave the property.

9.8 We may accept shorter notice periods in exceptional circumstances, but this must be agreed by us.

9.9 Once notice has been given, it cannot be withdrawn unless we agree. The tenancy will end on the date specified in the notice or determined in accordance with arrangements made under sections 9.2, 9.3 and 9.8 (above) of this agreement.

9.10 If you have a fixed-term tenancy, this agreement will only end on the date given in the notice if, on that date, no arrears of rent are owed to us, and you are not otherwise materially in breach of a term of this agreement.

9.11 You must allow us access to view or inspect the property within the last 28 days of your tenancy and during normal working hours, for the purpose of accompanying a prospective new tenant or for other valid purposes. We will give you at least 24 hours' notice for these visits.

9.12 In the event of your death, your next of kin or executor must notify us in writing of your death and terminate the tenancy. The tenancy will continue until we receive notice and failure to terminate the tenancy may incur further costs against your estate including unpaid rent and charges.

9.13 Termination of this tenancy agreement does not affect any other right or remedy that either party may have in relation to any earlier breach of this tenancy agreement.

Leaving Your Home

9.14 You must give vacant possession of the property on or before the tenancy end date.

9.15 You must remove all furniture, personal belongings and rubbish and leave the property and any gardens clean and tidy.

9.16 We will store any items left in the property, garden, garage or other outbuildings after the tenancy has ended, for a maximum of 28 days. We will notify you at your last known address. If the items are not collected within 28 days, we will dispose of them as appropriate including selling them. Storage, removal and disposal costs will be charged to you. Any perishable items including items posing a health and safety risk will be disposed of immediately. Items of low value will be treated as waste.

9.17 You remain responsible for rent and charges until the tenancy legally ends, even if you leave earlier.

Returning Keys

9.18 You must return all keys, fobs and access devices for the property by the end of the tenancy.

9.19 This includes property keys, window keys, communal door keys or fobs, loft keys, and garage keys as applicable to the property.

Property Condition

9.20 You must leave the property in a reasonable condition, allowing for fair wear and tear.

9.21 You must not remove fixtures and fittings without our permission.

Charges After You Leave

9.22 We will take steps to recover from you any reasonable costs we incur in:

- replacing or repairing any missing or damaged items
- replacing or repairing alterations that do not comply with relevant regulations
- replacing or repairing any alterations for which we did not give our written consent
- meeting all reasonable storage and/or disposal charges when items are left in the property or garden after the tenancy has ended
- lock changes where keys, fobs or access devices are not returned
- cleaning the property.

9.23 If there are unpaid utility bills, we will pass your forwarding details and confirmation on the start and end date of your tenancy, to the utility provider. You remain liable for those unpaid bills.

10. BREACHES OF TENANCY AND LEGAL ACTION

What Happens if You Break the Agreement

10.1 You must comply with all the conditions set out in this tenancy agreement.

10.2 Joint tenants are jointly and individually responsible for complying with the agreement.

10.3 If you do not comply or if you break any of the terms and conditions of this agreement, we may use legal remedies available to us which may include re-possession of your home.

10.4 The action we take will depend on the nature of the tenancy breach and may also involve action with other agencies (e.g. Police).

10.5 We will hold you responsible for the behaviour of anyone living with you (including those under the age of 18), pets, and the conduct of visitors to your home.

10.6 If you fail to remedy a breach, we may take enforcement or legal action.

Types of Legal Action

10.7 The legal action we may take will be proportionate and reasonable and will depend on the nature and seriousness of the breach and your tenancy type.

10.8 Legal action may include, but is not limited to, obtaining a possession order, injunction, demotion order, an order suspending the right to buy of your home or by extending your introductory or starter tenancy.

10.9 The statutory grounds for possession are set out in Schedule 2 of the Housing Act 1985 and Schedule 2 of the Housing Act 1988 as appropriate.

10.10 If we obtain an injunction against you, and you breach the terms of the injunction, that is a mandatory ground for possession of your property.

10.11 If legal action is taken, we will seek additional court orders relating to legal costs incurred by us and you may be liable for our legal costs.

10.12 We can repossess your home if you have given false information to obtain the tenancy and/or if someone has given false information on your behalf to obtain the tenancy.

Costs and Recharges

10.13 Any reasonable costs or liability incurred by us as a result of you breaching or failing to comply with any of these tenancy conditions will be repayable in full and may be recovered as part of your rent account.

10.14 We will tell you when a recharge has occurred and the reasons why.

10.15 Costs that may be recharged include, but are not limited to:

- Rectifying any work to the property that you have carried out without our permission to do so
- Rectifying any work to the property that we consider to be unsatisfactory, even where we have given you our permission
- Rectifying damage or vandalism to property owned by us whether deliberate, accidental or through neglect
- Changing the locks and securing a property including a property that you have abandoned

- Replacement locks where we undertake the work in exceptional circumstances
- Replacement fobs
- Costs relating to removal/storage/disposal of items including:
    - Items stored in any communal area (on reasonable notice except for emergencies)
    - Clearing the property or garden of belongings and/or rubbish including scrap, dangerous or toxic substances, flammable items and materials, and unsightly items, where reasonably necessary
    - Removal of hoarded items from your home which prevent us from completing compliance, repairs and maintenance works, or create a significant health and safety or fire risk, where reasonably necessary
- Removal of self-setting trees or self-setting climbing plants
- Cleaning of the property due to poor hygienic standards where reasonably necessary
- Cleaning up animal faeces including communal areas
- Fly tipping and failure to correctly use waste and recycling bins provided
- Any legal costs incurred through legal action due to a breach of tenancy conditions
- Any costs identified in section 9, Ending Your Tenancy, Charges After you Leave

PART C
Supporting Information

Assignment
This is about the transfer of legal rights (usually a tenancy) from one person to another.

CCTV / video doorbells
Devices such as CCTV or video doorbells must be used responsibly. They should not record inside another person's home, monitor communal areas without permission or be used to harass or intimidate others.

In some cases, surveillance equipment may be approved as part of safety or safeguarding arrangements.

Communal Area
Any part of the building and/or land that all tenants share or use, for example shared entrance and exit, stairways, landings and corridors, lifts, communal resident rooms, bin areas, internal or external drying areas, shared gardens and shared alleyways or pathways.

Condensation, Damp and Mould

Condensation can happen in most homes, especially during colder months.

We are responsible for structural problems and serious damp. You should report issues early so we can investigate and take appropriate action.

Eviction

This happens if you are required to leave your home after any legal proceedings such as possession proceedings. We will not evict you without a court order.

Fixtures and Fittings

Items that are permanently attached or fixed to the property, such as a fitted kitchen, boiler, sink or toilet.

Fly-tipping

This means dumping or disposing of rubbish and unwanted items illegally.

Fobs and Access Devices

These are devices that are used for accessing communal areas of the building, such as fobs for the main entrance of a block of flats.

Home

The property let to you under this agreement, including any garden, garage, outbuilding, fence or wall. This does not include anything let to you under a separate agreement, such as a garage. The boundaries of your home are defined by the physical boundaries of your property at the date of this agreement.

Household

Anyone living at or staying in your home for any period of time.

Legislation

A general term meaning Regulations and Acts of Parliament, including any enactment comprised in subordinate legislation, within the meaning of the Interpretation Act 1978.

Locality/Community

The area around your home that may be more than the road or street where your home is.

Neighbour

Everyone living in the local area, including people who own their own home, privately rent and other social housing tenants.

Only or principal home

Your home must be the place where you normally live. Short absences, such as holidays, hospital stays, temporary care arrangements, or visiting family are usually acceptable.

Policies and Further Information
Policies and the Tenant Handbook are available on our website or on request.

Property
The property you live in, including any garden, but not including any communal or shared areas.

SCH
Solihull Community Housing are the Arm's Length Management Organisation that manages council housing and delivers housing services on behalf of Solihull Metropolitan Borough Council (SMBC). SCH acts on behalf of SMBC in providing housing management services to Council tenants.

Schedule
The front cover of your tenancy agreement that explains the type of tenancy you are being offered.

SMBC
Solihull Metropolitan Borough Council

Website
www.solihullcommunityhousing.org.uk unless specified otherwise.

You
The tenant, and in the case of joint tenants, all of you.

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Item 17 - Appendix C: TABLE OF COMPARISON CHANGES – CURRENT TENANCY AGREEMENT VS NEW TENANCY AGREEMENT

The new agreement modernises and simplifies the tenancy framework. It improves tenant understanding, supports regulatory compliance, strengthens risk management and enforceability, and reduces duplication and legal ambiguity.

The key changes are detailed below:

		Current Tenancy Agreement	New Tenancy Agreement	Impact
1.	**Overall Structure & Accessibility**	Long, traditional, continuous, legal format. No summary or quick guide. Rights and responsibilities spread across multiple sections. Heavier reliance on cross-referencing and repetition. Harder to navigate and interpret.	Major change. Introduces a clearer three-part structure: • Part A – Key Information (Quick Guide) • Part B – Full Legal Agreement • Part C – Supporting Information / Definitions Clearly separates summary vs legally binding terms. Written in simpler, clearer language with repetition removed and concepts grouped logically. Uses plain English explanations and practical examples (e.g. noise, CCTV, fly-tipping, damp and mould prevention).	Improves transparency and ease of understanding for tenants. Reduces ambiguity and strengthens clarity and legal defensibility. Supports compliance with the Regulator of Social Housing Consumer Standards and aligns with the Housing Ombudsman Complaint Handling Code principles of fairness and clarity.

2.	**Landlord definition**	Landlord not clearly identified throughout the agreement.	Explicitly names SMBC as the landlord, with SCH identified as the managing agent acting on behalf of the Council.	Makes clear to tenants who their landlord is and supports compliance with the Regulator of Social Housing Transparency, Influence and Accountability Standard.
3.	**Tenancy types and reviews**	Tenancy types and reviews legally correct but harder to follow. Less explicit about consequences of failing to engage in reviews. Reviews mentioned but spread across sections. Demotion included but less prominent.	The new agreement includes: Clearer explanation of: • All tenancy types • Automatic outcomes at the end of probationary periods • Explicit right to review extensions Demoted tenancies more clearly explained including duration and review rights. Clear link to Tenancy Policy and review criteria. Mandatory participation in reviews, with explicit consequences for failure to engage.	Provides clearer framework for tenancy reviews and outcomes. Reduces legal ambiguity and challenge risk.

4.	**Rent, charges and financial responsibility**	More complex and technical. Housing Benefit references, less on Universal Credit Housing Benefit references, with less emphasis on Universal Credit. Arrears recovery provisions are spread across clauses. Less emphasis on tenant accountability for delays and arrears.	Adds or makes explicit: • Weekly and monthly rent cycles • Rent payable in advance on day of sign up • Clear Universal Credit and Housing Benefit obligations • Direct deductions from DWP where applicable • Clear payment methods, with direct debit as the preference • Clear explanation of what the landlord is not responsible for (e.g. contents insurance, utility bills) Strengthened wording on: • Responsibility for rent even when benefits are delayed • Transfer of credits and offsets across tenancies • Recovery of overpayments	Strengthens clarity around rent liability and welfare interactions. Supports effective income management and dispute reduction. Provides a clearer framework for arrears prevention and recovery, and reduces the potential for disputes. Better aligned to Universal Credit and current welfare arrangements.

5.	**Landlord responsibilities**	Responsibilities correct but less clearly bounded. Less explicit on compliance regimes.	Clearer wording in the new agreement. Clearer limits on landlord responsibility (e.g. appliances, meters). Strengthened wording on compliance checks, fire safety, equality and reasonable adjustments.	Supports alignment with legal and regulatory requirements. Reduces ambiguity and complaint risk.
6.	**Access to the property**	Access provisions are included but are less prominent and less clearly linked to repairs, inspections, compliance and safety requirements.	Includes a dedicated "Allowing Access to Your Home" section, covering reasonable access for inspections, repairs, compliance works, safety checks and emergencies. It also covers fire risk assessments and court action where access is unreasonably refused.	Provides a clearer basis for arranging access, managing non access, meeting health and safety duties, and reducing delays to essential works.

7.	**Tenant responsibilities**	Current agreement covers core obligations (repairs, behaviour, pets, etc), but: • Less detailed • Fewer modern risks addressed, for example damp and mould • No explicit hoarding, CCTV, or e-transport clauses	Expanded and updated. New tenancy agreement adds/clarifies: **Condensation, damp and mould** • Explicit tenant duties to ventilate, use extraction, and clean condensation and mould • Clear distinction between tenant and landlord responsibility **Pets and animals** • Clear limits on number of large pets • Explicit Dangerous Dogs Act references • Power to withdraw permission where welfare or nuisance concerns arise • Clear responsibilities during visits (dogs secured) **Health, safety and fire safety** • Clear Spaces Policy • Hoarding • Balconies	Updates tenant obligations to reflect current risks and standards. Provides clearer basis for proportionate enforcement action.

			• Mobility scooter and e-transport • Smoke-free visits for staff safety **Surveillance equipment** • Use of CCTV, video doorbells, drones etc **False statements and tenancy fraud** • An explicit enforcement route for false statements and tenancy fraud. **Waste and recycling** • Explicit wording on misuse of bins, with recharge powers.	
8.	**Anti-social behaviour and conduct**	Covers ASB, harassment, nuisance and criminal acts but: • Less detailed and less modernised • Less explicit about modern statutory definitions • One single clause relating to domestic abuse • Only general criminal/illegal activities clause	Updated and strengthened. Much broader definitions: • Includes hate crime, domestic abuse, exploitation, online abuse • References to Domestic Abuse Act 2021 with clear definitions	Aligns behavioural expectations with current legislation. Strengthens safeguarding and evidential clarity for interventions and enforcement.

			• Hate crime based on protected characteristics • Lists detailed examples of behaviour • Explicit responsibility for the behaviour of visitors, children and pets • Explicit reference to abuse of staff and contractors • Clear link between behaviour and enforcement outcomes • Expanded details of criminal behaviours including exploitation, extremism and modern slavery, with clear statement that criminal behaviour may lead to immediate legal action Explicit ability to: • Share information with partner agencies • Take swift enforcement action	

9.	**Safety and compliance**	Safety requirements are embedded across clauses, but are not consolidated, modernised or prominent.	Expanded in the new agreement. New dedicated Safety section covering: • Fire safety compliance rules • Electrical/gas obligations • Mobility scooters, e-transport • Clear Spaces Policy • Hazardous materials control New clauses more adequately cover: • Clear fire safety rules for flats, including doors, balconies and storage. • Explicit bans on portable gas heaters and charging e-transport in communal areas • Obstructing escape routes • Mandatory smoke-free homes during visits • Hoarding and excessive storage	Consolidates safety requirements in line with current building and fire safety expectations. Supports risk management and compliance assurance.

10.	**Ending tenancies**	Similar powers exist in current tenancy agreement, but: • Less clearly explained • Less detailed operational handling (e.g. disposal, costs) • Less emphasis on recharges	Much clearer on: • Notice periods for weekly vs monthly tenancies • Property condition on leaving • Key returns • Post-tenancy charges • Utility handover • Responsibility until legal end date Explicit right to store and dispose/sell goods. Clearer responsibilities after leaving.	Clarifies responsibilities and process at tenancy end. Reduces risk of disputes and unplanned cost to the landlord.
11.	**Enforcement and legal action**	Very detailed statutory grounds for possession More legally comprehensive but less user-friendly Enforcement powers are present but less clearly framed.	Retains statutory grounds but simplifies and explains: • Types of legal action • Proportionate and reasonable approach (explicit) • Clear recharge framework for breaches including legal costs and recharges (e.g. hoarding, clearance, fire risks). • Fraud and false statements consequences	Sets out a clearer, proportionate approach to enforcement. Supports consistency and defensibility of decision-making.

			Clearer link between injunction breaches and possession.	
12.	**Equality, vulnerability and support**	Not explicitly framed in equality or vulnerability terms.	New agreement is explicit on: • Equality and diversity duties • Vulnerability adjustments • Support expectations	Makes explicit how equality and vulnerability are considered. Supports compliance with regulatory and safeguarding duties.
13.	**Notices and communication**	Heavy reliance on post and traditional service methods.	Modernised to explicitly allow for: • Email and electronic service (where agreed) • Flexibility around office addresses	Provides flexibility while retaining clarity on service of notices. Supports modern, efficient service delivery where law permits. Operationally practical and future-proofed.
14.	**Fraud prevention measures**	Contains only a possession ground for false statements.	Introduces photographs at sign-up and tenancy changes. Explicit reference to social housing fraud, tenancy fraud, and false statements.	Improves the ability to prevent and tackle tenancy fraud.

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Solihull Metropolitan Borough Council

Fair Treatment Assessment Form

1. FTA Lead & Team	
Directorate	Economy & Infrastructure
Team	SMBC Housing / Solihull Community Housing
Name of Officer completing the FTA	Carol Trappett
Role of person completing the FTA	Head of Housing and Neighbourhoods, Solihull Community Housing
Contributors to the FTA	Jennifer Mason, Commissioning and Partnerships Manager (Housing & Homelessness SMBC)
Equalities Team Lead Support for this FTA	Niku Mawby - Senior Equalities Advisor
2. FTA Timescales	
Key dates	This is a draft FTA in advance of undertaking full tenant consultation on the proposed changes to the council's tenancy agreement. Consultation is anticipated from August to October 2026. Analysis of consultation responses will include protected characteristics where data is available to inform the final FTA and ensure any disproportionately affected groups are appropriately mitigated. The FTA will be presented to Cabinet Portfolio Holder for Housing following tenant consultation for final approval. The Council's Equalities Team will review and counter-sign this FTA following full completion after consultation.
3. Context	
Name of function/strategy/policy /procedures	Council Housing Tenancy Agreement

For whom is the policy or process intended? Tick all that apply.	✓ **Borough council tenants**	**Specific service users**	**Employees**	**Elected members**	**Other (Registered Providers)**
Is this a new function/strategy/policy/procedure?	This is a revision of the 2012 Tenancy Agreement				

Purpose and intended aim of the current function, strategy, policy, procedures	It is a legal requirement under the Housing Act 1985 to provide tenants with a written statement of the terms of their tenancy, including their rights and obligations, rents and other charges, and repair responsibilities. The same requirements apply under the Regulator of Social Housing Tenancy Standard. The Council's Tenancy Agreement was last updated in 2012. At that time, it reflected the legal, regulatory and operational environment then in force. However, it no longer fully reflects changes in housing law and regulation, the increased focus on building safety and fire safety, new approaches to managing anti-social behaviour, the Social Housing Regulation Act and strengthened consumer standards, lessons learned across the sector regarding damp, mould and tenant safety, and the Domestic Abuse Act 2021. There are also new and emerging housing management issues in the housing sector such as increased use of CCTV, video doorbells, hoarding, cyber harassment, e-bikes and mobility scooters. The existing tenancy agreement contains limited or no reference to many of these matters, reducing clarity for tenants and creating potential operational risks for the Council and SCH.

Proposed changes	The new agreement is a comprehensive modernization and expansion of the existing agreement, and is clearer, easier to navigate and provides greater transparency regarding both tenant and landlord responsibilities. The new agreement: - Places greater clarity and responsibility on tenants, especially around behaviour, safety, access and compliance - Strengthens the Council's position on anti-social behaviour, recharges, and enforcement - Improves transparency and accessibility, with plain English, a clearer structure, definitions, and a quick guide - Aligns more explicitly with current legislation, regulation and post-Grenfell safety expectations The new agreement does not remove existing legal tenant rights.	
Consultation and stakeholder engagement	**Is consultation required? YES/NO** **Yes**	**If YES, say how the consultation has informed this FTA** It is a statutory responsibility to consult with all existing tenants on significant changes to their tenancy agreement. This will be an 8-week consultation, which is proposed to run from August to October 2026. This consultation will be inclusive with consideration given to large print, easy read, translation services, British Sign Language, telephone support and paper responses where required. SCH will utilize data known to them regarding protected characteristics and vulnerabilities to ensure that tenants receive the information in a format that is understandable and does not exclude them from meaningful consultation. Tenants must be informed of the change using a formal process which includes serving a Preliminary Notice of Variation and a Formal Notice of Variation. Where applicable, these will be supplemented by Easy Read documents. Feedback and comments from this consultation will be utilized in forming a final version of the Fair Treatment Assessment.
Business risks from proposals	**No**	There is a greater business risk by not updating the tenancy agreement. This would leave the Council with an outdated tenancy agreement that was drafted for a housing environment that has changed substantially since 2012. The new agreement modernizes the contractual relationship between the Council and its tenants, reflects current legislation and best practice, and provides greater clarity for both tenants and staff.
4. Equalities data		
What equalities data is available to inform this FTA?	The new tenancy agreement will apply to all existing and new tenants from April 2027. The profile of tenant as at 31 December 2025 s is detailed below: Age 16 to 24 – 349 – 3.2% 25 to 34 – 1426 – 13.2% 35 to 44 – 2065 – 19.1% 45 to 54 – 1734 – 16% 55 to 64 – 2125 – 19.6% 65+ - 3113 – 28.7% Not known – 16 – 0.1% **Gender** Female – 6755 – 62.4% Male – 4073 – 37.6% Not known – 0% **Disability/vulnerability** No – 7224 – 66.7% Yes – 3604 – 33.3%	

	Ethnicity BAME – 958 – 8.8% White British/Irish - 8660 – 80% White Other – 97 – 0.9% Do not wish to say – 141 – 1.3% Not known – 972 – 9% **Religion** Christian – 2699 – 24.9% None – 1871 – 17.3% Other – 370 – 3.4% Do not wish to say – 1512 – 14% Not known – 4376 – 40.4% **Sexual orientation** Bisexual – 40 – 0.4% Gay man – 32 – 0.3% Gay woman/lesbian - 41 – 0.4% Heterosexual/straight - 5755 – 53.1% Other – 19 – 0.2% Do not wish to say – 817 – 7.5% Not known – 4290 – 39.6%
Does the data show positive or negative impact on any specific groups?	There are a higher proportion of tenants aged 55+ living in council accommodation. Lead tenants are predominantly female. One third of all tenants are identified as having a disability or vulnerability. Ethnic origin of tenants is predominantly White British/Irish. 25% are Christian although a further 40% have not disclosed their religion. 53% are heterosexual with a further 40% not wishing to disclose/unknown.

5. Analysis		
Protected characteristics	**Please include below the identified impact positive, neutral, or negative, and what has informed the assessment (eg consultation, service user statistics, research, etc. from the above question** **Please contact relevant teams such as Public Health, Adult Social Care, HR, Children's Services, etc. for relevant policies, strategies, and general information as necessary**	**Please say what actions you intend to take to eliminate any negative impact or make other improvements and include how the actions will be tracked/monitored.**
Age	Some areas of the tenancy agreement may impact tenants based on age, particularly those over 55. This is specifically in relation to the requirement to notify absences over 28 days, digital communication methods, electronic service of notices, requirements to manage gardens and boundaries, mobility scooter restrictions and charging arrangements, compliance requirements around safety and access.	Older residents may be more likely to experience digital exclusion, need support understanding changes, and require assistance complying with some tenancy obligations. This will be mitigated through commitments to: - Meeting individual customer needs as far as practically possible both through use of known vulnerability data and through identifying additional needs throughout consultation. - Providing comparison information to identify the key changes to the agreement - Ensuring alternative non-digital methods of engagement, consultation and communication are available throughout implementation - Providing paper copies by default where requested

		- Explanation of changes where requested - Support through signposting to borough-wide services
Disability	Some areas of the tenancy agreement will have potential negative impact on tenants with a disability, particularly those with mental health conditions, cognitive impairment, hoarding disorder, autism, learning disabilities, physical disabilities requiring equipment and tenants requiring carers or support workers. These are specifically in relation to the requirement to: - participation in tenancy reviews - accessing online services, electronic service of notices, online policies, website-based guidance, digital engagement - reporting absence from the home for over 28 days - access requirements - hoarding provisions and removal of items/recharges - requirements regarding cleanliness, pest control and housekeeping - mobility scooter charging restrictions - oxygen notification requirements - Adaptation permissions	Whilst these are legitimate clauses in a tenancy agreement, the impact will be mitigated through reasonable adjustments and support arrangements including: - Reasonable adjustments under the Equality Act 2010 - Alternative communication formats - Enhanced support before enforcement action - Referral pathways to Adult Social Care, mental health services and safeguarding teams - Alternative non-digital methods of engagement, consultation and communication throughout implementation The tenancy agreement recognizes vulnerability and reasonable adjustments. Enforcement action relating to hoarding will be preceded by appropriate assessment, support and reasonable adjustment considerations where disabilities may be contributing factors.
Gender/Sex	The new tenancy agreement creates specific domestic abuse provisions, supports information sharing for victim protection, and strengthens powers against perpetrators. Given that women are disproportionately affected by domestic abuse, there is a stronger positive impact for females.	Positive impact through the strengthening of Domestic Abuse clauses.
Gender Reassignment	The new tenancy agreement strengthens protections against hate crime and harassment including behaviour targeted at people with the protected characteristic of gender reassignment. The new agreement has positive impacts for victims of domestic abuse, and vulnerable adults through the strengthening of Domestic Abuse clauses.	Positive impact relating to the strengthening of Domestic Abuse clauses and hate-crime.
Race	The new tenancy agreement strengthens clauses relating to hate-crime providing stronger assurance to anybody who may be affected by such behaviour and therefore creates a positive impact. The new tenancy agreement is substantially longer and more detailed so there are potential impacts for newly arrived residents and people with low literacy.	Positive impact relating to strengthening of Domestic Abuse clauses and hate-crime. Tenants who do not speak or read English as their first language will have access to translation services where required to ensure they have full understanding of the new tenancy agreement. An easy read summary has been produced in Part A of the tenancy agreement as a key mitigation.

Religion or belief	The new tenancy agreement strengthens clauses relating to hate-crime providing stronger assurance to anybody who may be affected by such behaviour and therefore creates a positive impact.	Positive impact relating to strengthening of hate-crime clauses. Tenants who do not speak or read English as their first language will have access to translation services where required to ensure they have full understanding of the new tenancy agreement.
Sexual orientation	The new tenancy agreement strengthens clauses relating to hate-related anti-social behaviour providing stronger assurance to anybody who may be affected by such behaviour and therefore creates a positive impact.	Positive impact through strengthening of hate-crime clauses.
Marriage or civil partnership	There is neutral effect based on marriage or civil partnership.	No negative impacts identified.
Pregnancy and maternity	There is neutral effect based on pregnancy and maternity. The new tenancy agreement includes provisions that could have a disproportionate impact on pregnant women and families with babies, through a requirement to report household changes within 28 days, property suitability reviews, responsibility for children's behaviour, and increased focus on fire safety, clutter, access and housekeeping, and restrictions around communal areas and storage.	Whilst none of these areas are discriminatory, there is a potential minor negative impact where households are adjusting to the arrival of a child and may require additional support in relation to reporting changes in household composition, property suitability, and compliance requirements. This will be mitigated through supportive approaches, reasonable adjustments, and flexibility during periods of significant family change.
Other characteristics	**Please include below if the identified impact positive, neutral or negative, and what has informed the assessment (eg consultation, service user statistics, research, etc)**	**Please say what actions you intend to take to eliminate any negative impact or make other improvements and include how the actions will be tracked/monitored.**
Care leavers	Potential impact that could affect younger tenants including care leavers who may be less experienced in managing a tenancy. This relates specifically to tenancy reviews, rent responsibility and benefit administration, recharge provisions, and property management expectations.	Some potential negative impacts have been identified. This is mitigated through existing collaboration with Children's Services when allocating social housing to care leavers, working with Personal Assistants, and completing Tenancy Ready modules prior to moving into a new home. Potential vulnerability is acknowledged in this FTA whilst also acknowledging existing processes that are in place to mitigate any disproportionality.
Carers	The agreement contains several provisions that may affect unpaid carers, namely access requirements, requirement to notify household changes, permission requirements for adaptations, absence reporting, and mobility scooter provisions. This may affect carers who often support disabled or older residents, and may also rely on equipment, adaptations, regular visitors or periods of hospital admission.	Potential indirect impact identified. This will be mitigated through reasonable adjustments, collaborative working with carers, application of policies such as the Permissions Policy and Adaptations Policy, and flexibility in tenancy management where caring responsibilities are present.
Digital Exclusion	Digital exclusion is recognized throughout this FTA as a recurring theme which may disproportionately affect a number of protected and non-protected groups.	This will also be mitigated by ensuring that alternative non-digital methods of engagement, consultation and communication are available throughout implementation. An easy-read summary has been made available at Part A of the agreement for easier understanding of the key summaries.

	Some tenants may be disproportionately affected as a result of digital exclusion, with reliance on website information, online forms, electronic notices, access to policies hosted online. In particular this relates to disabled tenants (particularly learning disability, cognitive impairment, visual impairment), older residents, vulnerable adults, tenants who do not speak or read English as a first language, and people with limited literacy.	
Groups covered under Safeguarding arrangements	This agreement contains positive safeguarding elements such as domestic abuse provisions, hate crime protections, fire safety measures, information sharing arrangements, vulnerability, and reasonable adjustment commitments. This creates a positive impact for vulnerable adults and children.	Vulnerable tenants such as elderly, disabled, or those with mental health issues will be provided with additional advice and support to help them sustain their tenancies, if required, through appropriate referrals to other professionals/groups/support services. This is already in place and will continue. Positive impact relating to domestic abuse clauses.
Families with young children	The agreement contains provisions that may affect families including responsibility for children's behaviour, anti-social behaviour provisions, and reporting household changes. There is limited indirect impact.	There is limited direct impact, mitigated through proportionate and reasonable tenancy management.
Geographical considerations	No impacts identified.	No impacts identified.
Human Rights	The new tenancy agreement has positive impacts for women, victims of domestic abuse and vulnerable adults through the strengthening of domestic abuse clauses. Human rights considerations also relate to respect for private family life and home, information sharing and surveillance provisions, access requirements/entry to homes, photographing tenants at sign up, requirements to report absences over 28 days, clearance of hoarded items, and possession / enforcement powers. Relevant rights include: - Article 8 ECHR – Right to respect for private and family life and home - Article 1 Protocol 1 – Peaceful enjoyment of possessions - Article 14 – Non-discrimination These rights have been considered for proportionality and legal safeguards.	Positive impact relating to domestic abuse clauses. Protections and legal safeguard arrangements remain therefore changes to the tenancy agreement remain neutral.

Low-income families	There may be some impact on low-income families who may be digitally excluded. This is through reliance on website information, online forms, electronic notices, access to policies hosted online. Low-income families may also be affected by the expansion of recharge and cost recovery provisions in the new tenancy agreement, specifically in relation to: - Recharge for damage - Clearance of gardens - Hoarding interventions - Lock changes - Legal costs - Removal/storage costs - Waste disposal costs - Access injunction costs	Service access will be mitigated through ensuring alternative non-digital methods of engagement, consultation and communication are available throughout implementation. Whilst recharge and cost recovery are reasonable clauses in a tenancy agreement, households with financial hardship are more likely to be adversely affected. This will only occur where tenancy breaches result in rechargeable costs. Mitigation includes early intervention, debt advice, discretionary repayment arrangements, and affordability considerations.
Military status	There is neutral effect on military status. This is not data that is collected as part of tenancy management, but any veterans will not be disadvantaged by the proposed changes.	No negative impacts identified.
Health inequalities (e.g. groups at higher risk of Covid, diabetes, HIV, sickle cell, etc)	There are no negative effects for households with health inequalities. The strengthening of the tenancy agreement however ensures that tenants can expect to enjoy peace and quiet enjoyment of their council home and is therefore expected to have a neutral or positive impact on health inequalities.	Potential positive impact for all tenants.

6. Decision making

Evidence used to support the decision-making process and final decision	In drafting the FTA, the current profile of tenant data has been utilized in forming this Fair Treatment Assessment. These are the households that will be directly affected by proposed changes to the tenancy agreement.		
Final decision & Summary of outcome	The FTA has demonstrated that the proposed changes to the tenancy agreement will, in the main, have positive impacts on all the protected characteristics. However, there are some people within the protected characteristics of ethnicity, disability where care will be required throughout consultation to ensure translation services are offered including large print, easy ready, translation, British Sign Language, telephone support and paper responses to ensure that they are not excluded. In principle however, they are not disproportionately affected by any proposed changes to the tenancy agreement. It is recommended for approval at Scrutiny on 29 July 2026, that the FTA is agreed in principle, and subject to final amendments being made during and following the full consultation with tenants, and that the new Tenancy Agreement is adopted from April 2027.		
Key actions	**Action** Carry out consultation with all current council tenants. Finalise Fair Treatment Assessment following consultation and in conjunction with SMBC Equality Advisors.	**Due by** August-October 2026 November 2026	**Lead officer** Carol Trappett Carol Trappett / Niku Mawby

7. Communication

Arrangements for communicating the outcome of the FTA	The FTA will be communicated to our tenants via the SCH tenant newsletter and made publicly available on the SCH website. A printed version will also be made available free of charge should this be requested. All new tenants will adopt the new tenancy agreement from April 2027 which will be communicated throughout consultation and via formal statutory notice. All new tenants will have the terms and conditions of their tenancy explained to them as part of their tenancy sign-up process.

Meeting of the Board

Report title:	Proposed Changes to Rent Charging Periods	
Meeting date:	15 September 2026	
Report from:	Carol Trappett – Head of Housing & Neighbourhoods	
Report author/ lead officer:	Carol Trappett	Head of Housing & Neighbourhoods caroltrappett@solihull.gov.uk
Report type:	Open	
Decision type:	~~Assurance~~	~~Approval~~ Information

1. Report overview/purpose

1.1 This report sets out proposed changes to the Council's rent charging period from the current 50 weeks to 52 weeks.

1.2 The proposed change would apply to all existing council tenancies, just under 10,000 in total. It is intended to simplify rent administration, improve alignment with Universal Credit and reduce confusion for tenants and officers.

1.3 Cabinet Member for Housing approved the proposals at Member Briefing Session held on 20 July 2026. Tenants will now be consulted on both the changes to the rent charging periods and the new proposed tenancy agreement at the same time, with any proposed implementation from April 2027, subject to consultation feedback and subsequent approval.

2. Recommendation

2.1 The Board is asked to:

(1) Note the proposed change in rent-charging periods from 50 weeks to 52 weeks
(2) Note that this proposal has been approved by Cabinet Member for Housing to progress to tenant consultation
(3) Note that following statutory tenant consultation, a further report will be presented to a Cabinet Member decision making session for final approval

3. Matters for consideration

3.1 The Council currently operates a 50-week rent charging cycle for the majority of its tenants, providing two rent-free weeks each financial year. This approach is

increasingly uncommon across local authorities and housing providers, with the majority now operating 52-week rent cycles.

3.2 A 50-week model creates operational complexity and inconsistency with welfare benefit systems, particularly Universal Credit, which is calculated on a monthly basis across the full year. Solihull Council has just over 5,500 tenants in receipt of Universal Credit (at the end of April 2026), which account for £1.2m (67%) of the total rent arrears figures.

4. Proposal

4.1 It is proposed that the Council:

- Moves from a 50 week to a 52-week rent charging cycle for all council housing tenants
- Applies the changes to all existing tenancies, not solely new lets, to ensure fairness and consistency
- Implements the change from the start of April 2027, subject to consultation and approval

4.2 Under this proposal:

- The annual rent liability for tenants would remain unchanged
- The same annual rent would be spread evenly across 52 weeks rather than 50
- Designated rent-free weeks would be removed, resulting in a consistent weekly rent charge throughout the year

4.3 For illustrative purposes only, the table below demonstrates how this change would affect the weekly rent charges, based on an average weekly rent.

Annual Rent	**Current Weekly Rent Charge (50 weeks)**	**New Weekly Rent Charge (52 weeks)**
£5,547.50	£110.95	£106.68

4.4 Board are asked to note that this will coincide with the annual rent increase. Tenants will therefore see their rent increase, but not as a consequence of this proposed change.

5. What other options have been considered and what is the evidence telling us about them?

5.1 <u>Remain with the current 50 week charging period</u>

- This is not recommended because it would retain the existing misalignment with Universal Credit monthly cycles, continued technical underpayments and account discrepancies, and administrative complexity for tenants and officers.

5.2 Move to monthly tenancies

- This is not recommended because it would represent a more significant change to established weekly payment patterns and is likely to create budgeting and affordability risks for tenants, particularly where Universal Credit is paid monthly in arrears.

6. Reasons for recommending preferred option

6.1 Moving to a 52-week rent charging cycle represents a modernisation of rent policy, bringing the Council in line with sector best practice and welfare systems. While there is an impact on tenants, this can be mitigated through effective consultation, communication and support.

6.2 Benefits for Tenants:

- Greater clarity and consistency: rent is payable every week, avoiding confusion around rent-free weeks
- Alignment with Universal Credit (UC): UC is paid monthly across 12 months; a 52-week cycle reduces underpayments, arrears and manual reconciliation issues
- Improved budgeting; regular, predictable rent payments support more effective household budgeting. Tenants who wish to maintain a payment pattern similar to the current rent-free weeks could choose to pay slightly more each week, building up credit on their accounts to cover periods when they may prefer not to make a payment
- Reduced unnecessary correspondence and account queries; better alignment with Universal Credit should reduce avoidable rent account discrepancies, helping to prevent unnecessary arrears letters, queries and follow-up contact.
- Creates parity between tenants paying by direct debit, Universal Credit and other payment methods. This approach does not increase the overall amount tenants pay each year in rent; however, the changed payment profile may require some households to adjust their budgeting arrangements

6.3 Operational benefits for the Council and SCH:

- Improved rent collection and cash flow; income is received consistently throughout the year
- Reduced arrears volatility; eliminates arrears spikes following rent-free weeks
- Simplified administration; easier rent accounting
- Reduces administrative complexity; for income teams when explaining 50-week charging structures and officer time when resolving discrepancies for Universal

Credit underpayments. This can take around 10-30 minutes per case per officer, including account review, tenant contact, and adjustment processing. This can equate to a substantial resource impact across the service.
- Improves the accuracy of arrears performance reporting by reducing technical arrears and fluctuations caused by the 50-week charging cycle, giving a clearer picture of genuine rent collection performance and arrears trends.
- Consistency with sector norms; aligns the Council with the majority of local authorities and housing associations, including some in the West Midlands (Sandwell, Wolverhampton, Dudley).

6.4 Strategic Benefits

- Reduces stages of the rent setting processes, currently an additional layer of processing by SMBC Resources Team in calculating 52 weeks to 50 weeks, which would be removed under these proposals
- Supports standardised rent collection performance
- Provides a more accurate forecasting model for rent arrears; without the existing 'peaks' that have been a historic feature of our reporting and trajectory.

7. Consultation and decision-making

7.1 Consultation to date has been undertaken with Solihull Community Housing service teams including Income Collection, Neighbourhood Services, and Rent Control, and SMBC service teams including Finance, ICT, and Income and Awards.

7.2 This proposal would remove the additional layer to the annual rent setting process and would be simpler to operate over 52 weeks.

7.3 It is a statutory requirement under the Housing Act 1985 to consult all secure tenants on significant changes to the terms of their tenancy. An 8-week consultation will be undertaken, likely to operate from end of August to end of October, aligned to consultation with the new tenancy agreement.

7.4 The consultation will set out the reason for the change, what it means in practical terms, timescales, and support available.

7.5 Implementation planning will include:

- Clear advance consultation with all tenants for 8 weeks, proposed to run from August to October 2026
- Clear and simple communications to demonstrate what this means to tenants and the impact of the change
- Targeted support for tenants identified as vulnerable or at risk with designated staff available to support tenants during the consultation and transition
- Identifying households who may require budgeting or financial support and signposting to appropriate services

- Recalibration of IT systems in preparation for April 2027
- Ongoing monitoring of arrears and tenant feedback post-implementation

7.6 It is proposed that all tenants would move to a 52-week rent charging period from April 2027.

7.7 Tenants will be notified of their annual/weekly rent changes in the usual rent increase cycle at the end of February / start of March 2027, with this communication incorporating the revised calculations based on a 52-week charging period.

7.8 As part of the annual SMBC rent increase cycle, SCH will advise tenants of any changes to their direct debit amounts and payment frequency. Targeted communication will also be issued to tenants in receipt of Universal Credit to ensure they notify the Department for Works and Pensions (DWP), of the updated rent liability, supporting accurate benefit payments and minimising the risk of underpayment.

7.9 Following consultation, final decision-making will be delegated to the Cabinet Member for approval.

8. Financial implications

8.1 The total annual rent payable by tenants would be unchanged.

8.2 Rents would be charged over 52 weeks instead of 50, resulting in a lower weekly charge compared to the current 50-week model (noting however that overall annual rent does increase each year through council rent setting processes).

8.3 The removal of rent-free weeks means tenants would pay rent consistently throughout the year, which may require adjustment for some households.

8.4 For tenants in receipt of Universal Credit or Housing Benefit, this change is expected to improve alignment with benefit assessments and reduce fluctuations in rent accounts.

8.5 Whilst there would usually be financial implications linked to the costs of consultation, by combining this with the tenancy agreement consultation, it will be cost neutral.

8.6 There will be changes required to IT systems to recalibrate rent charging periods to 52 weeks; this is work that can potentially be undertaken in-house. Worst case scenario would be a day rate payment for the IT provider to make this change on our behalf (c£750).

8.7 Direct debit schedules will be updated, and tenants will be notified of their new payments as part of the rent increase notification procedures.

9. Legal implications

9.1 The proposal requires consultation with secure tenants in accordance with the Housing Act and the tenancy agreement. The proposal can be implemented following completion of the consultation process and appropriate decision-making arrangements.

10. Risk Implications

10.1 Some tenants use rent-free weeks as part of their annual budgeting, particularly when these coincide with Christmas and Easter. Although the proposal would not increase annual rent liability, some households may perceive the removal of rent-free weeks as the loss of a valued benefit or as a rent increase. This risk will be mitigated through clear consultation materials, signposting to hardship support and budgeting advice where appropriate, and reasonable and proportionate arrangements with tenants. This may include tenants choosing to pay slightly more each week to build credit on their rent account.

10.2 Tenants misunderstanding or reputation risk. This could result in increased complaints and/or loss of trust. This risk will be mitigated through clear communication and early engagement.

10.3 Short-term impact on arrears. There is a potential pressure on income teams chasing rent arrears. This will be mitigated through targeted support for at risk tenants and monitoring of rent accounts.

11. Equality Implications

11.1 Some tenants, particularly those not in receipt of full Housing Benefit/Universal Credit, may experience short-term financial pressure. The mitigations are identified at 10.1.

11.2 Tenants with low incomes, fluctuating earnings, or existing arrears, may require additional support.

11.3 A Fair Treatment Assessment has been completed in conjunction with SMBC's Equality and Diversity Team and will be updated following full tenant consultation to ensure tenant feedback and comments on the proposals are taken into account.

12. List of appendices

12.1 Appendix A – Fair Treatment Assessment

Solihull Metropolitan Borough Council

Fair Treatment Assessment Form

1. FTA Lead & Team	
Directorate	Economy & Infrastructure
Team	SMBC Housing / Solihull Community Housing
Name of Officer completing the FTA	Carol Trappett
Role of person completing the FTA	Head of Housing and Neighbourhoods, Solihull Community Housing
Contributors to the FTA	
Equalities Team Lead Support for this FTA	Niku Mawby - Senior Equalities Advisor
2. FTA Timescales	
Key dates	This is a draft FTA in advance of undertaking full tenant consultation on the proposed changes to the Council's weekly rent cycle. Consultation is anticipated from August to October 2026. Analysis of consultation responses will include protected characteristics where data is available to inform the final FTA and ensure any disproportionately affected groups are appropriately mitigated. The FTA will be presented to CPH Housing following tenant consultation for final approval. The Council's Equalities Team will review and counter sign this FTA following full consultation. Final version will be approved by the Cabinet Portfolio Holder for Housing.
3. Context	
Name of function/strategy/policy /procedures	Changes to the council's weekly rent cycle, from 50 weeks to 52 weeks.

For whom is the policy or process intended? Tick all that apply.	✓ **Borough council tenants**	**Specific service users**	**Employees**		**Other (Registered Providers)**

Is this a new function/strategy/policy/procedure?	This is a proposed change to the council's rent cycle. It currently operates on a 50-week rent charging cycle and proposals are to move to a 52-week rent charging cycle. Annual rent remains the same but will be split across 52 weeks rather than 50 weeks, removing the current 2x rent free weeks each year which happen at Easter and at Christmas.	
Purpose and intended aim of the current function, strategy, policy, procedures	The Council currently operates a 50-week rent charging cycle for the majority of its tenants, providing two rent-free weeks each financial year. This approach is increasingly uncommon across local authorities and housing providers, with the majority now operating 52-week rent cycles. The Regulatory Rent Standard 2026 assumes a 52-week rent year. Examples of local authorities who have moved to 52 week rent periods include Birmingham, Sandwell and Shropshire. The key implications of moving from 50 to 52 week rent cycles are summarised as: • A slight fall in weekly rent payments due. • Alignment with Universal Credit and Housing Benefit Monthly cycles. • Alignment with workers in low-paid jobs who might be paid weekly. • The removal of 2 weeks of 'rent-free' periods. The 50-week model creates operational complexity and inconsistency with welfare benefit systems, particularly Universal Credit which is calculated on a monthly basis across the full year. Moving to a 52-week rent charging cycle represents a modernisation of rent policy, bringing the council in line with sector best practice and welfare systems and alignment with the regulatory Rent Standard. The benefits to tenants are greater clarity and consistency with rent payable every week supporting more effective household budgeting, and greater alignment with Universal Credit which is paid monthly across 12 months. A 52-week cycle reduces underpayments, arrears and manual reconciliation issues. Tenants will retain the opportunity to 'overpay' weekly and self-generate rent free periods using overpayment credits. The proposed arrangements would also reduce the incidence of overpayments where tenants usually continue to pay during rent-free weeks. The benefits for the council and SCH are improved rent collection and cash flow with income received consistently throughout the year, and the elimination of arrears spikes following rent-free weeks. SCH has traditionally spent resources on publishing widely the rent-free weeks as part of the rent arrears management arrangements. The resources would be saved.	
Proposed changes	Under this proposal, the annual rent liability for tenants would remain unchanged. The same annual rent would be spread evenly across 52 weeks rather than 50. Designated rent-free weeks would be removed, resulting in a consistent weekly rent charge throughout the year.	
Consultation and stakeholder engagement	**Is consultation required? YES/NO** **Yes**	**If YES, say how the consultation has informed this FTA** It is a statutory responsibility to consult with all existing tenants on significant changes to their tenancy agreement. This will be an 8-week consultation, which is proposed to run from August to September 2026 in alignment with the consultation for the new tenancy agreement. This consultation will be inclusive with consideration given to large print, easy read, translation services, British Sign Language, telephone support and paper responses where required. Feedback and comments from this consultation will be utilized in forming a final version of the Fair Treatment Assessment
Business risks from proposals	**Partially**	There are business risks associated with implementation, principally tenant misunderstanding, increased customer contact, reputational impacts, and short-term arrears fluctuations. These risks are being mitigated through consultation, communication, and targeted support measures.
4. Equalities data		
What equalities data is available to inform this FTA?	If approved, the proposals would take effect at the start of the new financial year, in April 2027. This is when the annual rent charges are implemented. The profile of tenants as at 31 December 2025 is detailed below Age 16 to 24 – 349 – 3.2% 25 to 34 – 1426 – 13.2% 35 to 44 – 2065 – 19.1% 45 to 54 – 1734 – 16%	

	55 to 64 – 2125 – 19.6% 65+ - 3113 – 28.7% Not known – 16 – 0.1% **Gender** Female – 6755 – 62.4% Male – 4073 – 37.6% Not known – 0% **Disability/vulnerability** No – 7224 – 66.7% Yes – 3604 – 33.3% **Ethnicity** BAME – 958 – 8.8% White British/Irish - 8660 – 80% White Other – 97 – 0.9% Do not wish to say – 141 – 1.3% Not known – 972 – 9% **Religion** Christian – 2699 – 24.9% None – 1871 – 17.3% Other – 370 – 3.4% Do not wish to say – 1512 – 14% Not known – 4376 – 40.4% **Sexual orientation** Bisexual – 40 – 0.4% Gay man – 32 – 0.3% Gay woman/lesbian - 41 – 0.4% Heterosexual/straight - 5755 – 53.1% Other – 19 – 0.2% Do not wish to say – 817 – 7.5% Not known – 4290 – 39.6% **Universal Credit & Rent Arrears** Number of UC claimants = 5,505 Total rent arrears value = £1.7m UC tenants arrears value = £1.2m
Does the data show positive or negative impact on any specific groups?	There are a higher proportion of tenants aged 55+ living in council accommodation. Lead tenants are predominantly female. One third of all tenants are identified as having a disability or vulnerability. Ethnic origin of tenants is predominantly White British/Irish. 25% are Christian although a further 40% have not disclosed their religion. 53% are heterosexual with a further 40% not wishing to disclose/unknown.

5. Analysis		
Protected characteristics	**Please include below the identified impact positive, neutral, or negative, and what has informed the assessment (eg consultation, service user statistics, research, etc. from the above question**	**Please say what actions you intend to take to eliminate any negative impact or make other improvements and include how the actions will be tracked/monitored.**

	Please contact relevant teams such as Public Health, Adult Social Care, HR, Children's Services, etc. for relevant policies, strategies, and general information as necessary	
Age	There is potential indirect negative impact on some older tenants, particularly those aged 65 and over, who represent 28.7% of council tenants and are therefore disproportionately represented within the tenant population. Some older people may have limited digital access. Older tenants are more likely to have experienced the 50-week model for many years and some may manage finances around established rent-free periods to pay for summer holidays, winter fuel bills and Christmas costs. The removal of these rent-free weeks may initially cause confusion or concern and could require adjustments to established budgeting habits. However, the proposal does not increase annual rent liability and may provide benefits through a more consistent and predictable weekly charging arrangement. Alignment with Universal Credit and standard housing sector practice may also reduce complexity and improve understanding of rent obligations over the course of the year. Any impact is therefore considered to be low and capable of mitigation through appropriate communication and support.	Potential indirect negative impact. This will be mitigated by: • Consultation will be undertaken using a variety of methods including paper-based options, to ensure older tenants can participate effectively. • Information will be provided in clear and accessible language with large print versions available on request. • Communications will clearly explain that annual rent charges are not increasing and that the change relates only to the timing of rent collection. • Officers will provide additional support during implementation for tenants who may require assistance in understanding or adapting to the new arrangement and who may become anxious about amending direct debits and bank transfer payments. • Money Advice and Financial Inclusion services will be promoted to support tenants with budgeting where required. • Feedback from older tenants will be specifically reviewed during consultation and any emerging issues considered within the final FTA.
Disability	There is potential for an indirect negative impact on tenants with disabilities, learning difficulties, cognitive impairments, dementia, memory impairment, neurodiversity, mental health impacts arising from changes to established routines, sensory impairments or other vulnerabilities who may find changes to long-established payment arrangements more difficult to understand or adapt to. Some disabled tenants may rely on routine and could experience anxiety regarding the removal of rent-free weeks. However, the annual rent liability remains unchanged and the proposal may improve consistency by aligning rent charges with Universal Credit arrangements.	Indirect negative impact identified. This will be mitigated by: • Consultation materials being available in accessible formats including large print, Easy Read and alternative formats upon request • British Sign Language, interpretation and translation services available where required • Additional support offered through Officers and Money Advice services • Communications that clearly explain that the annual rent payable is unchanged • Feedback from tenants with disabilities will be specifically monitored throughout consultation and implementation, with targeted communication
Gender/Sex	No direct impact has been identified in relation to gender. As female tenants represent approximately 62% of lead tenants, a larger proportion of women will experience the change simply because they form the majority of the tenant population. However, the proposal applies equally to all tenants regardless of sex and no disproportionate effect has been identified.	No direct impact identified. However: • Consultation responses will be monitored by gender where data is available. • Clear information and support will be provided equally to all tenants. • Emerging issues identified during consultation will be considered in the final FTA.
Gender Reassignment	No direct or indirect impacts have been identified for tenants who are transgender or undergoing gender reassignment. The proposed change affects all tenants equally and does not alter access to services, tenancy rights, or housing allocation arrangements.	No direct or indirect impacts identified. However: • Consultation and communication materials will be inclusive and accessible to all tenants. • Equality monitoring data will be reviewed where available to identify any unforeseen impacts.
Race	There is potential for an indirect impact on tenants whose first language is not English.	Potential for indirect impact. This will be mitigated by:

	Some households may require additional support to understand the changes being proposed and the implications for rent payments. The proposal itself does not disproportionately affect any ethnic group because annual rent charges remain unchanged.	• Translation and interpreting services will be available throughout consultation and implementation. • Communications will be written in clear, accessible language. • Alternative formats and support will be provided where required. • Consultation responses will be analysed by ethnicity where data is available.
Religion or belief	No direct impact has been identified in relation to religion or belief. The proposal relates solely to the timing of rent collection and does not affect religious practices, observance or access to housing services.	No direct impact identified. However: • Consultation opportunities will be offered through a range of channels to encourage participation from all groups. • Any specific concerns raised during consultation will be considered in the final FTA assessment. • Timing of consultation will be planned to avoid significant religious festivals.
Sexual orientation	No direct or indirect impacts have been identified in relation to sexual orientation. The proposal applies consistently across all tenants and does not affect access to housing or support services.	No direct or indirect impacts identified. However: • Consultation and communication arrangements will be inclusive for all tenants. • Feedback will be reviewed to identify any emerging equality issues.
Marriage or civil partnership	No impacts have been identified in relation to marriage or civil partnership. The proposal applies equally to all tenants regardless of their marital or partnership status.	No impact therefore no specific mitigations required. However: • General communication and support measures will be available to all tenants.
Pregnancy and maternity	There may be a limited indirect impact on tenants who are pregnant or have recently had children, as household finances can be under additional pressure during these periods. However, annual rent liability remains unchanged and greater consistency of rent charging may assist with budgeting and financial planning.	Limited indirect impact. This will be mitigated by: • Money Advice and support services will be promoted to affected households. • Flexible communication methods will be available to ensure participation in consultation. • Consultation responses will be monitored for any emerging concerns.

Other characteristics	**Please include below if the identified impact positive, neutral or negative, and what has informed the assessment (eg consultation, service user statistics, research, etc)**	**Please say what actions you intend to take to eliminate any negative impact or make other improvements and include how the actions will be tracked/monitored.**
Care leavers	Care leavers may have less experience managing household finances independently and may require additional support in understanding changes to rent arrangements. The proposal itself does not increase annual rent costs.	Limited indirect impact. This will be mitigated by: • Tailored financial information and tenancy support will be available, continuing with ongoing collaboration between SCH and Children's Services, including the care leavers Personal Assistants, to help provide advice where required. • Feedback from care leavers will be monitored during consultation.
Carers	Some carers may experience financial pressures arising from caring responsibilities and may be concerned about the removal of rent-free weeks. However, the consistent weekly charge may support more predictable budgeting.	Limited indirect impact. This will be mitigated by: • Clear explanatory information will be provided. • Advice and support services will be signposted. • Consultation feedback will be reviewed for any identified concerns.
Digital Exclusion	There is potential indirect impact on tenants who do not have access to digital services or who lack digital confidence.	Potential indirect impact. This will be mitigated by:

	These tenants may find it more difficult to access consultation materials or information regarding the proposed changes.	• Paper consultation documents will be available. • Telephone support will be offered where required. • Information will be shared through multiple communication channels. • Consultation will be individual in writing as a statutory written notice (as required by law)
Groups covered under Safeguarding arrangements	Some individuals subject to safeguarding arrangements may require additional support to understand the proposed changes or participate in consultation processes. The proposal does not directly affect safeguarding arrangements.	Limited indirect impact. This will be mitigated by: • Officers and partner agencies will provide support where needed. • Appropriate safeguarding procedures will continue to be followed during consultation and implementation.
Families with young children	Families with young children may face greater financial pressures due to household costs and may have relied upon the existing rent-free weeks for budgeting purposes, such as paying for costs relating to school holidays and Christmas. However, the annual rent charge remains unchanged and the regular weekly charge may support more consistent budgeting.	Limited indirect impact. This will be mitigated by: • Tenants will retain the opportunity to 'overpay' rent each week thus building up sufficient credit to take a rent-free week. This will be communicated through consultation. • Clear communications explaining the unchanged annual rent liability. • Signposting to financial inclusion and money advice services. • Monitoring consultation responses from family households where data is available.
Geographical considerations	No impacts identified.	No impacts identified
Human Rights	The proposal has been considered against Article 1 of Protocol 1 (peaceful enjoyment of possessions) and Article 8 (respect for private and family life) of the Human Rights Act. The proposal does not alter the amount of rent payable, tenancy security or housing rights and is therefore considered proportionate and lawful.	No direct impact identified. However: • Full statutory consultation will be undertaken before any decision is made. • Tenant feedback will be considered before final approval.
Low-income families	There is potential for a moderate indirect impact during transition for lower-income households, particularly those who have historically relied upon rent-free weeks to manage household finances. 5,505 (57%) of tenants receive Universal Credit and these are attributable to £1.2m of the total £1.7m rent arrears. However, annual rent charges will not increase and alignment with Universal Credit may reduce confusion and budgeting difficulties for some households.	Potential moderate indirect impact identified. This will be mitigated by: • Comprehensive communication campaign explaining the changes. • Early intervention where households experience financial difficulty. • Pre-implementation budgeting support from Money Advice and Financial Inclusion services. • Targeted contact with tenants already in arrears. • Identification of households currently relying on rent-free periods. • Post-implementation monitoring of arrears by household type and benefit status.
Military status	No specific impacts have been identified in relation to servicing personnel, veterans or military families. The proposal applies equally to all tenants.	No specific impacts. No specific mitigations required beyond standard communication and support arrangements.
Benefit-dependent households / Universal Credit claimants	Potential positive impact through improved alignment between UC calculations and rent liability, reduced risk of technical arrears, greater clarity around rent obligations.	Both positive and negative impacts identified. This will be mitigated by: • Targeted communications • Assistance updating UC housing costs

	Potential negative impact through requirement to notify DWP where applicable, and potential confusion during transition.	• Monitoring of UC arrears trends post implementation
Health inequalities (e.g. groups at higher risk of Covid, diabetes, HIV, sickle cell, etc)	Individuals experiencing poor physical or mental health may require additional support to understand and adapt to the proposed changes. Consistent rent charging and improved alignment with welfare systems may provide some benefit by reducing confusion around payment periods.	Some potential indirect impacts. This will be mitigated by: • Accessible communications and support services will be available. • Referrals and signposting to relevant support agencies will be provided where appropriate. • Feedback from affected groups will be considered when finalising the FTA.

6. Decision making			
Evidence used to support the decision-making process and final decision	In drafting the FTA, the current profile of tenant data has been utilized in forming this Fair Treatment Assessment. These are the households that will be directly affected by proposed changes to the rent charging period.		
Final decision & Summary of outcome	This assessment is indicative and based on available tenant demographic data. The final FTA will be updated following statutory consultation which will run from August to October 2026, analysis of tenant feedback, and review of any emerging disproportionate impacts. The indicative FTA has identified no direct discriminatory impacts on any protected characteristics. Some groups may experience indirect impacts during transition, particularly older people, disabled people, financially vulnerable households and tenants whose first language is not English. Appropriate mitigation measures have been identified and will be reviewed following consultation. It is recommended for approval at Scrutiny on 29 July 2026, that the FTA is agreed in principle, and subject to final amendments being made during and following the full consultation with tenants, and that the new rent charging period of 52 weeks is adopted from April 2027.		
Key actions	**Action** Carry out consultation with all current council tenants. Finalise Fair Treatment Assessment following consultation and in conjunction with SMBC Equality Advisors.	**Due by** August-October 2026 November 2026	**Lead officer** Carol Trappett Carol Trappett / Niku Mawby

7. Communication			
Arrangements for communicating the outcome of the FTA	The FTA will be communicated to our tenants via the SCH tenant newsletter and made publicly available on the SCH website. A printed version will also be made available free of charge should this be requested. All existing tenants will adopt the new rent charging periods from April 2027 which will be communicated throughout consultation and via formal notification.		
FTA Sign-off **For data protection reasons please do not share the signed copy of the completed FTA with anyone outside of SMBC as signatures could be forged.**			
FTA Lead	**Name:** Carol Trappett	**Date: 30 June 2026**	**Signature:** *Carol Trappett*
Directorate E&D Group or E&D Lead	**Name**	**Date**	**Signature**

DLT/Head of Service/ Assistant Director/Director	Name	Date	Signature

If you have any queries about completing FTAs that are not contained in the FTA Guidance Note or with completing the FTA, please contact the Equalities Team (phone x6442 or email (equalities@solihull.gov.uk).

Please email the final signed copy of this FTA to the Equalities Team for SMBC's records - equalities@solihull.gov.uk

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Board
Forward Plan

Tuesday 15 September 2026 Q1 – *Chair to sign statutory accounts*		
	CEO report (HOS, QMB, Board training)	Mark Pearson
	Quarter 1 2026/27 Strategic Performance Report	Becci Youlden
	Quarter 1 2026/27 Health and Safety Report	Mark Wills
	Statutory Accounts 2025/26	Sam Gilbert
	Quarter 1 2026/27 Financial Monitoring and Forecast	Sam Gilbert
	HRA Budget Strategy Review	Sam Gilbert
	5 Year Capital Programme Update Report	Darren Baggs
	SCH Strategic Vision/Delivery Plan 2026-2031: Annual Update	Paul Edwards
	Chair's Report from Housing Operations Committee on 7 September 2026	Phil Hardy
	Chair's Report from Audit and Risk Committee 6 July 2026	Mark Thrasher
	Chair's Report from Building Safety Committee 27 July 2026	Simon Wilson
	Corporate and Joint Risk Management Report	Mark Wills
	Housing Ombudsman Service Complaints – Annual Report & Service Improvement Plan	Becci Youlden
Tuesday 10 November 2026 Q2 – *AGM*		
	AGM Agenda	Sarah Brookes/ Andrew Kinsey
	CEO report (HOS, QMB, Board Away Day)	Lee Sugden
	Quarter 2 2026/27 Strategic Performance Report	Becci Youlden
	Quarter 2 2026/27 Health and Safety Report	Mark Wills
	Quarter 2 2026/27 Financial Monitoring and Forecast	Sam Gilbert
	SCH Budget Strategy 2026/27	Sam Gilbert
	Chair's Report from Audit and Risk Committee 19 October 2026	Mark Thrasher
	Chair's Report from Performance Safety Committee 5 November 2026	Simon Wilson
	Chair's Report from Customer Experience Committee 4 November 2026	Susan Buckley
	SCH Draft Delivery Plan	Paul Edwards
	Annual Review of Compliance against the NHF Code of Governance	Paul Edwards
	Board and Committee Dates 2027	Sarah Brookes
	Corporate and Joint Risk Management Report	Mark Wills
	Engagement framework	Becci Youlden
	SCH Delivery Plan – Annual Delivery actions & indicators	Paul Edwards

Regular Items (every meeting):

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