

TRUST HOUSING ASSOCIATION LIMITED

Minute of the Audit and Performance Committee Meeting held on Thursday 28 July 2022 at 11am By Microsoft Teams call

Present:

Board Members

Paul McFarlane

Ali Ross

Sr Jenny Lindsay

Ian Gunning

Officers in Attendance

Rhona McLeod, CEO

Zoe Purdie, Director of Finance & People

Gail Gourlay, Director of Customer Experience

Neil Ferguson, Director of Business Development & Digital

Gordon Laurie

Jackie McIntosh, Director of Assets & Sustainability

Mary Strathearn, PA & Company Secretary

Andy Shaw, AAB

Kara Flannigan, BDO

PAUL MCFARLANE IN THE CHAIR

Agenda Item	Detail
1.	Convener's Opening Remarks
1.1	Paul McFarlane, Chair, welcomed everyone to the meeting. He passed over to Gordon Laurie who wanted to share an update from the TEL Board.
1.2	Gordon advised that he is the Trust representative for TEL and the TEL Board met earlier this week to review the annual accounts. He reported that TEL made a surplus of £92k which was lower than the target of £140k and this was largely due to the pressures on voids and associated repair costs. Gordon noted that the arrears in the TEL portfolio are well managed.
1.3	He added that the £92k surplus has been gift aided back to Trust. There had been a discussion about ring fencing this sum for a particular use but it was agreed for now the £92k surplus is an open fund.
2.	Declarations of Interest
2.1	No declarations of interest by those in attendance.
3.	Apologies
3.1	Apologies were received from Nicky McLaughlin and Claire Robertson of BDO.
4.	Audited Financial Statements for the year ended 31 March 2022 – <i>please see private minutes.</i>

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5.	Quarter 1 2022/23 – Performance Report
5.1	Darren Lewis, Head of Business Development, advised that the performance report related to Trust’s operational performance for Quarter 1 2022/23. He highlighted that this year we have split the performance reporting into General Needs/Amenity Housing and Care & Support Housing.
5.2	Darren gave his apologies for an error in the report that was due to formatting issues when the report was compiled into the PDF board pack. He asked Mary to re-share the updated report following the meeting.
5.3	In relation to complaints, Darren updated that over the previous 12 months period the highest number of complaints received are from our Care & Support services. We received 75 new complaints in Q1 plus 14 complaints were carried over from the last quarter.
5.4	We have taken a number of actions and shared best practice guidance with colleagues in relation to responding to complaints and meeting timescales. At our recent virtual Townhall event with colleagues Darren gave an overview of performance and stressed the importance of meeting complaint timescales but this was balanced with providing a good quality service and positive outcomes for our customers.
5.5	He added that 62 of 75 complaints were front line with 88.1% of those achieved within timescale. There are no apparent trends coming through Q1 around complaints.
5.6	Ali Ross asked if there are any themes coming through as the category of complaint around the treatment and attitude of staff appears high, she wondered if customer expectations are becoming more demanding. Darren advised that the standard of service and the treatment and attitude of staff are always consistently the two highest complaints categories.
5.7	Ian Gunning noted that it looked like we are more successful in dealing with stage 2 complaints as opposed to stage 1 complaints. He thought that stage 1 complaints would be easier to address if don’t require further investigation. Darren advised that stage 1 complaints have a much tighter timescale of 5 days. He did acknowledge that we need to tighten up procedures to ensure colleagues are allocating complaints appropriately to team members.
5.8	Gordon noted that he liked the split between General Needs and Care & Support performance and asked if it would be possible to see a split of complaints from development locations. Darren agreed that this suggestion would be helpful to review performance and was happy to include for the next meeting.
5.9	Darren advised that at the last meeting the Committee had asked for a more details on a definition of what constitutes a complaint being upheld or not and this information is shared in the report. Darren advised that there were no trends

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	coming through on this issue but he would keep an eye on performance and feedback to the Committee.
5.10	Neil Ferguson, Director of Business Development & Digital, moved on to discuss the IT helpdesk and shared that there had been a dip in tickets submitted to IT. Performance is slightly higher than Q4 and overall we are happy with these results especially as we have a new team member who joined the helpdesk team in the spring.
5.11	Jackie McIntosh, Director of Assets & Sustainability, advised that we are in the process of re-procuring our emergency repairs contract due to Turners ceasing trading. We are trying to do things a bit differently with packaging the contract to ensure the best level of service to our customers. The departure of the Turners contract, pressures on the labour market and sourcing materials due to supply chain issues have had an adverse impact on our average hours to complete emergency repairs performance.
5.12	Jackie reported that in relation to gas safety and compliance we unfortunately had one failure at our Lewis Street development on Stornoway due to an administration error for which our contractor has admitted full liability. She explained that we have challenges due to the remoteness of some of our properties and a limited pool of contractors who can carry out gas servicing. There is only one contractor on Stornoway and they don't use an electronic interface instead it is a manual process. To mitigate against this happening again, we have asked that all gas servicing paperwork is to be scanned on day the services take place. As the Committee will be aware this gas safety failure constituted a notifiable event to the Scottish Housing Regulator (SHR). Jackie confirmed that the SHR were satisfied with how we have deal with the matter and the notifiable event has now been closed.
5.13	Jackie highlighted that we have included a new measure in the performance report around the implementation of smoke and heat detection systems in our properties which is part of the SHQS package of criteria and it will also form part of the ARC return going forward.
5.14	Gail Gourlay, Director of Customer Experience, advised that for the first time we are seeing a break down between General Needs and Care & Support properties in our days to let figures. This now clearly demonstrates the difficulty in letting our older people housing and shows the impact on our void loss performance. In Q1 we let 122 properties and as of today we are sitting with 140 voids which is around the normal level of voids pre-covid. We have 15 long terms voids and an additional 9 at Strachur where we have ceased letting properties.
5.15	Gail advised that we have a new performance indicator which displays the level of lets and terminations in each quarter. This demonstrates that we are letting a lot of houses but we are receiving more terminations. It will be useful to monitor over course of the year especially as we now have the break down between

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	property categories. We have set a target of letting 5 more properties than terminations received each month.
5.16	Gail reported that the rent loss figure is going down which is testament to the efforts of the team on the frontline. We have achieved £779k in rent which equates to 3.05% of rent due which is below the Scottish average. For ARC reporting we can take off technical arrears but we have to include write offs made in the year.
5.17	In relation to anti-social behaviour (ASB) for Q1 we have achieved 84.2% performance for meeting the timescale. We have looked at each of these cases in the General Needs category and it was more important that we investigated the complaints properly than meet timescale due to the complexity of the cases.
5.18	Ian asked if we receive more ASB complaints in from our Care & Support customers. Gail confirmed that we do get more ASB complaints in our Care and Support stock as people are living in much closer proximity with shared gardens and communal areas that can mean disputes arise more frequently.
5.19	Ian noted that 15 properties have been void for over 1 year. Gail confirmed that these void properties have been historic and been void since before the pandemic. We have a number of areas with difficult to let properties and Jackie will be covering how we plan to deal with difficult to let stock at the Board meeting today when we consider the new Asset Strategy.
5.20	Sister Jenny Lindsay referred to the number of tenancy offers refused and asked if there are any particular issues that are impacting on the rate of refusals. Gail advised that the refusal figures have increased and this it down to various issues such as the location of property within the housing development.
5.21	Zoe Purdie, Director of Finance & People, noted in relation to absence that we are running slightly above our target of 7% having hit 7.4% in Q1 with the majority of absences being development colleagues rather than office.
5.22	Gordon queried the proposed target for long term absence is 4% and Zoe confirmed that this was correct and the short term absence target is 3%.
5.23	Decision: Noted contents of the report and performance against our operational KPIs for Q1.
6.	Absence Action Plan – <i>please see private minutes</i>
7.	Health & Safety Policy
7.1	Jackie explained that there are a few policies that require Board approval and the Health & Safety Policy has been delegated to the Audit & Performance Committee to approve. Jackie noted that we have been trying to update and integrate the Wishaw policies and also consolidate a number of Trust policies

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7.2	into one document which would hopefully achieve a more contemporary approach. Contained in this policy is a section on lone working and Jackie highlighted that as all office staff are blended workers these are now classed as lone workers. We have also updated the policy to reflect drug and substance misuse as mental health issues are on the rise due to the impact of the pandemic years.
7.3	Gordon queried the lone working policy reference on p22 of the document and wondered if this is superseded. Jackie advised that was an oversight and should read blended working policy and took an action to update on the policy document.
7.4	Gordon noted that the policy states that all employees will receive health & safety as part of their induction and he wondered if the employees should receive refresher training as part of their employment. Jackie advised that we have a new online learning portal that is being launched by the people team and one of the mandatory training course is health & safety that will be rolled out to all colleagues.
7.5	Gordon asked if we should specify in the policy the frequency of health & safety training and whether we should also consider extending the training to the Board. He added that he was pleased to see that excessive heat had been included under the adverse weather section.
7.6	Ian asked if Trust had a legal requirement to provide health & safety training and Jackie confirmed that we do have legal obligation to all staff and tenants.
7.7	Paul wondered if e-learning tool notifies managers when staff reach a level of training and was this part of appraisal process. Jackie explained that the new online learning tool will allow managers to access a report on what training has been undertaken by their team. She added that staff members are reminded to complete courses and if this is not done then it would constitute a performance management issue.
7.8	Sister Jenny Lindsay asked if Care & Support employees are provided with food hygiene courses and Gail advised that employees get certificates for passing the course.
7.9	Decision: Approved the Health & Safety Policy with the inclusion of amendments detailed above.
8.	Internal Audit Update
8.1	Zoe noted that the report detailed the internal audit into arrears management. Gail advised that generally we were happy with the audit report and that we have queried one of the recommendations level as we believe it is lower level and relates to better housekeeping of the arrears list.

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8.2	Zoe added that we have removed the asset management audit and replaced this with a payroll audit to be completed in this year.
8.3	Paul acknowledged that arrears is such a huge focus for the business especially given the current economic challenges we and our customers are facing. The frontline teams dealing with customers' arrears get such a hard time and we need to recognise the efforts of those teams and pass thanks on to them.
8.4	Kara Flannigan advised that she had nothing to add to the report and highlighted that several points of good practice were noted. She shared that the audit opinion was moderate in one area with general improvement recommendations issued.
8.5	Decision: Noted the content of this report and the attached follow up report.
9.	Risk Register Update – <i>please see private minutes</i>
10.	Health and Safety Report
10.1	Jackie reported that in terms of accidents there were no RIDDOR reportable incidents in Q1 and one manual handling incident which related to an employee tweaking their back.
10.2	She added that we are reviewing how we present the health and safety information to the Board to provide a more of a helicopter view of performance. Within the new asset structure we have a Business Improvement Officer who will be tasked with this piece of work.
10.3	Gordon queried that the level of incidents was very low in comparison to other quarters. Jackie advised that the figures were correct and the recording process was manual and no other reports of incidents were recorded in Q1.
10.4	Decision: Noted the content of the report.
11.	GDPR & Freedom of Information Update
11.1	Zoe noted that she had nothing significant further to add to the report and was happy to take questions.
11.2	She noted that the outstanding recommendations will be actioned once the implementation of new housing management and people systems are complete.
11.3	Decision: Noted the content of the report.
12.	Previous Minute of the Audit and Performance Committee Meeting of 26 May 2022.
12.1	Minutes unanimously agreed.

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12.2	Decision: Approved as a true and accurate record.
13. 13.1	Action Tracker Discussion held on the action tracker and what items can be greyed out as completed.
14.	Any Other Business – <i>please see private minutes.</i>
15.	Date of Next Meeting – 1 December 2022 (in person at the Edinburgh office)