hebridean housing partnership

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# BOARD AGENDA –25 MAY 2022

| ITEM | AGENDA ITEM | ACTION | PRESENTED BY | PAGE NO | TIME |
|---|---|---|---|---|---|
| **1** | **Attendance & Apologies** | Noting | Chair | 3 | 5:30pm - 5.45pm |
| **2** | **Declaration of Interest** | Noting | Chair | - | |
| **3** | **Minutes** | | | | |
| 3.1 | Minute of Meeting 23 March 2022 | Approval | Chair | 5 | |
| 3.2 | Action Sheet | Noting | Company Secretary | 10 | |
| **4** | **Date of Next Meeting** 29 June 2022 | Approval | Chair | - | |
| **5** | **Health & Safety** | Noting | Director of Operations | - | |

| ITEM | AGENDA ITEM | ACTION | PRESENTED BY | PAGE NO | TIME |
|---|---|---|---|---|---|
| **6** | **Items For Decision** | | | | 5:45pm - 6:30pm |
| 6.1 | Annual Return on the Charter 2021/22 | Approval | Executive Office Manager | 12 | |
| 6.2 | Development Report | Approval | Development Manager | 70 | |
| 6.3 | Community Grant Fund Request | Approval | Director of Operations | 81 | |
| 6.4 | Manor & Castle Community Association | Approval | Director of Operations | 86 | |
| 6.5 | Board Member Appointment | Approval | Company Secretary | 94 | |

| ITEM | AGENDA ITEM | ACTION | PRESENTED BY | PAGE NO | TIME |
|---|---|---|---|---|---|
| **7** | **Policies & Strategies** | | | | 6:30pm - 6:50pm |
| 7.1 | Debt Management Policy | Approval | Director of F&CS | Withdrawn | |
| 7.2 | Flexible Working Policy | Approval | Chief Executive | 96 | |
| 7.3 | Workforce Strategy | Approval | Chief Executive | 113 | |
| 7.4 | Review of Policies | Approval | Executive Office Manager | 132 | |

**MEETING GOES INTO PRIVATE SESSION**

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| ITEM | AGENDA ITEM | ACTION | PRESENTED BY | PAGE NO | TIME |
|---|---|---|---|---|---|
| **9** | **Noting Reports** | | | | |
| 9.1 | Business Plan Monitoring Report | Noting | Chief Executive | 207 | |
| 9.2 | SHR Engagement Plan | Noting | Chief Executive | 212 | |
| 9.3 | Equalities Action Plan | Noting | Chief Executive | 217 | |
| 9.4 | Quarterly Treasury Report to 31 March 2022 | Noting | Director of F&CS | 220 | |
| 9.5 | Asset Management Strategy | Noting | Assets & Contracts Manager | 226 | |
| 9.6 | Repairs Review | Noting | Assets & Contracts Manager | 242 | |

# Board Meetings 2021/22

| Board Members | Notes | 26-Aug-21 | 17-Nov-21 | 09-Feb-22 | 23-Mar-22 | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Iain Macmillan | 1 | | | | | | | | |
| Calum Mackay | 1 | | | | | | | | |
| Alexander Gardner | 2 | | | | | | | | |
| Fiona Macleod | 5 | | | | | | | | |
| Gordon Macleod | | | | | | | | | |
| Norman A Macdonald | 3 | | | | | | | | |
| Roddy Mackay | | | | | | | | | |
| Roddy Nicolson | | | | | | | | | |
| John N Macleod | 4 | | | | | | | | |
| Helen Mackenzie | | | | | | | | | |

1 - Appointed as a Community Member on 26 August 2021
2 - Appointed as a Tenant Member on 26 August 2021
3 - Appointed as Co-optee on 23 March 2022
4 - Board Membership terminated on 23 March 2022
5 - Resigned from Board on 14 April 2022

Member present at meeting

Member not present at meeting

Cancellation of travel due to weather

Unable to attend remote meeting due to technical difficulties

Member not required to be present at meeting

Leave Special Leave Granted

# Board Training and Conferences 2021/22

| Board Members | Notes | Treasury Management Training 30-Nov-21 | Decision Time Training 28-Jan-22 | | | |
|---|---|---|---|---|---|---|
| Iain Macmillan | 1 | | | | | |
| Calum Mackay | 1 | | | | | |
| Alexander Gardner | 2 | | | | | |
| Fiona Macleod | 5 | | | | | |
| Gordon Macleod | | | | | | |
| Norman A Macdonald | 3 | | | | | |
| Roddy Mackay | | | | | | |
| Roddy Nicolson | | | | | | |
| John N Macleod | 4 | | | | | |
| Helen Mackenzie | | | | | | |

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3 - Appointed as Co-optee on 23 March 2022
4 - Board Membership terminated on 23 March 2022
5- Resigned from Board on 14 April 2022

Member present at training

Member not present at training

Cancellation of travel due to weather

Unable to attend remote training due to techncial difficulties

Member not required to be present at training

Leave Special Leave Granted

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ITEM NO 3.1

**HEBRIDEAN HOUSING PARTNERSHIP**

**Board**

**<u>Minutes of Meeting held remotely via Microsoft Teams on Wednesday, 23 March 2022 at 5.30pm</u>**

| | |
|---|---|
| **PRELIMINARY ITEM** | |
| **ATTENDANCE & APOLOGIES** | |
| **1** | **<u>Attendance & Apologies</u>**<br><u>Present</u><br>Iain Macmillan (Chair)<br>Calum Mackay (Vice-Chair)<br>Gordon Macleod<br>Helen Mackenzie<br>Norman A Macdonald<br>Roddy Mackay<br>Roddy Nicolson<br><u>Apologies</u><br>Fiona Macleod<br>Alex Gardner*<br><u>Staff & Consultants In Attendance</u><br>Dena Macleod (Chief Executive)<br>Donald Macleod (Director of Finance & Corporate Services)<br>John Maciver (Director of Operations)<br>Katia Petteloot (Company Secretary)<br>Jonathan Fairgrieve (Corporate Services Officer – Minute Taker)<br>James Morrison (Finance Manager)<br>Donalda Mackinnon (Lewis Area Manager)<br>Sawan Morrison (Development Manager)<br>Angus Smith (Corporate Resources Manager)<br>Monika Fortagh (Debt Management Officer)<br>Iona France (Governance Officer)<br>*Alex Gardner tendered apologies due to technical difficulties.<br>It was agreed that Calum Mackay become a full member of the Investment Delivery Board and Iain Macmillan become a substitute member. |
| **PRELIMINARY PROCEDURAL MATTERS** | |
| **2** | **<u>Declaration of Interest</u>**<br>Norman A Macdonald declared an interest in item 10.6. |
| **3.1** | **<u>Minute of Board Meeting 9 February 2022</u>**<br>**The minute of the Board meeting of 9 February 2022 was submitted and approved as a true and accurate record of the proceedings of the meeting.** |
| **3.2** | **<u>Action Sheet</u>**<br>**Item 5**<br>The Chief Executive advised a report on the level of Repairs would be taken to the next meeting of the Board.<br>**Item 12**<br>The Chair updated members on the responses received from the Chair of the Integrated Joint Board and Leader of the Comhairle. Norman Macdonald intimated that a solution was vital and partnership working would be required to achieve this.<br>It was agreed the Chair would respond to the Leader of the Comhairle and the Chair of the Integrated Joint Board to seek a resolution.<br>**The Action Sheet was noted.** |
| **4** | **<u>Date of Next Meeting</u>**<br>The date of the next meeting will be 25 May 2022. |
| **5** | **<u>Health & Safety</u>**<br>Nothing to report. |

| ITEMS FOR DECISION | |
|---|---|
| 6.1 | **<u>Business Plan</u>**<br><br>An updated Business Plan for the five year period 2019/20 to 2023/24 was presented for review and approval following consultation with the public and key partners. Members were advised one consultation response had been received and minor changes had been made to the Business Plan following the consultation.<br><br>Gordon Macleod requested that reference was made to Ukrainian refugees within the Business Plan. The Director of Operations advised discussions were taking place with the Comhairle's Resettlement Officer to explore how we can practically support Ukrainian refugees, as was the case with previous refugee crises. Further information would be brought back to the Board following the discussions.<br><br>The Chief Executive advised additional information would be included within the Business Plan to account for the Ukrainian refugee crisis.<br><br>**The Board approved the Business Plan (2019/20 to 2023/24) Year 4.** |
| 6.2 | **<u>Budgets 2022/23</u>**<br><br>The Director of Finance & Corporate Services presented the proposed 2022/23 budgets for review and approval. The main changes since the Board were provided with initial budgets in February 2022 were that £147K of rewiring works were to be carried into the 2022/23 Investment Programme and slippage in development was now reflected.<br><br>Members were advised the rent increase which was applied for 2022/23 was a 2.5% sub-inflationary increase based on October 2021 RPI. With RPI continuing to increase this now represented a 4.7% sub-inflationary increase compared to February 2022 RPI.<br><br>**The Board:**<br><br>**a) approved the 2022/23 budgets; and**<br><br>**b) noted the cash planning limits for 2022/23 and 30 year cash flow statement for 2021-2051.** |
| 6.3 | **<u>Management Report to 31 January 2022</u>**<br><br>The Management Report to 31 January 2022 was presented for review and approval. The report showed that financial covenants will be met for the year ended 31 March 2022 with headroom of £1.1M being forecast.<br><br>Slippage in developments at Barra, Crowlista, Lochmaddy and Goathill HWEC has resulted in a forecast out-turn of £1.8M less than the revised budget.<br><br>**The Board:**<br><br>**a) noted the Management Report to 31 January 2022;**<br><br>**b) approved that £1,408,633 be vired from cost to reserves due to slippage on the Goathill HWEC programme.** |
| 6.4 | **<u>Annual Financing Strategy</u>**<br><br>The Director of Finance & Corporate Services presented the Annual Financing Strategy for 2022/23 for consideration and approval. It is forecast that £7M will be drawn down from the new borrowing facility to meet working capital requirements.<br><br>Commentary within the Strategy had been updated to reflect inflation and interest rate forecasts. The hedging position remained unchanged.<br><br>**The Board approved the Annual Financing Strategy.** |
| 6.5 | **<u>Fraud Checklist</u>**<br><br>The Annual Fraud Checklist was presented for consideration and approval.<br><br>The Director of Finance & Corporate Services advised we were unable to confirm Item 6 on the Checklist as due to remote working arrangements, employees had access to systems at all times.<br><br>Employees and Managers would be reminded of their obligation to take 2 weeks consecutive holidays per year.<br><br>**The Board reviewed and approved the Fraud Checklist.** |

| | |
|---|---|
| **6.6** | **Board Training Plan**<br><br>The Executive Office Manager presented a draft Board Training Plan for approval, following the Board Skills Audit which was carried out in 2021 and advised a Board Development Session would be arranged following the Board Meeting on 25 May 2022.<br><br>Approval was sought for the use of Decision Time for managing the Board process. Members commended the Decision Time software and agreed using this would be of benefit to the Board.<br><br>**The Board:**<br><br>**a) approved the Draft Training Plan;**<br><br>**b) noted a Board Development Session will be arranged following our May Board meeting; and**<br><br>**c) approved the use of Decision Time for managing our Board process.** |
| **6.7** | **SHR Loan Portfolio**<br><br>An In-Year Loan Portfolio Return had been submitted to the Scottish Housing Regulator, following the re-financing of our borrowing facility with RBS and was presented for Homologation. The Director of Finance & Corporate Services advised the return had been filed in line with the Board approved re-financing agreement and the Annual Financing Strategy approved in August 2021.<br><br>**The submission of the Scottish Housing Regulator Loan Portfolio Return was homologated.** |

| POLICIES & STRATEGIES | |
|---|---|
| **7.1** | **<u>Estate Management Policy</u>**<br><br>The revised Estate Management Policy was presented for review and approval. The policy was updated following approval by the Board on 9 February 2022 to include the provisions of the Void Management Policy within the Estate Management Policy, Allocations Policy and Repairs and Maintenance Policy.<br><br>**The Board approved the Estate Management Policy.** |
| **7.2** | **<u>Allocations Policy</u>**<br><br>The Area Manager presented the Allocations Policy for approval for consultation with tenants. A section on Creating Tenancies from the Void Management Policy was include in the revised policy. Reference to Sheltered Housing was replaced with reference to Housing with Extra Care.<br><br>Members were advised there was no provision for allocating houses to private sector employers within the revised policy as there was further work required to establish if this can be done. Once the work is completed a recommendation will be brought to the Board for consideration.<br><br>**The Board approved:**<br><br>**a) the Allocations Policy for consultation with tenants; and**<br><br>**b) if there are no material changes to the Allocations Policy arising from the consultation, that the Policy is approved otherwise a revised version will be presented to the next meeting of the Board.** |
| **7.3** | **<u>Expenses Policies</u>**<br><br>Following the annual review of the Members' & Staff Expenses Policies an update was made to the Staff Expenses Policy to reflect changes in approved HMRC private use of van allowance.<br><br>**The Board:**<br><br>**a) approved the Staff Expenses Policy; and**<br><br>**b) noted there were no changes to the Members Expenses Policy and the current policy will remain valid for a further 12 months.** |
| **7.4** | **<u>Development Policies</u>**<br><br>The Development Policy and Development Risk Policy were presented for review and approval. Following a review of the policies the Naming a Development Policy, approved in June 2021, had been incorporated in the main Development Policy.<br><br>The Development Manager advised minor amendments had also been made to the policies.<br><br>Helen Mackenzie suggested an additional risk be added to the Development Risk Policy, at paragraph 3.1, to account for changes in demand that may arise during the build process and the removal of reference to untried consultants, at paragraph 3.6. It was agreed these amendments be made to the policy.<br><br>**The Board approved the:**<br><br>**a) incorporation of the Naming a Development Policy into the main Development Policy;**<br><br>**b) Development Policy; and**<br><br>**c) Development Risk Policy subject to amendments to paragraphs 3.1 and 3.6.** |
| **7.5** | **<u>Value for Money Strategy</u>**<br><br>The Director of Finance & Corporate Services presented an updated Value for Money Strategy for approval.<br><br>Helen Mackenzie queried if Return on Investment (ROI) would be an appropriate measure when looking at our current stock. The Director of Finance & Corporate Services advised we used a number of different measures and ROI was used where appropriate. It was noted that, if required, certain capital projects may be undertaken at additional cost, however, Board approval would be sought prior to commencing capital projects which do not repay over 30 years. A Value for Money performance report will be presented to the Board annually to provide an overview of the metrics and how we compare with our peer group.<br><br>**The Board approved the Value for Money Strategy.** |

| MONITORING REPORTS | |
|---|---|
| **8.1** | **<u>Workforce Strategy</u>**<br>The Chief Executive presented an update to the Workforce Strategy for consideration and consultation with staff and the Union. The main change to the Strategy was the work being undertaken with regards to Modern Apprenticeships. Members were advised apprentices would be recruited annually on a one-year contract with the option to specialise into a specific area for a further two years.<br>Helen Mackenzie questioned whether we should be more specific when recruiting apprentices in order to address the teams with the oldest age profile first. The Chief Executive advised further details would be brought back to the Board following consultation.<br>Helen Mackenzie suggested more information under item three on the Action Plan be included to provide clarity. It was agreed this would form part of the final Strategy.<br>Calum Mackay commended the Strategy and suggested it be used to influence wider discussions surrounding population decline with the islands.<br>**The Board approved the revised Workforce Strategy for consultation with staff and the Union.** |
| **8.2** | **<u>Procurement Policy & Procurement Strategy</u>**<br>The updated Procurement Policy & Strategy were presented for approval. Minor changes had been made to the policy to reflect the UK's membership of the World Trade Organisation (WTO) as an independent entity. Procurement thresholds were updated to follow WTO guidance and the Procurement Policy was updated to strengthen and widen the concept of 'Fair Work First'.<br>Helen Mackenzie suggested a change be made to the Procurement Strategy Key Performance Indicator target on compliance with procurement legislation. It was agreed that the target be amended to "no successful legal challenges" regarding the procurement process as any challenges raised are outwith our control.<br>**The Board:**<br>**a) approved the revised Procurement Policy;**<br>**b) noted the Procurement Plan for 2022/23;**<br>**c) approved our updated Procurement Strategy 2022/23 and performance measurement framework subject to an amendment to the Key Performance Indicator on Compliance with Procurement legislation;**<br>**d) noted the procurement performance for 2021; and**<br>**e) noted the Contracts & Community Benefits Registers.** |

| MONITORING & UPDATE REPORTS | |
|---|---|
| **9.1** | **<u>Development Monitoring Report</u>**<br>The Development Manager presented an update on the 5 Year Development Programme. This financial year 170 homes (76 completed and 94 on site) were at various stages of build accounting for 43% of the 5 year Development Plan 2020-2025.<br>**The Board noted the update on the Development Programme.** |
| **MEETING GOES INTO PRIVATE SESSION** | |

Chairperson Mr Iain Macmillan

SIGNED ……………………………………………………

DATE ……………………………………………………

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ITEM NO 3.2

# Board Action Sheet

| ACTION POINT | MINUTE NUMBER | ACTION TO BE TAKEN | DEADLINE/ TIMESCALE | ACTION BY | PROGRESS |
|---|---|---|---|---|---|
| 1 | 23 Mar 2022 (3.2) | Chair to respond to letters received from CNES Leader and IJB Chair. | | Chair | |
| 2 | 23 Mar 2022 (6.1) | Business Plan to be updated to account for the Ukrainian refugee crisis. | | Chief Executive | Completed |
| 3 | 23 Mar 2022 (6.3) | Virement of £1,408,633 to reserves on Goathill HWEC programme. | | Director of Finance & Corporate Services | Done |
| 4 | 23 Mar 2022 (6.6) | Board Development Session to be arranged following May Board Meeting. | 29 June 2022 | Executive Office Manager | |
| 5 | 23 Mar 2022 (7.2) | Allocations Policy to be issued for consultation with tenants. | 25 March 2022 | Governance Officer | Consultation issued with end date of 22 April 2022. No response to consultation. |
| 6 | 23 Mar 2022 (8.1) | Workforce Strategy to be issued for consultation with staff and the Union. | 25 March 2022 | Governance Officer | Consultation issued with end date 14 April 2022. Revised Strategy on May Agenda. |
| 7 | 9 Feb 2022 (7.2) | Review garage rents. | 2023/24 | Director of Finance & Corporate Resources | |
| 8 | 9 Feb 2022 (7.3) | Information on the levels of repairs to be included in the next Repairs report brought to the Board in May. | 25 May 2022 | Director of Operations | Report on May 22 Board Agenda |
| 9 | 17 Nov 2021 (1) | Encourager of the Year Shields to be donated to the local Secondary Schools on behalf of Norman Macleod's family | 10 December 2021 | Chief Executive | Shields presented to representatives from CNES Education Dept on 25 March 2022. |

| ACTION POINT | MINUTE NUMBER | ACTION TO BE TAKEN | DEADLINE/ TIMESCALE | ACTION BY | PROGRESS |
|---|---|---|---|---|---|
| 10 | 19 May 2021 (7.3) | Communications to be accessible and easy to understand for all our customers | 25 May 2022 | Executive Office Manager | Review of letters and newsletter is underway. To be captured with the review of the Communications Policy. |
| 12 | 17 Mar 2021 (6.4) | Development at Crowlista to be progressed | June 2021 | Development Manager | Resumption awaited and development can then progress. |
| 13 | 20 May 2020 (8.3) | Arrange for a Board Member to attend staff meeting. | Once Office activities return to normal | Company Secretary | |

ITEM NO 6.1

# ANNUAL RETURN ON THE CHARTER 2021/22

## Board 25 May 2022

Report by Chief Executive

## Purpose of Report

1.1 The purpose of this report is to bring our Annual Return on the Charter (ARC) 2021/22 before the Board for consideration and approval.

## Summary

2.1 The completed ARC which includes our EESSH return, is at Appendix 1.

2.2 Of the 39 applicable indicators, 11 are contextual. Of the remaining 28 performance indicators, 10 are showing an improvement since the previous year and 6 are neutral. A summary of some of the key variances is shown in the table at 9.3.

2.3 We let an additional 66 homes this year when compared to last year.

2.4 Six of the indicators showing a performance decrease are as a result of the Tenant Satisfaction Survey carried out in July 2021. An Action Plan is in place to address the concerns highlighted.

## Competence

3.1 The financial, legal and other implications are detailed in paragraph 5.1 – 8.1 of this report.

## Recommendations

4.1 **It is recommended that the Board review and approve the Draft Annual Return on the Charter 2021/22 at Appendix 1, subject to the reconciliation of any queries raised.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Draft Annual Return on the Charter 2021/22 | |
| **Background Papers**: | Scottish Social Housing Charter | |
| **Writer of Report:** | Iona France | Tel: 0300 123 0773 |

## Competence

*Financial*

5.1 There are no financial constraints to the recommendation in this report being implemented.

*Legal*

6.1 There is a legal and regulatory requirement to ensure that the ARC is prepared and submitted by 31 May 2022.

*Regulatory Guidance*

*7.1* The Regulatory Standards checklist has been completed and there is nothing in the report which would result in a breach of the standards.

7.2 This report provides ongoing assurance of evidence points CH1 in relation to our Annual Assurance Statement.

*Risk*

8.1 Completion and submission of the ARC within timescales mitigates the risk of breaching our regulatory requirements and the potential knock-on effect of increasing our risk rating and regulatory engagement.

# Report Details

9.1 On 1 April 2021, RSLs commenced reporting against the eighth full year of the Annual Return on the Charter (ARC). This return covers the period 1 April 2021 – 31 March 2022.

9.2 This year has seen no significant amendments compared with the 2020/21 Return. The ARC 2021/22 is attached at Appendix 1 for consideration.

9.3 Some of the pertinent statistics from key indicators are summarised below. Previous years' data has been included for comparison.

| DETAIL | Variance | ARC 2021/22 | ARC 2020/21 | ARC 2019/20 |
|---|---|---|---|---|
| | | | | |
| Emergency repairs completed | -18.49% | 983 | 1206 | 816 |
| Average length of time to complete emergency repairs | -11.11 | 2.32 hours | 2.61 hours | 2.86 hours |
| Non-emergency repairs completed | 13.26 | 4690 | 4141 | 4613 |
| Average length of time to complete non-emergency repairs | -21.02% | 3.87 days | 4.90 days | 2.57 days |
| Reactive repairs completed right first time | -0.93% | 89.72% | 90.56% | 89.49% |
| | | | | |
| Total arrears | 10.69% | £340,748 | £307,832 | £302,173 |
| Former tenant arrears | -8.20% | £110,365 | £120,221 | £94,252 |
| | | | | |
| Average time to re-let properties in the last year | -9.9% | 45.19 days | 50.19 days | 24.66 days |
| Calendar days properties were empty | 4.5% | 8479 | 8131 | 4512 |
| Rent loss through voids | -8.19% | £88,808 | £96,726 | £57,159 |
| | | | | |
| General needs lets | 30.97% | 241 | 184 | 218 |
| Supported Housing lets | 450% | 11 | 2 | 12 |
| | | | | |
| Anti-social behaviour cases | 33.33% | 16 | 12 | 16 |
| Abandoned properties | 50% | 6 | 4 | 4 |
| | | | | |
| Total self-contained stock | 2.88% | 2287 | 2223 | 2201 |
| Stock meeting SHQS | -6.15% | 74.86% | 80.07% | 82.78% |
| Stock meeting EESSH | 2.09% | 87.9% | 86.10% | 83.00% |
| | | | | |
| Rent increase | 169.23% | 3.5% | 1.3% | 2.2% |
| Staff turnover | 155.91% | 13% | 5.08% | 4.16% |

9.4 A number of areas of performance continued to be affected by restrictions due to COVID -19 and have not yet returned to pre-pandemic levels:

- Average time to re-let properties in the last year has decreased by 9.9% – however this is more than a 50% increase from 2019/20;
- Number of calendar days properties were empty increased by 4.5%;

9.5 The repairs response time has improved both for emergency repairs and non-emergency repairs although the repairs right time performance has decreased very slightly.

9.6 The total stock meeting SHQS has reduced by 6.15%. This is mainly due to the number of abeyances added as a result of access issues, where we were not able install of consumer units and therefore issue a Domestic Electrical Installation Certificate (DEIC).

9.7 Following the publication of ARC results by the Regulator in the autumn our Tenant Report will be prepared and issued to all Tenants.

# Annual Return on the Charter (ARC) 2021-2022

APPENDIX 1

**Landlord name:** Hebridean Housing Partnership Ltd

**RSL Reg. No.:** 359

**Report generated date:** 13/05/2022 10:26:30

## Approval

| | | |
|---|---|---|
| A1.1 | Date approved | |
| A1.2 | Approver | |
| A1.3 | Approver job title | |
| A1.4 | Comments (Approval) | |

## Social landlord contextual information

### Staff

Staff information, staff turnover and sickness rates (Indicator C1)

| | | |
|---|---|---|
| C1.1 | the name of Chief Executive | Ms. Dena Macleod |
| C1.2.1 | C1.2 Staff employed by the RSL:<br><br>the number of senior staff | 3.00 |
| C1.2.2 | the number of office based staff | 40.50 |
| C1.2.3 | the number of care / support staff | 2.50 |
| C1.2.4 | the number of concierge staff | 0.00 |
| C1.2.5 | the number of direct labour staff | 0.00 |
| C1.2.6 | the total number of staff | |
| C1.3.1 | Staff turnover and sickness absence:<br><br>the percentage of senior staff turnover in the year to the end of the reporting year | 25.00% |
| C1.3.2 | the percentage of total staff turnover in the year to the end of the reporting year | 13.00% |
| C1.3.3 | the percentage of days lost through staff sickness absence in the reporting year | 2.45% |

## Social landlord contextual information

### Lets

| |
|---|
| Number of lets during the reporting year, split between 'general needs' and 'supported housing' (Indicator C3) |

| | | |
|---|---|---|
| C3.1 | The number of 'general needs' lets during the reporting year | 241 |
| C3.2 | The number of 'supported housing' lets during the reporting year | 11 |

| | |
|---|---|
| Indicator C3 | 252 |

| |
|---|
| The number of lets during the reporting year by source of let (Indicator C2) |

| | | |
|---|---|---|
| C2.1 | The number of lets to existing tenants | 44 |
| C2.2 | The number of lets to housing list applicants | 112 |
| C2.3 | The number of mutual exchanges | 12 |
| C2.4 | The number of lets from other sources | 0 |
| C2.5.1 | C2.5 The number of applicants who have been assessed as statutorily homeless by the local authority as:<br><br>section 5 referrals | 0 |
| C2.5.2 | nominations from the local authority | 96 |
| C2.5.3 | other | 0 |
| C2.6 | the number of other nominations from local authorities | 0 |
| C2.7 | Total number of lets excluding exchanges | 252 |

Comments (Social landlord contextual information)

## Overall satisfaction

### All outcomes

| |
|---|
| Percentage of tenants satisfied with the overall service provided by their landlord (Indicator 1) |

| | | |
|---|---|---|
| 1.1.1 | 1.1 In relation to the overall tenant satisfaction survey carried out, please state:<br><br>the number of tenants who were surveyed | 592 |
| 1.1.2 | the fieldwork dates of the survey | 07/2021 |
| 1.1.3 | The method(s) of administering the survey:<br><br>Post | ☐ |
| 1.1.4 | Telephone | ☒ |
| 1.1.5 | Face-to-face | ☐ |
| 1.1.6 | Online | ☒ |
| 1.2.1 | 1.2 In relation to the tenant satisfaction question on overall services, please state the number of tenants who responded:<br><br>very satisfied | 374 |
| 1.2.2 | fairly satisfied | 135 |
| 1.2.3 | neither satisfied nor dissatisfied | 33 |
| 1.2.4 | fairly dissatisfied | 33 |
| 1.2.5 | very dissatisfied | 17 |
| 1.2.6 | no opinion | 0 |
| 1.2.7 | Total | 592 |

| | |
|---|---|
| Indicator 1 | 85.98% |

## Annual Return on the Charter (ARC) 2021-2022

Comments (Overall satisfaction)

Scottish Housing Regulator

## The customer / landlord relationship

### Communication

| |
|---|
| Percentage of tenants who feel their landlord is good at keeping them informed about their services and decisions (Indicator 2) |

| | | |
|---|---|---|
| 2.1 | How many tenants answered the question "How good or poor do you feel your landlord is at keeping you informed about their services and decisions?" | 592 |
| 2.2.1 | 2.2 Of the tenants who answered, how many said that their landlord was: very good at keeping them informed | 409 |
| 2.2.2 | fairly good at keeping them informed | 119 |
| 2.2.3 | neither good nor poor at keeping them informed | 19 |
| 2.2.4 | fairly poor at keeping them informed | 27 |
| 2.2.5 | very poor at keeping them informed | 18 |
| 2.2.6 | Total | 592 |

| | |
|---|---|
| Indicator 2 | 89.19% |

**Participation**

| |
|---|
| Percentage of tenants satisfied with the opportunities given to them to participate in their landlord's decision making processes (Indicator 5) |

| | | |
|---|---|---|
| 5.1 | How many tenants answered the question "How satisfied or dissatisfied are you with opportunities given to you to participate in your landlord's decision making processes?" | 592 |
| 5.2.1 | 5.2 Of the tenants who answered, how many said that they were:<br><br>very satisfied | 375 |
| 5.2.2 | fairly satisfied | 125 |
| 5.2.3 | neither satisfied nor dissatisfied | 56 |
| 5.2.4 | fairly dissatisfied | 29 |
| 5.2.5 | very dissatisfied | 7 |
| 5.2.6 | Total | 592 |

| | |
|---|---|
| Indicator 5 | 84.46% |

Comments (The customer / landlord relationship)

## Housing quality and maintenance

### Quality of housing

Scottish Housing Quality Standard (SHQS) – Stock condition survey information (Indicator C8)

| | | |
|---|---|---|
| C8.1 | The date your organisation's stock was last surveyed or assessed for compliance with the SHQS | 01/2018 |
| C8.2 | What percentage of stock did your organisation fully assess for compliance in the last five years? | 20.00 |
| C8.3 | The date of your next scheduled stock condition survey or assessment | 05/2022 |
| C8.4 | What percentage of your organisation's stock will be fully assessed in the next survey for SHQS compliance | 20.00 |
| C8.5 | Comments on method of assessing SHQS compliance. | |

Assets of age, construction, type and in differing areas were developed into cells for a 20% sample.
A contingency list within the cells was also prepared in readiness for cloning across the remainder of the stock
The results of the sample and cloning will then be cross referenced to known improvements carried out in recent years in order to provide an accurate model of works required across SHQS criteria.

Scottish Housing Quality Standard (SHQS) – Stock summary (Indicator C9)

| | | End of the reporting year | End of the next reporting year |
|---|---|---|---|
| C9.1 | Total self-contained stock | 2,287 | 2,364 |
| C9.2 | Self-contained stock exempt from SHQS | 323 | 311 |
| C9.3 | Self-contained stock in abeyance from SHQS | 252 | 57 |
| C9.4.1 | Self-contained stock failing SHQS for one criterion | 0 | 0 |
| C9.4.2 | Self-contained stock failing SHQS for two or more criteria | 0 | 0 |
| C9.4.3 | Total self-contained stock failing SHQS | 0 | 0 |
| C9.5 | Stock meeting the SHQS | 1,712 | 1,996 |

| C9.6 | Total self-contained stock meeting the SHQS by local authority |
|---|---|

| | End of the reporting year | End of the next reporting year |
|---|---|---|
| Aberdeen City | 0 | 0 |
| Aberdeenshire | 0 | 0 |
| Angus | 0 | 0 |
| Argyll & Bute | 0 | 0 |
| City of Edinburgh | 0 | 0 |
| Clackmannanshire | 0 | 0 |
| Dumfries & Galloway | 0 | 0 |
| Dundee City | 0 | 0 |
| East Ayrshire | 0 | 0 |
| East Dunbartonshire | 0 | 0 |
| East Lothian | 0 | 0 |
| East Renfrewshire | 0 | 0 |
| Eilean Siar | 1,712 | 1,996 |
| Falkirk | 0 | 0 |
| Fife | 0 | 0 |
| Glasgow City | 0 | 0 |
| Highland | 0 | 0 |
| Inverclyde | 0 | 0 |
| Midlothian | 0 | 0 |
| Moray | 0 | 0 |
| North Ayrshire | 0 | 0 |

| | | |
|---|---|---|
| North Lanarkshire | 0 | 0 |
| Orkney Islands | 0 | 0 |
| Perth & Kinross | 0 | 0 |
| Renfrewshire | 0 | 0 |
| Scottish Borders | 0 | 0 |
| Shetland Islands | 0 | 0 |
| South Ayrshire | 0 | 0 |
| South Lanarkshire | 0 | 0 |
| Stirling | 0 | 0 |
| West Dunbartonshire | 0 | 0 |
| West Lothian | 0 | 0 |
| Totals | 1,712 | 1,996 |

Percentage of stock meeting the Scottish Housing Quality Standard (SHQS) (Indicator 6)

| | | |
|---|---|---|
| 6.1.1 | The total number of properties within scope of the SHQS:<br><br>at the end of the reporting year | 2,287 |
| 6.1.2 | projected to the end of the next reporting year | 2,364 |
| 6.2.1 | The number of properties meeting the SHQS:<br><br>at the end of the reporting year | 1,712 |
| 6.2.2 | projected to the end of the next reporting year | 1,996 |

| | |
|---|---|
| Indicator 6 - Percentage of stock meeting the SHQS at the end of the reporting year | 74.86% |
| Indicator 6 - Percentage of stock meeting the SHQS projected to the end of the next reporting year | 84.43% |

Percentage of tenants satisfied with the quality of their home (Indicator 7)

| | | |
|---|---|---|
| 7.1 | How many tenants answered the question "Overall, how satisfied or dissatisfied are you with the quality of your home?" | 583 |
| 7.2.1 | 7.2 Of the tenants who answered, how many said that they were:<br><br>very satisfied | 369 |
| 7.2.2 | fairly satisfied | 148 |
| 7.2.3 | neither satisfied nor dissatisfied | 31 |
| 7.2.4 | fairly dissatisfied | 18 |
| 7.2.5 | very dissatisfied | 17 |
| 7.3 | Total | 583 |

| | |
|---|---|
| Indicator 7 | 88.68% |

**Repairs, maintenance & improvements**

| |
|---|
| Average length of time taken to complete emergency repairs (Indicator 8) |

| | | |
|---|---|---|
| 8.1 | The number of emergency repairs completed in the reporting year | 983 |
| 8.2 | The total number of hours taken to complete emergency repairs | 2,277 |

| | |
|---|---|
| Indicator 8 | 2.32 |

| |
|---|
| Average length of time taken to complete non-emergency repairs (Indicator 9) |

| | | |
|---|---|---|
| 9.1 | The total number of non-emergency repairs completed in the reporting year | 4,690 |
| 9.2 | The total number of working days taken to complete non-emergency repairs | 18,138 |

| | |
|---|---|
| Indicator 9 | 3.87 |

| |
|---|
| Percentage of reactive repairs carried out in the last year completed right first time (Indicator 10) |

| | | |
|---|---|---|
| 10.1 | The number of reactive repairs completed right first time during the reporting year | 4,208 |
| 10.2 | The total number of reactive repairs completed during the reporting year | 4,690 |

| | |
|---|---|
| Indicator 10 | 89.72% |

| |
|---|
| How many times in the reporting year did not meet your statutory duty to complete a gas safety check (Indicator 11). |

| | | |
|---|---|---|
| 11.1 | The number of times you did not meet your statutory duty to complete a gas safety check. | 0 |
| 11.2 | if you did not meet your statutory duty to complete a gas safety check add a note in the comments field | |
| | | N/A |

| | |
|---|---|
| Indicator 11 | 0 |

| |
|---|
| Percentage of tenants who have had repairs or maintenance carried out in last 12 months satisfied with the repairs and maintenance service (Indicator 12) |

| | | |
|---|---|---|
| 12.1 | Of the tenants who had repairs carried out in the last year, how many answered the question "Thinking about the LAST time you had repairs carried out, how satisfied or dissatisfied were you with the repairs service provided by your landlord?" | 250 |
| | 12.2 Of the tenants who answered, how many said that they were: | |
| 12.2.1 | very satisfied | 178 |
| 12.2.2 | fairly satisfied | 52 |
| 12.2.3 | neither satisfied nor dissatisfied | 10 |
| 12.2.4 | fairly dissatisfied | 5 |
| 12.2.5 | very dissatisfied | 5 |
| 12.2.6 | Total | 250 |

| | |
|---|---|
| Indicator 12 | 92.00% |

**EESSH**

Percentage of properties meeting the EESSH (Indicator C10)

| C10.1 | Number of self contained properties | | | |
|---|---|---|---|---|
| | Gas | Electric | Other fuels | **Total** |
| Flats | 188 | 154 | 0 | 342 |
| Four-in-a-block | 48 | 0 | 0 | 48 |
| Houses (other than detached) | 199 | 1,560 | 65 | 1,824 |
| Detached houses | 2 | 70 | 1 | 73 |
| **Total** | 437 | 1,784 | 66 | 2,287 |

| C10.2 | Number of self contained properties not in scope of the EESSH | | | |
|---|---|---|---|---|
| | Gas | Electric | Other fuels | **Total** |
| Flats | 0 | 0 | 0 | 0 |
| Four-in-a-block | 0 | 0 | 0 | 0 |
| Houses (other than detached) | 0 | 0 | 0 | 0 |
| Detached houses | 0 | 0 | 0 | 0 |
| **Total** | 0 | 0 | 0 | 0 |

| C10.3 | Number of self contained properties in scope of the EESSH | | | |
|---|---|---|---|---|
| | Gas | Electric | Other fuels | **Total** |
| Flats | 188 | 154 | 0 | 342 |
| Four-in-a-block | 48 | 0 | 0 | 48 |
| Houses (other than detached) | 199 | 1,560 | 65 | 1,824 |
| Detached houses | 2 | 70 | 1 | 73 |
| **Total** | 437 | 1,784 | 66 | 2,287 |

| C10.4 | Number of properties in scope of the EESSH where compliance is unknown | | | |
|---|---|---|---|---|
| | Gas | Electric | Other fuels | **Total** |
| Flats | 0 | 0 | 0 | 0 |
| Four-in-a-block | 0 | 0 | 0 | 0 |
| Houses (other than detached) | 0 | 0 | 0 | 0 |
| Detached houses | 0 | 0 | 0 | 0 |
| **Total** | 0 | 0 | 0 | 0 |

| C10.4.21 | Where EESSH compliance is unknown for any properties, please explain why |
|---|---|
| | N/A |

| C10.5 | Number of properties in scope of the EESSH that do not meet the standard | | | |
|---|---|---|---|---|
| | Gas | Electric | Other fuels | **Total** |
| Flats | 0 | 0 | 0 | 0 |
| Four-in-a-block | 0 | 0 | 0 | 0 |
| Houses (other than detached) | 0 | 0 | 0 | 0 |
| Detached houses | 0 | 0 | 0 | 0 |
| **Total** | 0 | 0 | 0 | 0 |

| C10.6 | Number of properties in scope of the EESSH that are exempt the standard | | | |
|---|---|---|---|---|
| | Gas | Electric | Other fuels | **Total** |
| Flats | 1 | 17 | 0 | 18 |
| Four-in-a-block | 0 | 0 | 0 | 0 |
| Houses (other than detached) | 1 | 205 | 16 | 222 |
| Detached houses | 0 | 36 | 0 | 36 |
| Total | 2 | 258 | 16 | 276 |

| C10.7 | Number of properties in scope of the EESSH that meet the standard | | | |
|---|---|---|---|---|
| | Gas | Electric | Other fuels | **Total** |
| Flats | 187 | 137 | 0 | 324 |
| Four-in-a-block | 48 | 0 | 0 | 48 |
| Houses (other than detached) | 198 | 1,355 | 49 | 1,602 |
| Detached houses | 2 | 34 | 1 | 37 |
| **Total** | 435 | 1,526 | 50 | 2,011 |

| | | |
|---|---|---|
| | C10 | 87.9% |

Anticipated exemptions from the EESSH (Indicator C11)

| C11.1 | Number of properties anticipated to require an exemption from the first EESSH milestone in the next reporting year | | | |
|---|---|---|---|---|
| | Gas | Electric | Other fuels | **Total** |
| Flats | 1 | 17 | 0 | 18 |
| Four-in-a-block | 0 | 0 | 0 | 0 |
| Houses (other than detached) | 1 | 205 | 16 | 222 |
| Detached houses | 0 | 36 | 0 | 36 |
| **Total** | 2 | 258 | 16 | 276 |

| C11.2 | The reasons properties anticipated to require an exemption |
|---|---|
| | Number of Properties |
| Technical | 0 |
| Social | 64 |
| Excessive cost | 5 |
| New technology | 206 |
| Legal | 0 |
| Disposal | 1 |
| Long term voids | 0 |
| Unable to secure funding | 0 |
| Other reason / unknown | 0 |
| **Total** | 276 |

| C11.3 | If other reason or unknown, please explain |
|---|---|
| | N/A |

Comments (Housing quality and maintenance)

## Neighbourhood & community

### Estate management, anti-social behaviour, neighbour nuisance and tenancy disputes

| |
|---|
| Percentage of all complaints responded to in full at Stage 1 and percentage of all complaints responded to in full at Stage 2. (Indicators 3 & 4) |

| | 1st stage | 2nd stage |
|---|---|---|
| Complaints received in the reporting year | 63 | 18 |
| Complaints carried forward from previous reporting year | 0 | 2 |
| All complaints received and carried forward | 63 | 20 |
| Number of complaints responded to in full by the landlord in the reporting year | 63 | 19 |
| Time taken in working days to provide a full response | 227 | 315 |

| | |
|---|---|
| Indicators 3 & 4 - The percentage of all complaints responded to in full at Stage 1 | 100.00% |
| Indicators 3 & 4 - The percentage of all complaints responded to in full at Stage 2 | 95.00% |
| Indicators 3 & 4 - The average time in working days for a full response at Stage 1 | 3.60 |
| Indicators 3 & 4 - The average time in working days for a full response at Stage 2 | 16.58 |

| |
|---|
| Percentage of tenants satisfied with the landlord’s contribution to the management of the neighbourhood they live in (Indicator 13) |

| | | |
|---|---|---|
| 13.1 | How many tenants answered the question "‘Overall, how satisfied or dissatisfied are you with your landlord’s contribution to the management of the neighbourhood you live in?’" | 541 |
| 13.2.1 | 13.2 Of the tenants who answered, how many said that they were:<br><br>very satisfied | 332 |
| 13.2.2 | fairly satisfied | 107 |
| 13.2.3 | neither satisfied nor dissatisfied | 31 |
| 13.2.4 | fairly dissatisfied | 55 |
| 13.2.5 | very dissatisfied | 16 |
| 13.2.6 | Total | 541 |

| | |
|---|---|
| Indicator 13 | 81.15% |

| |
|---|
| Percentage of tenancy offers refused during the year (Indicator 14) |

| | | |
|---|---|---|
| 14.1 | The number of tenancy offers made during the reporting year | 424 |
| 14.2 | The number of tenancy offers that were refused | 142 |

| | |
|---|---|
| Indicator 14 | 33.49% |

| |
|---|
| Percentage of anti-social behaviour cases reported in the last year which were resolved (Indicator 15) |

| | | |
|---|---|---|
| 15.1 | The number of cases of anti-social behaviour reported in the last year | 16 |
| 15.2 | Of those at 15.1, the number of cases resolved in the last year | 15 |

| | |
|---|---|
| Indicator 15 | 93.75% |

| |
|---|
| Abandoned homes (Indicator C4) |

| | | |
|---|---|---|
| C4.1 | The number of properties abandoned during the reporting year | 6 |

| |
|---|
| Percentage of the court actions initiated which resulted in eviction and the reasons for eviction (Indicator 22) |

| | | |
|---|---|---|
| 22.1 | The total number of court actions initiated during the reporting year | 10 |
| 22.2.1 | 22.2 The number of properties recovered:<br><br>because rent had not been paid | 0 |
| 22.2.2 | because of anti-social behaviour | 0 |
| 22.2.3 | for other reasons | 0 |

| | |
|---|---|
| Indicator 22 - Percentage of the court actions initiated which resulted in eviction because rent had not been paid | 0.00% |
| Indicator 22 - Percentage of the court actions initiated which resulted in eviction because of anti-social behaviour | 0.00% |
| Indicator 22 - Percentage of the court actions initiated which resulted in eviction for other reasons | 0.00% |
| Indicator 22 - Percentage of the court actions initiated which resulted in eviction | 0.00% |

## Annual Return on the Charter (ARC) 2021-2022

Comments (Neighbourhood & community)

## Access to housing and support

### Housing options and access to social housing

| Percentage of lettable houses that became vacant in the last year (Indicator 17) |
|---|

| | | |
|---|---|---|
| 17.1 | The total number of lettable self-contained stock | 2,287 |
| 17.2 | The number of empty dwellings that arose during the reporting year in self-contained lettable stock | 196 |

| | |
|---|---|
| Indicator 17 | 8.57% |

Scottish Housing Regulator

| |
|---|
| Number of households currently waiting for adaptations to their home (Indicator 19) |

| | | |
|---|---|---|
| 19.1 | The total number of approved applications on the list for adaptations as at the start of the reporting year, plus any new approved applications during the reporting year. | 154 |
| 19.2 | The number of approved applications completed between the start and end of the reporting year | 151 |
| 19.3 | The total number of households waiting for applications to be completed at the end of the reporting year. | 3 |
| 19.4 | if 19(iii) does not equal 19(i) minus 19(ii) add a note in the comments field. | |
| | | N/A |

| | |
|---|---|
| Indicator 19 | 3 |

| |
|---|
| Total cost of adaptations completed in the year by source of funding (£) (Indicator 20) |

| | | |
|---|---|---|
| 20.1 | The cost(£) that was landlord funded; | £0 |
| 20.2 | The cost(£) that was grant funded | £330,009 |
| 20.3 | The cost(£) that was funded by other sources. | £0 |

| | |
|---|---|
| Indicator 20 | £330,009 |

| |
|---|
| The average time to complete adaptations (Indicator 21) |

| | | |
|---|---|---|
| 21.1 | The total number of working days taken to complete all adaptations. | 7,942 |
| 21.2 | The total number of adaptations completed during the reporting year. | 305 |

| | |
|---|---|
| Indicator 21 | 26.04 |

| |
|---|
| Homelessness – the percentage of referrals under Section 5, and other referrals for homeless households made by the local authority, that result in an offer, and the percentage of those offers that result in a let (Indicator 23) |

| | | |
|---|---|---|
| 23.1 | The total number of individual homeless households referrals received under section 5. | 0 |
| 23.2 | The total number of individual homeless households referrals received under other referral routes. | 128 |
| 23.3 | The total number of individual homeless households referrals received under section 5 and other referral routes. | 128 |
| 23.4 | The total number of individual homeless households referrals received under section 5 that result in an offer of a permanent home. | 0 |
| 23.5 | The total number of individual homeless households referrals received under other referral routes that result in an offer of a permanent home. | 128 |
| 23.6 | The total number of individual homeless households referrals received under section 5 and other referral routes that result in an offer of a permanent home. | 128 |
| 23.7 | The total number of accepted offers. | 96 |

| | |
|---|---|
| Indicator 23 - The percentage of referrals under section 5, and other referrals for homeless households made by a local authority, that result in an offer | 100.00% |
| Indicator 23 - The percentage of those offers that result in a let | 75.00% |

| |
|---|
| Average length of time to re-let properties in the last year (Indicator 30) |

| | | |
|---|---|---|
| 30.1 | The total number of properties re-let in the reporting year | 188 |
| 30.2 | The total number of calendar days properties were empty | 8,497 |

| | |
|---|---|
| Indicator 30 | 45.20 |

## Tenancy sustainment

| |
|---|
| Percentage of new tenancies sustained for more than a year, by source of let (Indicator 16) |

| | | |
|---|---|---|
| 16.1.1 | The number of tenancies which began in the previous reporting year by: existing tenants | 26 |
| 16.1.2 | applicants who were assessed as statutory homeless by the local authority | 65 |
| 16.1.3 | applicants from your organisation's housing list | 83 |
| 16.1.4 | nominations from local authority | 0 |
| 16.1.5 | other | 0 |
| 16.2.1 | The number of tenants at 16.1 who remained in their tenancy for more than a year by: existing tenants | 25 |
| 16.2.2 | applicants who were assessed as statutory homeless by the local authority | 58 |
| 16.2.3 | applicants from your organisation's housing list | 79 |
| 16.2.4 | nominations from local authority | 0 |
| 16.2.5 | other | 0 |

| | |
|---|---|
| Indicator 16 - Percentage of new tenancies to existing tenants sustained for more than a year | 96.15% |
| Indicator 16 - Percentage of new tenancies to applicants who were assessed as statutory homeless by the local authority sustained for more than a year | 89.23% |
| Indicator 16 - Percentage of new tenancies to applicants from the landlord's housing list sustained for more than a year | 95.18% |
| Indicator 16 - Percentage of new tenancies through nominations from local authority sustained for more than a year | N/A |
| Indicator 16 - Percentage of new tenancies to others sustained for more than a year | N/A |

Comments (Access to housing and support)

## Getting good value from rents and service charges

### Rents and service charges

| |
|---|
| Rent collected as percentage of total rent due in the reporting year (Indicator 26) |

| | | |
|---|---|---|
| 26.1 | The total amount of rent collected in the reporting year | £9,586,868 |
| 26.2 | The total amount of rent due to be collected in the reporting year (annual rent debit) | £9,657,587 |

| | |
|---|---|
| Indicator 26 | 99.27% |

| |
|---|
| Gross rent arrears (all tenants) as at 31 March each year as a percentage of rent due for the reporting year (Indicator 27) |

| | | |
|---|---|---|
| 27.1 | The total value (£) of gross rent arrears as at the end of the reporting year | £340,748 |
| 27.2 | The total rent due for the reporting year | £9,746,395 |

| | |
|---|---|
| Indicator 27 | 3.50% |

| Average annual management fee per factored property (Indicator 28) |
|---|

| | | |
|---|---|---|
| 28.1 | The number of residential properties factored | 133 |
| 28.2 | The total value of management fees invoiced to factored owners in the reporting year | £1,107 |

| | |
|---|---|
| Indicator 28 | £8.32 |

| |
|---|
| Percentage of rent due lost through properties being empty during the last year (Indicator 18) |

| | | |
|---|---|---|
| 18.1 | The total amount of rent due for the reporting year | |
| 18.2 | The total amount of rent lost through properties being empty during the reporting year | £88,808 |

| | |
|---|---|
| Indicator 18 | 0.91% |

| Rent increase (Indicator C5) |
|---|

| | | |
|---|---|---|
| C5.1 | The percentage average weekly rent increase to be applied in the next reporting year | 3.50% |

| |
|---|
| The number of households for which landlords are paid housing costs directly and the total value of payments received in the reporting year (Indicator C6) |

| | | |
|---|---|---|
| C6.1 | The number of households the landlord received housing costs directly for during the reporting year | 1,148 |
| C6.2 | The value of direct housing cost payments received during the reporting year | £3,987,770 |

Amount and percentage of former tenant rent arrears written off at the year end (Indicator C7)

| | | |
|---|---|---|
| C7.1 | The total value of former tenant arrears at year end | £110,365 |
| C7.2 | The total value of former tenant arrears written off at year end | £26,245 |

| | |
|---|---|
| Indicator C7 | 23.78% |

**Value for money**

| |
|---|
| Percentage of tenants who feel that the rent for their property represents good value for money (Indicator 25) |

| | | |
|---|---|---|
| 25.1 | How many tenants answered the question "Taking into account the accommodation and the services your landlord provides, do you think the rent for your property represents good or poor value for money?" | 584 |
| 25.2.1 | 25.2 Of the tenants who answered, how many said that their rent represented:<br><br>very good value for money | 285 |
| 25.2.2 | fairly good value for money | 176 |
| 25.2.3 | neither good nor poor value for money | 41 |
| 25.2.4 | fairly poor value for money | 51 |
| 25.2.5 | very poor value for money | 31 |
| 25.3 | Total | 584 |

| | |
|---|---|
| Indicator 25 | 78.94% |

| Percentage of factored owners satisfied with the factoring service they receive (Indicator 29) |
|---|

| | | |
|---|---|---|
| 29.1 | How many factored owners answered the question "Taking everything into account, how satisfied or dissatisfied are you with the factoring services provided by your landlord?" | 19 |
| 29.2.1 | 29.2 Of the factored owners who answered, how many said that they were:<br><br>very satisfied | 3 |
| 29.2.2 | fairly satisfied | 5 |
| 29.2.3 | neither satisfied nor dissatisfied | 3 |
| 29.2.4 | fairly dissatisfied | 4 |
| 29.2.5 | very dissatisfied | 4 |
| 29.3 | Total | 19 |

| | |
|---|---|
| Indicator 29 | 42.11% |

Comments (Getting good value from rents and service charges)

## Other customers

### Gypsies / Travellers

| |
|---|
| For those who provide Gypsies/Travellers sites - Average weekly rent per pitch (Indicator 31) |

| | | |
|---|---|---|
| 31.1 | The total number of pitches | |
| 31.2 | The total amount of rent set for all pitches during the reporting year | |

| | |
|---|---|
| Indicator 31 | |

| |
|---|
| For those who provide sites – percentage of Gypsy/Travellers satisfied with the landlord's management of the site (Indicator 32) |

| | | |
|---|---|---|
| 32.1 | How many Gypsies/Travellers answered the question "How satisfied or dissatisfied are you with your landlord's management of your site?" | |
| 32.2.1 | 32.2 Of the Gypsies/Travellers who answered, how many said that they were:<br><br>very satisfied | |
| 32.2.2 | fairly satisfied | |
| 32.2.3 | neither satisfied nor dissatisfied | |
| 32.2.4 | fairly dissatisfied | |
| 32.2.5 | very dissatisfied | |
| 32.2.6 | Total | |

| | |
|---|---|
| Indicator 32 | |

Comments (Other customers)

hebridean housing partnership

Making our house your home

ITEM NO 6.2

# DEVELOPMENT MONITORING REPORT

## Board 23 May 2022

Report by Chief Executive

## Purpose of Report

1.1 To provide an update to the Board on our 5 Year Development Programme (2021-26).

## Summary

2.1 The summary of completions this financial year can be found at Appendix 1 along with photographs from recent official openings.

2.2 In 2022/23 we have completed 14 homes and have a further 84 under construction, which is 27% of our 5 Year Development Plan. Appendix 2 provides details of progress on our Development Plan.

2.3 The land transaction at Blackwater has concluded with the contractor looking for a phased building warrant to allow an early start on site. Consultation has been carried out regarding the name and a decision is sought to allow the address to be registered and services to be applied for.

2.4 Both land transactions at Crowlista and Lochmaddy are reaching their final stages.

2.5 Identifying suitable land is continuing to be a barrier to development. There is currently no identified site in South Uist to enable delivery of the project in the SHIP for 2022/23. It is proposed to engage with the Comhairle to ascertain if they wish to pursue alternative options. This could include an additional 4 units at the site at Johnstone Court, Balivanich where land is already within our ownership.

## Competence

3.1 The financial, legal and other constraints arising from the recommendations in this report are detailed at paragraph 5.1 - 8.3.

## Recommendations

4.1 **It is recommended that Board:**

**a) agree the name of the site at Blackwater from the options detailed at paragraph 13.2;**

**b) agree to engage with CNES to ascertain if they wish to pursue alternative projects to replace the South Uist site in the SHIP; and**

**c) note the update on the Development Programme.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Completions 2022/23 | |
| **APPENDIX 2:** | New Build Updates | |
| **APPENDIX 3:** | Future Plans | |
| **Background Papers**: | None | |
| **Writer of Report:** | Sawan Morrison | Tel: 0300 123 0773 |

## Competence

*Financial*

5.1 The budget for development in 2022/23 is £13M expenditure, £8.1M Scottish Government (SG) Grant and £0.346M of shared equity sales resulting in a private finance requirement of £4.6M.

*Legal*

6.1 The Asset Management Working Group had delegated authority to 31 March 2022, to approve private finance up to 40% of the cost of a project, subject to approval from the Director of Finance & Corporate Services and funding being available through savings. This delegated authority is no longer required as the new build programme decreases.

*Regulatory Guidance*

7.1 The Regulatory Standards checklist has been completed and there is nothing in the report which would result in a breach of the standards.

7.2 This report provides ongoing assurance of evidence RS2.2, RS4.3 and RS7.7 in relation to our Annual Assurance Statement.

*Risk*

8.1 Development is inherently risky. Feasibility work to ascertain the suitability and capacity of potential sites for development helps to reduce risk.

8.2 Risk related to particular developments is assessed as part of the feasibility study, including the demand within the area. The Housing Needs and Demands Analysis (HNDA) and our Housing Waiting List indicates weak demand in all areas and particularly in the most rural locations. The HNDA report suggests that our current programme will in broad terms meet the current identified need for social rented housing.

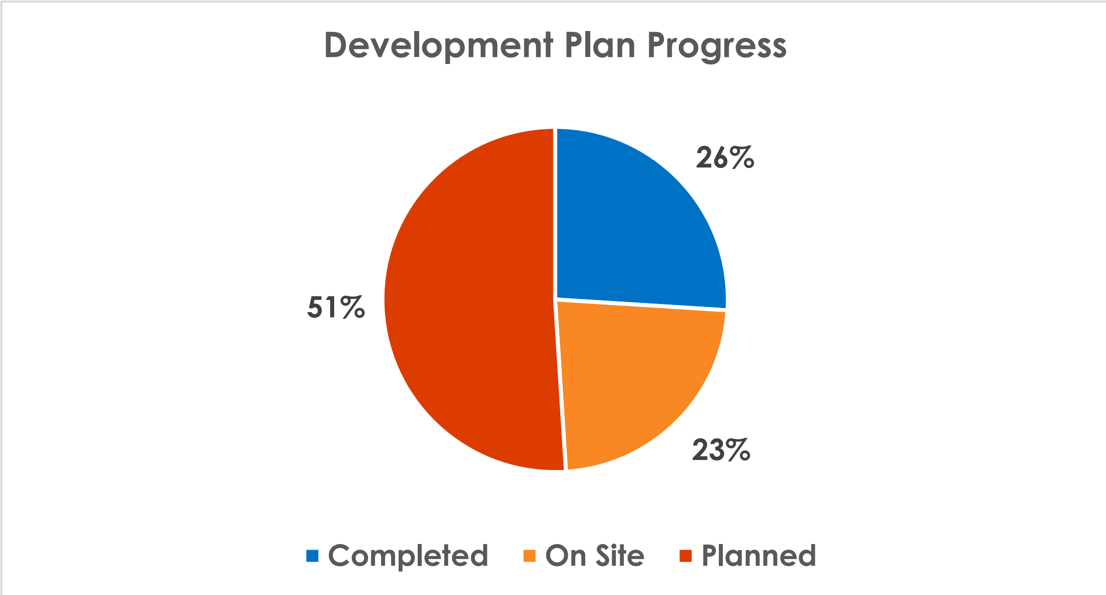
8.3 There is a risk of houses not being sold through the New Supply Shared Equity scheme as demand can be inconsistent.

8.4 The Risk Register details relevant risks including risk of contractor failure, BREXIT, labour and material shortages, all of which can impact on delivery of the Development Programme.

# Report Details

*Development Plan 2021-2026*

9.1 Good progress is being made on the delivery of the Development Plan with 26 % of the planned homes completed and a further 23% currently on site. Full details of each of the developments can be found in Appendix 2.




*Development 2021/22*

9.1 In 2021/22 we completed 78 new homes. Considering the challenges caused by COVID-19 restrictions and the availability and delivery of materials amongst other issues this was a commendable effort from staff and contractors.

*Development 2022/23*

10.1 The main issues to note for developments on site or identified for 2022/23 are:

- Johnstone Court, Balivanich - 6 of the 10 homes completed on 25 April 2022 with the remaining 4 due back mid May 2022.
- Blackwater site which is 40% of the remaining programme has now had resumption and the land transaction concluded on 31 March 2022. The Contractor is pursuing building warrant in phases to allow start of construction. The Planning Service advise that a new application is needed for the peat restoration area which they had failed to notify when consenting the development. The implications of this are being investigated as a matter of urgency.
- Lochmaddy land transaction is due to conclude once the Deed of Conditions have been agreed. Due to the complexity of the site and 3 partners being involved (HHP, Tighean Innse Gall and contractor), the legals have taken a longer period than expected.
- The Crowlista resumption order is still awaited to enable this contract to progress. The contractor is looking at a potential agreement with the landowner for getting on site at risk.

10.2 Due to the difficulty in identifying suitable land in South Uist it is intended to engage with the Comhairle to ascertain if they wish to progress an alternative option. There is current provision in the development plan for a 6 unit development in South Uist but a suitable site has not been identified to date. In view of the relatively healthy demand levels in Balivanich one option could be to progress with the extension of the site at Johnstone Court with a further 4 units. The land is in our ownership.

### *Future Plans*

11.1 Appendix 3 summarises work being done on projects for future years and includes the current levels of demand in the area. The following updates to be noted:

- Site acquisition at Leverburgh has been complicated by potential constraints due to planning requirements and SEPA concerns. The offer to purchase has been conditioned by us achieving planning permission but this has yet to be accepted by the seller, negotiations are continuing.
- The site at Scott Road is in crofting tenure but access is required across 3rd party land which is in private ownership. Negotiation is underway with the landowner on their position with regards to access arrangements.
- Two sites in North Uist have had a positive initial desktop feasibility study and planning feedback is awaited.

### *New Supply Shared Equity (NSSE)*

12.1 Three properties have settled at Sgeir Ghlais, Breasclete. The final property has had a new applicant which appears positive. However, if this application does not progress, we will seek to convert the property to rent or mid-market rent.

12.2 All 2 bed homes available for sale at Sinclair Avenue have now been sold.

12.3 There were 6 x 3 bed homes available for sale in the second phase at Sinclair Avenue of which 3 have sold. There is currently 1 with a buyer identified and 2 applications under review.

*Blackwater Name Consultation*

13.1 The Development Policy states that names will normally be in English in Stornoway Town and should reflect the history or landscape of the area being developed. Generally, a development will not be named after an individual unless there is a compelling historical connection with the development site or strong community support. Developments will not be named after living individuals.

13.2 The main suggestions received following consultation are set out in the table below.

| Name Suggestion | Gaelic Suggestion | Reasons for Suggestions | Source |
|---|---|---|---|
| Stag View | Sealladh Daimh | There are often stags about the hills and they get to share their lovely view. | Public recommendation |
| Milleho Avenue/ View | Craobhaid Milleho | Cnoc Beag Milleho is a small loch to the north of the site | HHP employee |
| Torravig Place/Ave | Gleann Torravig | Cnoc Torravig is a small hill to the left of the site | HHP employee |
| Hill View or Hill Crescent | Slighe a' Chnuic | It is a view from the hill | Public recommendation |
| Blackwater | Abhainn Dubh | Translation of Blackwater | Public and internal recommendation |
| Moorview | Slighe a' Mhonaidh | View of the Moor | HHP employee |
| Heather Place | Gleann Fhraoich | Beautiful heather around the area | HHP employee |
| Steallag Drive | Ionad Steallag | Calum "Steallag" MacLeod was a famous blacksmith who lived close by and was one of the last remaining traditional blacksmiths before his passing. Although Historical society would not support use of persons nickname to name a site. | Local councillor |

# Completions in April 2022

| Scheme | Area | Type | Units |
|---|---|---|---|
| Gleann Mor, Barvas | Rural Lewis | Rent | 8 |
| Johnstone Court, Balivanich | South Uist | Rent | 6 |
| **Total Handover to January 2022** | | | **14** |

Gleann Mor, Barvas – Calmax

Johnstone Court, Balivanich – Calmax

Ionad Mairi Bremner, Isle of South Uist –
Macinnes Bros

Trosaraidh, Isle of South Uist Official Opening - Calmax

# Sgeir Ghlais Official Opening - Calmax

## New Build Updates

**APPENDIX 2**

## Table 1.1 New Build Units Completed in 21/22

| Development | Area | Type | Units |
|---|---|---|---|
| Cnoc A Charnain, Shawbost | Rural Lewis | Rent | 4 |
| Sinclair Avenue, Goathill | Stornoway | Rent | 36 |
| Sinclair Avenue, Goathill | Stornoway | NSSE | 14 |
| Lady Matheson Court | Stornoway | Rent | 6 |
| South Dell | Rural Lewis | Rent | 6 |
| Ionad Mairi Bremner, Howmore | South Uist | Rent | 4 |
| James Place, Tarbert | Harris | Rent | 8 |
| **Total Handovers in 21/22 Financial Year** | | | **78** |

## Table 1.2 Development Performance – 5 Year Development Plan 2021-2026 (Approved March 2022)

| | RENT | NSSE | HWEC | TOTAL | % of Plan | Comments |
|---|---|---|---|---|---|---|
| **Completed 21/22** | 64 | 14 | 0 | **78** | 22% | - |
| **Completed 22/23** | 14 | 0 | 0 | **14** | 4% | - |
| **On Site** | 32 | 2 | 50 | **84** | 23% | - |
| **Planned for 2022-26** | 183 | 0 | 0 | **183** | 51% | - |
| | **293** | **16** | **50** | **359** | | |

## New Build Updates

APPENDIX 2

### Table 2.1 Current Development Projects 2022/23

| Scheme | Area | Units | Stage | Expected Handover | Comments by exception |
|---|---|---|---|---|---|
| Barvas | Rural Lewis | 8 | Completed | Apr-22 | - |
| Low Flyer, Balivanich | Uist | 10 | On Site | Apr-22 | 6 units handed over with 4 to be handed over in May. |
| Goathill HWEC | Stornoway | 50 | On Site | Sep-22 | Handover delayed. |
| Goathill | Stornoway | 58 | On Site | Sep-22 | 36 Units completed to date. |
| Goathill NSSE | Stornoway | 16 | On Site | Sep-22 | 14 units completed to date, 2 houses remaining, and prospective buyers identified. |
| Barra – Cleit Road | Barra | 6 | On Site | Jan-23 | On site February 2022. |
| Crowlista, Uig | Rural Lewis | 5 | Land Transaction | TBC | Awaiting resumption – contractor considering starting on site at risk |
| Blackwater | Stornoway | 72 | Building Warrant | TBC | Land transaction concluded. Waiting for building warrant prior to commencement on site. |
| Lochmaddy | Uist | 8 | Planning/Land Transaction | May-22 | Awaiting land transaction. Contractor completing preparatory work at risk. |
| South Harris - Leverburgh | Harris | 6 | Land Negotiation | TBC | Site has met with issues regarding the suitability of the site for development and planning concerns. |
| South Uist | Uist | 6 | Land Identification | TBC | Initial desktop feasibilities have been carried out for 2 sites in North Uist. In a change to process the Comhairle's Housing Team will get the views of their planning colleagues before instructing full feasibility. The change has been made to avoid unnecessary costs and save time. |

## Future Plans

APPENDIX 3

| YEAR | Scheme | Area | Units | Demand (Transfer/Waiting) | Comments by exception |
|---|---|---|---|---|---|
| 2023/24 | Scott Rd/Coastguard | Harris | 12 | 8/20 | Land transaction negotiation ongoing. |
| | Rural Lewis- South Lochs | Rural Lewis | 4 | 2/7 | Site to be identified. Demand figures represent South Lochs area |
| | | | | | |
| 2024/25 | Scott Rd/Coastguard (Ph 2) | Harris | 12 | 8/20 | Land transaction negotiations. |
| | Benbecula - Dunganichy | Uist | 4 | 13/28 | Feasibility advised against development due to site constraints to not proceed. |
| | South Uist | Uist | 6 | 5/17 | Site to be identified. |
| | Stornoway Regeneration | Stornoway | 14 | 92/215 | Site to be identified. |
| | North Uist | Uist | 4 | 3/18 | 2 potential sites awaiting planning feedback. |
| | Point | Stornoway Market Area | 4 | 3/13 | Site to be identified |
| | Rural Lewis- Bernera | Rural Lewis | 4 | 0/3 | A site at Bernera is at the initial stages of investigation. Community trust looking at demand. |
| | Cleat Road- Phase 2 | Barra | 6 | 3/25 | Existing land available for second stage of the current development. |
| | | | | | |
| 2025/26 | North Uist | Uist | 6 | 3/18 | Site to be identified. |
| | Barra HWEC | Barra HWEC | 10 | TBC | Board decision taken to support, and discussions are ongoing with various departments of Scottish Government. |

hebridean housing partnership

Making our house your home

ITEM NO 6.4

# COMMUNITY GRANTS REQUEST

## Board 25 May 2022

Report by Director of Operations

## Purpose of Report

1.1 To consider an application to the Community Grant Fund received from Newmarket Gateway Trust.

## Summary

2.1 Our Community Grant Fund was approved by the Board in June 2017 under our Community Grant Policy.

2.2 Funding is available to support small scale community projects that will improve the quality of life for residents and make a difference to the neighbourhoods which we serve.

2.3 The Fund is open to charities, tenants and residents' groups and voluntary organisations.

2.4 There must be a benefit to our tenants residing within the area for the project being proposed.

2.5 The Newmarket Gateway Trust, which is a community group, have requested £3,417.90 to install Playspec hydraulic gates with posts, galvanized and powder coated in orange to improve the Newmarket Play Park. This has direct benefit to our tenants within the Newmarket area. We have a significant number of properties in the surrounding area at Gleann Dubh and Bridge Cottages.

## Competence

3.1 The financial, legal and other constraints to the recommendation in this report being implemented are contained in paragraph 5.1 – 8.1.

## Recommendations

4.1 **It is recommended that the Board approve 50% of the funding application from Newmarket Gateway Trust at Appendix 1 from the Community Grant Fund and to seek to assist with the remainder through the Blackwater project Community Benefit requirements.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Application – Newmarket Gateway Trust | |
| **Background Papers**: | None | |
| **Writer of Report:** | Jonathan Fairgrieve | Tel: 0300 123 0773 |

## Competence

*Financial*

5.1 Funding 50% of the proposed works which are costed at £3,417.90 can be met from existing budgets. The budget for 2022/23 is £10K.

5.2 The Association have obtained funding from the Crown Estate funds and other funds to carry out fencing works to the playpark. However, they did not budget for funding for gates to the playpark and are seeking assistance from our community fund to allow suitable gates to be provided.

*Legal*

6.1 There are no specific legal implications to this report.

*Regulatory Guidance*

7.1 The Regulatory Standards checklist has been completed and there is nothing in the report which would result in a breach of the standards.

*Risk*

8.1 There are no specific risks associated with this report.

APPENDIX 1

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INTERNAL REF

# Community Grant Application Form

| | |
|---|---|
| Name of Project | Park Upgrade |
| Name of Group/Charity (if you are a charity please provide charity number) | Newmarket Gateway Trust |
| Do you have public liability insurance? | Yes |

## Contact Details

| | |
|---|---|
| Name | Murray Macleod |
| Address | Newmarket Gateway Trust<br>Riverside Gardens<br>Newmarket<br>HS2 0EN |
| Telephone Number | 01851 701766<br>07799606092 |
| Email | newmarketplaypark@hotmail.com |
| C/o | Murray Macleod |

## About Your Project (continue overleaf if required)

Between 2019 and 2020 the Newmarket gateway secured funding through the Community Landfill Trust, the Comhairle and the Crown Estate fund. The Gateway used the funds to enhance the existing community recreational area with the addition of new play equipment, shelters and up grading of existing equipment to maintain a high standard of safety. Currently the committee are in the process of completing the Newmarket to Tong moorland walk and the installation of toilet facilities at the park. The aim of the gateway trust is to provide a safe recreational area for families and community groups to use, promoting health and well-being and bringing the community closer together. The park is open to all in the community all year round. As part of the works carried out we managed to secure funds to build a fence around the zip line. However we are still needing to install 2 self-closing gates to complete the works. Unfortunately this was not factored into the funding applications that were subsequently approved and funds granted. The park is a huge asset to our community and since lockdown last year we have managed to purchase a number of bikes to help improve the physical fitness of children and families. Funding to purchase the gates would offer the added protection that is needed to properly secure the area.

Project Costs

| |
|---|
| The gates are playspec hydraulic gates with posts, galvanised and powder coated in orange. Total cost in cluding deliver and vat is £3417.90 |

Conflict of Interest Declaration

| | |
|---|---|
| Are you or is anyone involved in this application, or in your group, a member of HHP or have close relative who are members of HHP? | No |

Signatures

(Two persons to sign, one should be the named contact in this form, the other should be someone with direct involvement with the project)

_Murray Macleod_____________________________________________

__David Mackay__________________________________________

About your Project cont.

# AGREEMENT TO UTILISE LAND - MANOR AND CASTLE COMMUNITY ASSOCIATION

## Board 25 May 2022

Report by Director of Operations

## Purpose of Report

1.1 To consider a request from the Manor and Castle Community Association to utilise an area of ground to construct Polycrubs and to provide planters, pathways and landscaping for community use.

## Summary

2.1 The Manor and Castle Community Association have obtained funding from the Crown Estate Fund and wish to construct Polycrubs and provide planting, pathways and seating in the area of ground owned by us and bounded by Maclennan Place and Westview Terrace. A copy of their application is at Appendix 1 and a plan of the area indicating their intentions is at Appendix 2

2.2 This area of ground is currently grassed and is not considered to have any development value as access is constrained. It is currently maintained through the Grounds Maintenance contract.

2.3 The Community Association will require planning permission for the proposed development of this area and the erection of the Polycrubs. They are seeking our consent for the use of the site prior to pursuing planning permission.

2.4 We have a significant number of properties in the area and this development will benefit our tenants as well as the wider community.

2.5 It is proposed that this proposal be agreed subject to appropriate conditions being put in place including the need for appropriate insurance and responsibilities for the maintenance of the area and for reinstatement of the area to its current condition should the project come to an end.

## Competence

3.1 The financial, legal and other constraints to the recommendation in this report being implemented are contained in paragraph 5.1 – 8.1.

## Recommendations

4.1 **It is recommended that the Board approve the use of the land, as at Appendix 2, by the Manor and Castle Community Association, for the erection of a Polycrub and other planting.**

## Competence

*Financial*

5.1 A small saving to the Grounds Maintenance contract is anticipated if this application is approved.

5.2 There are no direct financial implications to us.

*Legal*

6.1 There are no specific legal implications to this report. An agreement would require to be put in place governing the use of the land, ensuring appropriate insurances are in place and requiring reinstatement at the end of the project.

*Regulatory Guidance*

7.1 The Regulatory Standards checklist has been completed and there is nothing in the report which would result in a breach of the standards.

*Risk*

8.1 There are no specific risks associated with this report.

| | | |
|---|---|---|
| **APPENDIX 1:** | Application to Crown Estate Fund from Manor & Castle Community Association | |
| **APPENDIX 2:** | Site plan showing planned improvements | |
| **Background Papers:** | None | |
| **Writer of Report:** | John Maciver | Tel: 0300 123 0773 |

# COMHAIRLE NAN EILEAN SIAR

## CROWN ESTATE REVENUES FUND: (CERF) YEAR 3

## FUNDING APPLICATION

# COMHAIRLE NAN EILEAN SIAR

## CROWN ESTATE REVENUES FUND: YEAR 3
## AREA FORUM PROJECTS AND FUNDING APPLICATION

➢ **Please complete all the sections below:**

| **1. Community or Ward Area** |
|---|
| Stornoway North |
| **1.1 Name and address of Group, Legal Status and Contact Details of the Person dealing with your application (Please include an email address)** |
| Manor and Castle Community Association<br>Constituted Group<br><br>Eric Anderson<br><br>Address:<br><br>ericanderson37@hotmail.co.uk<br><br>07809536957 |

| **2. Project Title** | **Grow Your Own Health and Welling being initiative** |
|---|---|

**2.1 Brief Description of Project**

Purchase and Install 1 x Polycrubs for the purpose of growing your own initiative on the old loom sheds land, just off Westview Terrace. The Manor and Castle Community association have sought permission and as such have an agreement in principle and in writing from HHP who own the land. HHP upon clarification of successful funding from Crown Estate for the Polycrubs will allow the Manor and Castle Community Association to erect 1 Polycrub structure on the proposed land following approval from planning at CNES. Given the challenging weather we face on the Western Isles we have opted for the Polycrub as the structure is more robust than the conventional polytunnel. Planning Permission and associated costs are also included in the final amount request.

The Manor and Castle Community Association are working with partner Association Cearns Community Association to try and improve outcomes for those living in the area. As such the Manor and Castle residents' association have worked with those in the group to discuss creating new projects aimed at benefiting the health and wellbeing of those in the area as well as looking at tackling some of the existing inequalities and looking at ways in which this can be addressed. The current pandemic in which we are living through highlighted the importance of growing your own produce. Growing your own produce is a simple solution to numerous health, environmental, and economic problems. Growing your own produce apart from saving money and being a social event, especially when you are sharing the space with other like-minded individuals, and families, the produce is more nutritious and great way to stay active. The physical activity required in gardening has proven to promote physical health. Growing your own is also better for the environment as you are cutting down on food miles. Growing your own food reduces the reliance on transportation which is harmful to the environment.

The Manor and Castle residents' association acknowledges that the way people currently live their lives has been impacted by the current global pandemic. Where people are forced to work from and study from home, limit our social interactions, cook more than we were used to and significantly reduce our visits to stores and supermarkets. Reducing the frequency of the visits to the supermarkets has made it more difficult to enjoy fresh goods like veggies and fruit.

For a large number of people in our communities, children and adults, who live with challenging physical or mental health problems, gardening and community food growing can be especially Beneficial. Such activities can relieve the symptoms of serious illnesses, prevent the development of some conditions, and introduce people to a way of life that can help them to Improve their well-being in the longer term.

In addition to accessing funds to purchase and build a Polycrub the association are also looking to re-lay an existing path. The path will need to be scrapped back and made ready for a new surface. Currently the path is treacherous on foot and not suitable to be walked on. Having the path made good would mean that folk in the community could readily access the Polycrub and the surrounding green space readily and easily.

| **3 Social and Economic Regeneration: Which sector(s) does the project deliver outputs in (yes/no)?** | | | |
|---|---|---|---|
| Creative Industries | | Tourism | |
| Energy | | Communities | Yes |
| Food and Drink | Yes | | |

| **4 Outer Hebrides Economic Recovery Strategy: Does the project meet the following criteria (yes/no)?** | | | |
|---|---|---|---|
| Community Recovery | Yes | Improve Community resilience | Yes |
| Digital recovery | | Deliver positive climate and net zero impacts | |
| Green Recovery | Yes | Contribute to population retention | |

| | |
|---|---|
| **4.1 How does the Project fit with local plans and priorities?** | The Manor and Castle residents Association recognises that as a direct result of lockdown and the pandemic there are many in the community who are suffering the after-effects of loneliness and isolation.<br><br>This project will look at bringing the community together to participate in gardening activities coupled with grow your own workshops. The Grow your own workshops will be directedly linked to growing your own foods and making this a sustainable way of having access to nutritious low cost no cost produce.<br><br>This project will also be bringing a disused green space back to life. Over lockdown it became even more apparent how essential properly maintained green spaces are to communities. By utilising a disused green space in our community by building Polycrubs for community use, will help to bring the community together in a social setting, helping to reduce the adverse impacts of social isolation and loneliness.<br><br>With the significant impacts the pandemic has had on our community it has become even more apparent that greater community cohesion is needed and highlighted that community relationships are a bedrock. This project would bring the community together in a shared green space where apart from gardening and working their plots, they could access the green space to host community events and social gatherings<br><br>Furthermore, grow your own initiatives are a great way of bringing |

| | |
|---|---|
| | the communities in which we live together. It is hoped that this Grown your own initiative will encourage more intergenerational work within our communities once we are permitted. In addition, it is hoped that the local care home, school and youth associations in the community have access to an area within the Polycrub in which they can experience outdoor learning and learning together. |

| | |
|---|---|
| **4.2a How does the project fit with Comhairle priorities/Corporate Strategy, OH Economic Recovery Strategy, Community Wealth Building pillars** | This project will look at addressing the following strategic priorities:<br><br>* Support children, families and young people<br>* Support resilient communities and quality of life |

| | |
|---|---|
| **5 Funding** | |
| 5.1 Total Cost of Project | £28,000 |
| 5.2 Funding Already Secured | £0 |
| 5.3 Funding Applied for from: | |
| a) ………… | £ |
| b) …….…… | £ |
| c) …………. | £ |
| 5.4 Request for CERF funding | £28,000 |
| **TOTAL** | £ |
| 5.5 When is it anticipated the Project will be completed and money spent? | March 2023 |

| | |
|---|---|
| **6. Area Forum or Group to which funding should be paid** | |
| Manor and Castle Community Association | |
| 6.1 Is the Group formally constituted? | Yes |
| 6.2 Does the Group have their accounts audited annually? | Yes |
| 6.3 Does the Group have capacity to undertake the work? | Yes |

**7. Project Impact:**
**How will the project be evaluated and what measures will be used to indicate impact?**

Survey: Online
Face to face
Focus groups

A new community asset will be viable and available in the community for the community to utilise.

Individuals and families report feeling more active and healthier as a direct result of participating in activities facilitated or organised on the communities behalf.

More intergenerational work is being carried out

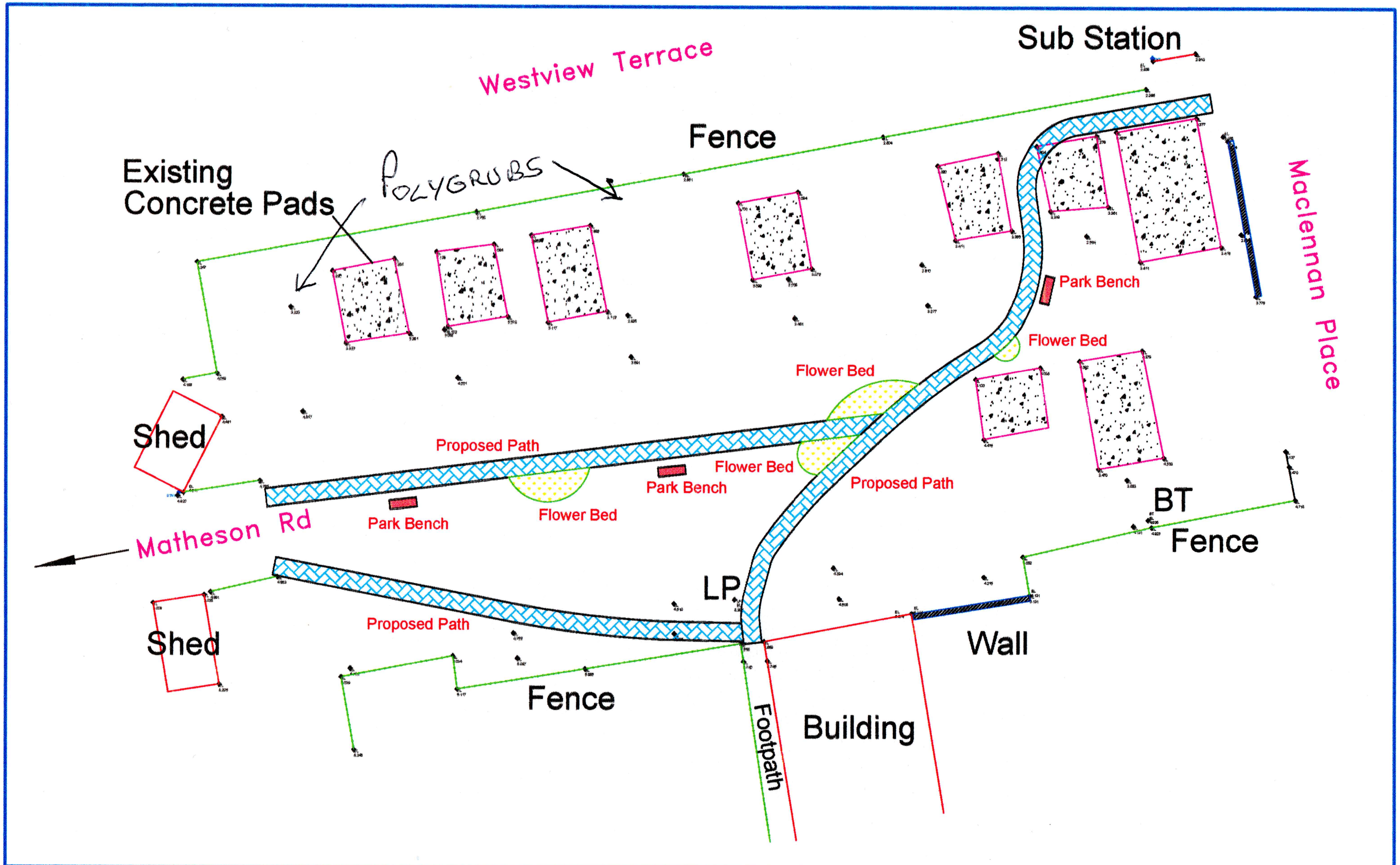
The community have access to affordable fresh produce

The project is sustainable over time

**8. Local Member(s) Support:**
***Please confirm the support of the Local Member(s) by completing this section***

| | |
|---|---|
| Cllr Name | Gordon Murray |
| Signature | |
| Date | |

Completed forms to be returned to your local Community Learning and Development officer or to crown.estate@cne-siar.gov.uk




DESCRIPTION

PROPOSED PARK FOR MANOR AND CASTLE COMMUNITY ASSOCIATION
KENNEDY TERRACE, STORNOWAY
ISLE OF LEWIS

| | |
|---|---|
| Date: | 06/09/21 |
| Drawn: | J N Macleod |
| Scale: | 1/200 |
| DRAWING No. | Site Plan 2 |

# BOARD MEMBER APPOINTMENT

## Board 25 May 2022

Report by Company Secretary

## Purpose of Report

1.1 The purpose of this report is to recommend an appointment to the Board.

## Summary

2.1 In accordance with Rules 37.2.4 and 40.8 the Board will be entitled at any time to appoint up to two Appointed Board Members to the Board.

2.2 Following the resignation of Mrs Fiona Macleod on 14 April 2022, we have 8 vacancies on the Board. It is expected that 3 of these vacancies will be filled following the local government elections on 5 May 2022.

2.3 Ms Alison McCorquodale has submitted a Membership Application which has been approved by the Company Secretary under the delegation of Standing Order 9.5.

2.4 Ms McCorquodale has indicated her interest in joining our Board. Ms McCorquodale's appointment would be in accordance with HHP Rules 37.2.4 and 40.8.

2.5 Ms McCorquodale has worked in both public and private sectors for a number of years and has considerable knowledge to draw upon in the fields of finance and revenue. She has experience in working with a range of stakeholders and public and a strong awareness of issues facing the local communities.

2.6 On 30 January 2018, MSPs passed The Gender Representation on Public Boards (Scotland) Bill, meaning that all public body boards must work towards having women make up 50% of non-executive members by 2022.

## Competence

3.1 Financial and legal constraints arising from the recommendation to this report being implemented are detailed at 5.1 – 8.2.

## Recommendations

4.1 **It is recommended that the Board approve Ms Alison McCorquodale's appointment to the Board for a period of two years as a Board Appointed Member with effect from 26 May 2022 subject to satisfactory completion of the Code of Governance requirements.**

| | | |
|---|---|---|
| **Background Papers**: | Regulatory Standards of Governance and Financial Management<br>HHP Rules | |
| **Writer of Report:** | Iona France | 0300 123 0773 |

# Competence

### *Financial*

5.1 There are no financial implications arising from the implementation of the recommendations.

### *Legal*

6.1 In respect of appointing Board Members, Rules Rule 37.2.4 states that we may have two Appointed Board Member, and Rule 40.8 goes on to state that:

> *The Board will be entitled at any time to appoint up to two Appointed Board Members to the Board. A person so appointed by the Board must be a Member who the Board considers will enhance the skills, knowledge, diversity and/or objectivity of the Board and its decision-making. The manner of identifying, selecting and appointing an Appointed Board Member shall be determined by the Board from time to time. When appointing an Appointed Board Member the Board must determine the proposed duration of the appointment, which must be no longer than three years (but without prejudice to a retiring Appointed Board Member being eligible to be re-appointed by the Board)."*

### *Regulatory Guidance*

7.1 The Regulatory Standards checklist has been completed and there is nothing in the report which would result in a breach of the standards.

7.2 This report provides ongoing evidence/assurance of evidence EH1 and RS6 in relation to our Annual Assurance Statement.

### *Risk*

8.1 Governance of the Partnership is critical to its long-term viability. Carrying out skills assessments helps to ensure that the Board has the skills, knowledge and diversity it needs to provide capable leadership, control and constructive challenge to achieve the RSL's purpose, and helps to mitigate the risk of not delivering good tenant outcomes or manage the Partnership's affairs.

8.2 Recruitment of Governing Body Members is detailed at number 7 on the Risk Register.

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ITEM NO 7.2

# FLEXIBLE WORKING POLICY

## Board 25 May 2022

Report by Chief Executive

## Purpose of Report

1.1 The purpose of this report is to present the revised Flexible Working Policy for approval for consultation with staff and the Union.

## Summary

2.1 Our current Flexible Working Policy which was approved in 2020 has now been updated to separate out Policy and Procedure and take account of the latest good practice outlined in EVH's Model Policy for Flexible Working.

2.2 A new section has been included at Paragraphs 9.1 and 9.2 for monitoring of performance.

2.3 On the advice of EVH the approval route for requests has reverted from Managers to Directors.

2.4 A recent survey of staff showed that 9% would like to work at home and 41% would like a hybrid working arrangement.

## Competence

3.1 The financial, legal and other constraints to the recommendations of this report are detailed at 5.1 - 8.1.

## Recommendations

4.1 **It is recommended that:**

**a) the revised Flexible Working Policy at Appendix 1 and Procedures at Appendix 2 be approved for consultation with staff and the Union; and**

**b) if there are no material changes to the Policy arising from the consultation, that the Policy is approved, otherwise a revised Policy be presented to the next meeting of the Board.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Flexible Working Policy | |
| **APPENDIX 2:** | Flexible Working Procedures | |
| **Background Papers**: | None | |
| **Writer of Report:** | Dena Macleod | Tel: 0300 123 0773 |

## Competence

*Financial*

5.1 There may be financial implications arising from a flexible working request, which will be funded from within our currently approved budgets.

*Legal*

6.1 The approval of personnel policies is a matter reserved for the Board.

6.2 The revised Policy ensures compliance with the current legislative requirements under the Employment Rights Act 1996, the Employment At 20022, the Work and Families Act 2006, and the Flexible Working Regulations 2014.

*Regulatory Guidance*

7.1 The Regulatory Standards checklist has been completed and there is nothing in the report, which would result in a breach of the standards.

*Risk*

8.1 An up to date Flexible Working Policy will safeguard our employee's wellbeing and should reduce the risk of not complying with current employment legislation and losing key skills.


# Flexible Working Policy

**Effective Date:**
**Review Date:** March 2022
**Approved by HHP Board:**

## TABLE OF CONTENTS

# FLEXIBLE WORKING POLICY

## INTRODUCTION & LEGAL FRAMEWORK

1.1 We recognise the contribution of all our employees and understand that at some stage during your working lives you may find it difficult to fulfil domestic, family and working commitments due to your responsibilities. We aim to help you through our Flexible Working Policy and our Special Leave Policy.

1.2 There is a duty on employers to give serious consideration to requests from employees to work flexibly.

1.3 You can request changes to your contract on a permanent basis in relation to hours, location and pattern of work. Whilst there is a right of request, there is no automatic right to these changes

1.4 The legal framework for our duties can be found within the Employment Rights Act 1996, the Employment Act 2002, Work and Families Act 2006 and Flexible Working Regulations 2014.

1.5 The Policy is applicable to all employees of Hebridean Housing Partnership.

## AIMS

2.1 The Policy aims to:

- provide you with the opportunity to request to change to your standard working arrangements to strike a better balance between your home and work responsibilities and for us to retain talent and skills in the workforce and react effectively to changing market conditions.
- Re-emphasise a desire to create a good place to work for everyone by aiming to retain skills and experience and adapt to changes in society

## ELIGIBILITY

3.1 To be eligible to make a request, you need 26 weeks' service at the date you make the application and you must not have made a similar request in the last 12 months.

## MAKING AN APPLICATION

4.1 Only one application can be made every 12 months.

4.2 The policy is supported by procedures for making an application.

## TYPES OF FLEXIBLE WORKING

5.1 Some examples of flexible working are documented below, however please note this list is not exhaustive.

5.2 <u>Part Time Working</u>

A system whereby the employee is contracted to work fewer than the standard full-time hours. There are many variations to part time working such as later start or earlier finish times, afternoons or mornings only and fewer working days in the week.

5.3 Job Sharing

An arrangement whereby two part time (or occasionally more) employees share the responsibility of a position. In a ‘shared responsibility’ arrangement the individuals both carry out all the duties of the job simply by picking up the work where the other employee left off. A ‘divided responsibility’ arrangement is when the duties of the position are divided between the two individuals, with each being able to provide cover for the other as and when necessary.

5.4 Working From Home

An employee regularly carries out all, or part of their duties from home rather than at HHP’s premises.

5.5 Hybrid

You carry out your duties from home and from HHP’s premises on a pattern agreed with your Director with a minimum of two days being in the offices.

## TRIAL PERIOD

6.1 The proposed flexible working arrangements can be tried out for a mutually agreed period before any permanent changes are made to an employees Contract of Employment.

## WORKING TIME REGULATIONS

7.1 Flexible working arrangements still need to comply with the law on working time. The UK’s Working Time Regulations 1998 lay down the minimum conditions relating to weekly working time. All flexible working arrangements must comply with the Working Time Regulations 1998 and any subsequent updates. Generally, employees aged 18 or over are entitled to:

- 5.6 weeks’ annual holiday (includes public holidays)
- At least one day off per week, or two days per fortnight
- A 20 minute break if working over six hours
- A maximum 48 hour average working week
- A daily rest period of at least 11 hours in each 24 hour period of work

7.2 There are stricter rules for younger employees.

## EMPLOYEE’S REMEDIES

8.1 You are protected against suffering a detriment or being dismissed for exercising the right to request flexible working, or accompanying a colleague in their request, and may present a complaint to an employment tribunal within three months of the detriment or dismissal.

8.2 In addition, you can bring a claim to an employment tribunal if we fail to follow the necessary procedures or if the decision to reject the application was based on incorrect facts. Employment tribunals can make an order to require the employer to reconsider the application and/or award compensation. Compensation is limited to two weeks’ pay for failure to allow the employee to be accompanied at a meeting and eight weeks’ pay for failure to follow the prescribed procedure. The tribunal cannot question the commercial validity of the employer’s decision. These provisions are independent of existing discrimination law.

## MONITORING & REVIEW

9.1 Six monthly reports will be prepared by the Personnel Team showing the following:

a) the number of applications made

b) the outcome of each application

c) number of appeals

d) outcome of appeals

9.2 The reports will not include the names or posts of any of the applicants and will be considered at the Executive Team and included in the Board’s information Bulletin.

9.3 This Policy will be reviewed every three years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance.

| Version | Change Applied | Date | By |
|---|---|---|---|
| *1.0* | Initial Policy | 18 Nov 2015 | Dena Macleod |
| *2.0* | Revision to take account of the latest legal requirements | 18 Feb 2020 | Dena Macleod |
| *3.0* | Separated out the Policy and Procedure | 2 May 2022 | Dena Macleod |
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## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *HHP or Partnership* | Hebridean Housing Partnership |
| *Board* | Means the Board of the Hebridean Housing Partnership |
| *Board Members* | All Members of the Board including co-opted Members |
| *Leave* | Leave is taken to mean both annual and public holiday entitlement subject to the statutory minimum |
| *Personnel Team* | Chief Executive's Personal Assistant & Executive Office Manager |
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| All references to the masculine gender in this Policy shall read as equally applicable to the feminine gender | |

# APPENDIX 1 – FLEXIBLE WORKING PROCEDURES

hhp | hebridean housing partnership


# Flexible Working Procedures

**Effective Date:**
**Review Date:** March 2022:

## TABLE OF CONTENTS

# FLEXIBLE WORKING PROCEDURES

1.1 This is the procedure you should follow if you want to apply to work flexibly.

## MAKING AN APPLICATION

2.1 Only one application can be made every 12 months.

2.2 You must make the request in writing, including details of the desired working pattern (including location), the proposed effective date and how you satisfy the requirements relating to the eligibility as described in the Flexible working policy. You need to incorporate what effects the request to work flexibly will have on our business and in your opinion how these might be dealt with.

2.3 An application form is at Appendix 1. Completed application forms should be submitted to your Director.

2.4 We aim to deal with requests as soon as possible and within 3 months of first receiving the request, including an appeal.

2.5 If for some reason the request cannot be dealt with within the 3 month period then we can extend the time limit provided you agree.

## PROCESS

3.1 If your Director is not in a position to automatically agree to the change, your Director will meet you within 28 days of your application. Your Director can extend the 28 days as long as they have your permission. The purpose of the meeting is to discuss the proposal and how it may be arranged, and to consider alternative working patterns, should there be problems in accommodating the desired working pattern.

3.2 You have the right to be accompanied at the meeting by a fellow worker. If the chosen companion is not available to attend the meeting, your Director must postpone the meeting to a convenient time for everyone entitled to attend the meeting, within seven days beginning with the first day after the day proposed by your Director.

3.3 Your application is considered as withdrawn if you fail to attend two or more meetings or unreasonably refuse to provide your Director with information required to assess whether or not to agree to the change.

3.4 Within 14 days of the meeting, your Director needs to inform you in writing of their ~~its~~ decision, as follows:

a) If the Director is agreeing to the request, the start date and contract variation must be specified.

b) If the Director is rejecting the request, the business grounds for refusing the application and the appeal procedure must be specified. The Director may only refuse the application if there is a clear business reason relating to one or more of the following:

- burden of additional costs
- detrimental effect on ability to meet customer demand
- inability to reorganise work among existing staff
- an inability to recruit additional staff
- detrimental impact on quality

- detrimental impact on performance
- insufficiency of work during the periods the employee proposes to work
- planned structural changes to the business

## APPEAL

4.1 You have the right to appeal against your Director's decision within 14 days of receiving their decision. The appeal must be in writing setting out the grounds for appeal. The Chief Executive must hold the appeal hearing within 14 days of this notice being given, but the Chief Executive can agree an extension of time with you. You have a right to be accompanied by a fellow worker at the appeal hearing. The Chief Executive must give their written decision within 14 days of the appeal hearing.

4.2 If the Chief Executive is your line Director then your appeal will be heard by the Remuneration Working Group.

## EXTENSION OF PERIODS

5.1 An employer and employee may agree in writing to an extension of any of the above periods. If the person who would ordinarily consider the application for flexible working is on sick leave or annual leave, the 28 days in which to hold the meeting will run from the date of their return or 28 days after the application is made, whichever is the sooner.

## RESPONSIBILITIES

6.1 We have responsibilities to each other throughout the process of applying for Flexible Working and they are summarised below:

Your responsibilities

- To provide a careful thought out application.
- To ensure your application is valid by checking that all the eligibility criteria are met and that you have provided all necessary information.
- To ensure the application is made well in advance of when the change is proposed to take effect.
- To arrive at meetings on time and to be prepared to discuss your application in an open and constructive manner.
- If necessary, be prepared to be flexible yourself in order to reach an agreement with the employer.
- If you wish to be accompanied by a representative, you must ensure that your representative can attend on the date proposed by us or an alternative date within the time frame previously stipulated
- You are able to comply with the requirements for working at home outlined in Appendix 2

Our responsibilities

- To consider requests thoroughly and in good faith in accordance with the set procedure
- To deal with requests as quickly as possible and within 3 months.
- To decline a request only where there is a recognisable business ground and to explain to the employee why it applies
- To ensure that any variation of the procedure is agreed in advance with you and recorded in writing
- Not to subject you to detriment or dismissal for making a flexible working request

## GENERAL DATA PROTECTION REGULATIONS

7.1 We will treat your personal data in line with our obligations under the current Data Protection Regulations and our Privacy Policy. Information regarding how your data will be used and the basis for processing your data is provided in HHP's Employee Privacy Notice.

## APPENDIX 1 – REQUEST FOR FLEXIBLE WORKING

[Addressee]
[Address line 1]
[Address line 2]
[Town]
[County]
[POSTCODE]

[Date]

Dear [Enter name]

**Request for flexible working**

I am writing to request flexible working and:

- request [Enter details of the flexible working pattern that you are seeking]
- would like to commence this flexible working pattern on [Enter date]
- understand that this, if agreed, will mean a permanent variation to my terms and conditions of employment
- think that this proposed change will have [Enter details of the effect you think your move to flexible working may have, eg in terms of any allocation of work, meeting of deadlines, ability to attend meetings] and suggest that this can be overcome by [Enter details of suggestions]
- have/have not* made a previous application for flexible working; the previous application was made on [Enter date]*
- will not be accompanied at the request meeting*
- will be accompanied at the request meeting by [Enter name], [Enter job title]*.

I look forward to hearing from you.

Yours sincerely

[Signatory name]
[Job title / Department]

**delete as appropriate*

## APPENDIX 2 –REQUIREMENTS FOR WORKING AT HOME

It is important that your workspace is safe so please ensure you have the following in place prior to making an application for home working.

- A dedicated work space and working environment. Homeworkers may need to gain the co-operation of others who live in the same place.
    - Space for a traditional desk where you can create an ergonomically correct workstation.
    - A good ergonomically comfortable chair.
    - Adequate lighting levels are critical to productive and comfortable work space.
    - A good surge protector to protect vital computer equipment.
    - A monitor to allow a 2 screen set-up at home with your laptop becoming the second screen.
- Secure premises - Homeworkers should avoid leaving valuable equipment or sensitive information where there is a risk of theft or confidentiality breaches.
- Compliance with health and safety regulations, including suitable furniture.
- A good quality telephone line and access to high speed broadband.
- Employees who work from home, do so at their own cost in terms of heating and lighting that office space. Critical IT equipment will be provided as standard issue by HHP and is subject to a stock take annually.
- HMRC allowances are available for those who work from home and we will signpost employees to these as appropriate.

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ITEM NO 7.3

# WORKFORCE STRATEGY

## Board 25 May 2022

Report by Chief Executive

## Purpose of Report

1.1 To seek approval for the Workforce Strategy following a period of consultation with staff and the Union.

## Summary

2.1 The consultation period ran from 25 March 2022 to 14 April 2022 and two responses were received.

2.2 The responses received were positive and included some suggestions, which will be developed throughout the year and included in the next review of the Business Plan and the Workforce Strategy. These suggestions include:

- A future leaders development plan
- Developing the work we plan to do with schools to ensure Housing is seen as a professional career option

2.3 Minor changes have been made to the wording of the Action Plan at Item 3 and 16 which can be found at Appendix 1.

## Competence

3.1 There are no financial, legal or other constraints arising from the recommendation.

## Recommendations

4.1 **It is recommended that the Board approve the revised Workforce Strategy at Appendix 1.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Workforce Strategy | |
| **Background Papers:** | None | |
| **Writer of Report:** | Dena Macleod | Tel: 0300 123 0773 |

## Competence

*Financial*

5.1 There is provision within the 30 year financial projections for the Workforce Strategy.

*Legal*

6.1 The approval and amendment of policies and strategies is a matter reserved to the Board.

6.2 The Board has referred the following function to the Audit & Risk Committee:

"*Monitoring and reviewing policies and procedures relating to the Board's system of internal control, risk evaluation and corporate governance*"

*Regulatory Guidance*

7.1 This report provides ongoing assurance of evidence RS1 – RS5 in relation to our Annual Assurance Statement. Approving the recommendations will ensure compliance with the Regulatory standards.

*Risk*

8.1 The loss of key staff is highlighted in the Risk Register and this Strategy will go some of the way to mitigating this risk.

hebridean housing partnership


# Workforce Strategy 2022 to 2026

**Effective Date:** May 2022
**Review Date:** March 2024
**Approved by HHP Board: May 2022**

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# Foreward

Our world continues to face unprecedented challenges with an ever growing aging population and climate change. We need to ensure our services are designed in a way that minimises our impact on the environment, provides a high quality service to all our customers, encourages young people into the housing sector whilst keeping our employees skilled and motivated.

This strategy details our plans for investing in our employees over the next four to five years.

The difference between a good and excellent service is the staff responsible for delivering the service. I believe staff who are skilled, motivated, and passionate and who care about customers are the best chance of transforming service delivery.

**Dena Macleod**
**CHIEF EXECUTIVE**

# Workforce Strategy 2022 to 2026

## INTRODUCTION

1.1 Our Business Plan 2019/20 to 2023/24 has four Strategic Goals which will be delivered by the employees of the Partnership. This Workforce Strategy identifies what the workforce needs to look like to ensure the four Strategic Goals are delivered. Our goals are:

1. *Placing tenants at the centre of everything we do*
2. *Investing in an environmentally sustainable way in tenants' homes*
3. *Being a good employer that attracts and retains high quality staff*
4. *Working with partners to contribute to the wellbeing of communities throughout the Outer Hebrides*

1.2 The strategy makes sure we have the right mix of people with the necessary skills in the right location. To deliver our Strategic Goals within our resources we need a workforce that is skilled and committed to our Strategic Goals and organisational culture.

1.3 In one financial year we spend between £10 to £25 million within our community. This is made up of repairing properties, building new homes, investing in older properties, general management costs and staff (people) costs. Our direct people costs average 11% of our annual expenditure so it is vital we get it right. In 2021/22 it reduced to 10% because of the size of our development programme.

1.3 This is our third documented Workforce Strategy.

## AIMS

2.1 The aim is to have a strategy that:

a. Reduces risk and cost by eliminating over reliance on one person for any of our key processes
b. Ensures delivery of our Strategic Goals
c. Improves the quality of customer service
d. Improves the quality of staff engagement and retention rates
e. Stimulates creativity and innovation within the workforce

## BACKGROUND

3.1 The first Strategy was developed following a number of discussions with Managers and took into account the results from the 2020 Staff Satisfaction Survey. We looked at how we deliver services and during 2022/23 we will examine how these posts could change over the next five years.

3.2 The 2022 review includes feedback from Managers, updates the data and amends the action plan to bring forward the appointment of the housing modern apprentice.

3.3 Feedback from a number of other surveys has been taken into account, e.g. tenant satisfaction survey, repairs surveys and stock condition survey.

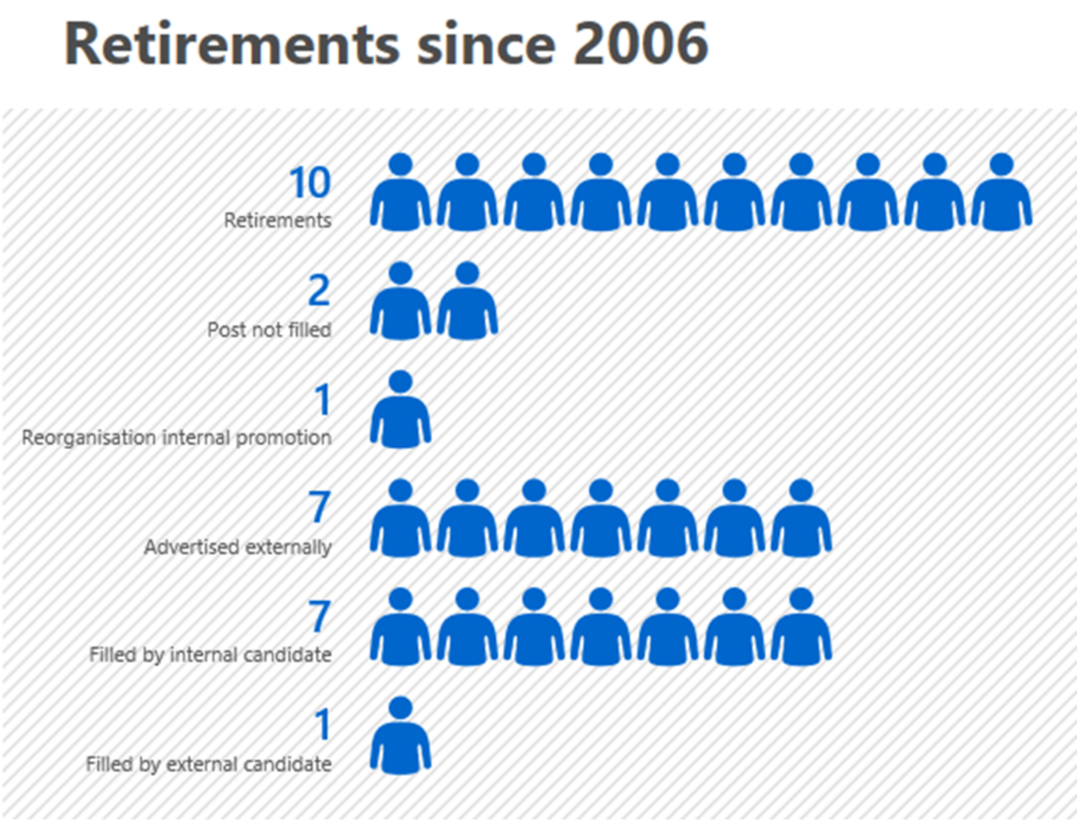
3.4 Local plans by the Community Planning Partnership were reviewed.

## LOCAL CONTEXT

4.1 We are considered a large employer in the Outer Hebrides currently employing 51 people. We are a living wage employer and have provision for one Modern Apprentice and two graduate trainee posts.

4.2 In 2006, when we were formed, we employed 42 people, owned 1787 homes and managed 2102 homes. Over the years our workforce has grown and changed in response to service delivery requirements, customers' expectations, additional homes, increased government and regulatory standards, and changes in tools available for delivering a housing service.

4.3 Since 12 September 2006 (15.5 years) the position is:

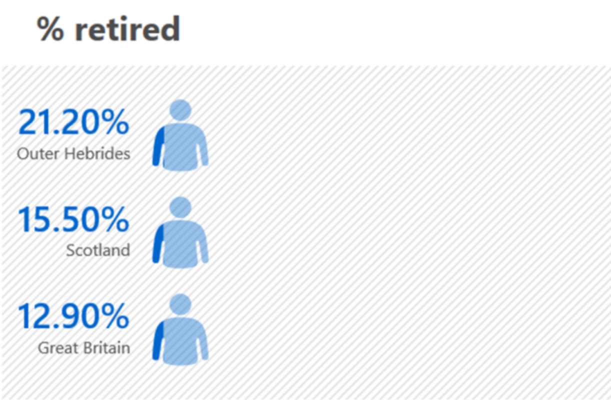


4.4 The percentage of retirement posts filled by internal candidates was 77% which is quite high and relatively reassuring. It reveals staff are gaining the experience and qualifications needed to progress to promoted posts. For comparison purposes, internal candidates filled 42% of the posts which became vacant in 2021.

4.5 The average retirement age was 60. All the retirements were "early" and one was due to ill health. The changes introduced by the Government with the Rule of 85 mean the average retirement age will increase over the next 10 to 15 years.

4.6 The population of the islands is aging and falling, putting pressure on nearly all employers to find the necessary skills to deliver their businesses and services.

4.7 The Office for National Statistics Service in September 2021 showed that the employment rates in the Outer Hebrides remains stable. The report showed that in the year to September 2021 employment rate was 81.5% which is higher than the Scottish Average of 72.9%.





Source: NOMIS

4.8 The two graphs above show clearly the challenges employers in the Outer Hebrides must grapple with when maintaining and developing their workforce.

## ANALYSIS OF CURRENT WORKFORCE

5.1 In this section we analyse the age profile of our current work force and look at the skills base which will enable us to clearly identify risks and actions required to mitigate the risks.

### Age Profile

5.2 The average age of our current workforce is 47 years and 51% (26) are over 50. If we assume staff will retire at the current state age for retirement

- 18% (9) will retire by 2030

- 51% (26) will retire by 2040

Table 1 below shows the age profile of our workforce at March 2022.

*Table 1*

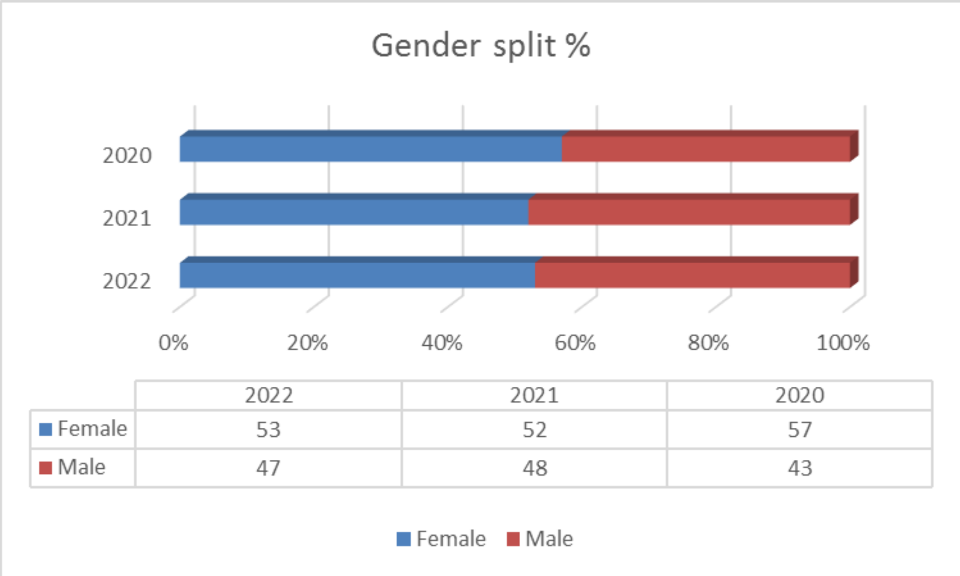
| | 2022 | 2023 | 2024 | 2025 | 2026 | 2027 | 2028 |
|---|---|---|---|---|---|---|---|
| Under 20 | 2% | 2% | 0% | 2% | 2% | 2% | 2% |
| 20 to 29 | 6% | 4% | 6% | 6% | 6% | 6% | 6% |
| 30 to 39 | 18% | 16% | 16% | 16% | 14% | 12% | 8% |
| 40 to 49 | 24% | 27% | 24% | 20% | 20% | 22% | 25% |
| 50 to 55 | 24% | 20% | 18% | 18% | 20% | 18% | 12% |
| 56 to 60 | 22% | 18% | 20% | 18% | 18% | 18% | 20% |
| over 60 | 6% | 14% | 18% | 22% | 22% | 24% | 27% |

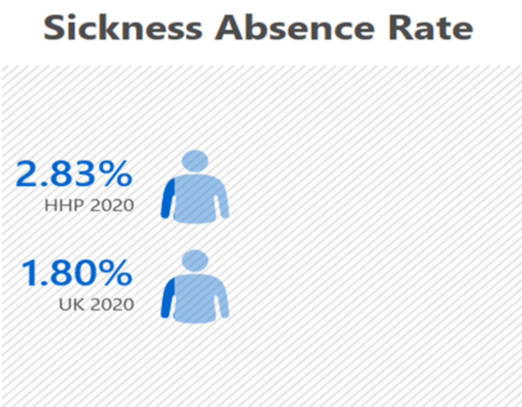
5.2 Our Property Services Team has the highest average age at 53 followed by Housing Services Team at 51 and Executive Team at 50. Our youngest team is the Executive Office with an average age of 35. The Property Service Team are one of our longest serving teams so there is a risk of a substantial amount of knowledge being lost if it is not captured in our systems before the team members retire. More than 50% of the current team are due to retire by 2033.

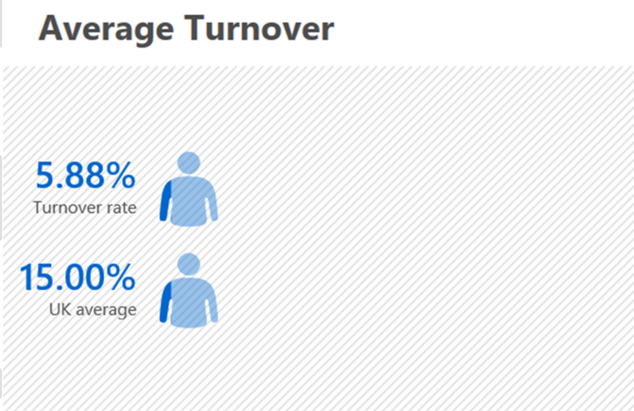
*Table 2*

| | Ave Age | Ave Service |
|---|---|---|
| Property Services | 53 | 15 |
| Housing Services | 51 | 12 |
| Executive Team | 50 | 17 |
| Corporate Resoures | 48 | 10 |
| Customer Services | 41 | 4 |
| Finance | 40 | 3 |
| Executive Office | 35 | 4 |

5.3 The following graphs show the statistics for gender split, days lost through sickness and turnover rate.




5.4 Our sickness absence rate for 2021 was 2.4% and is still higher than the UK average in 2020 but it has reduced from 4.4% in 2019. Our higher rate absence could be reflective of our age profile and the level of long term sickness. Nationally, sickness absence levels are higher in older employees. There is a direct impact on our ability to deliver on our Strategic Goals when there are long term absences and we need to build more resilience into our ways of working and also take this into account when setting targets for our Strategic Goals.

## Skills Base

5.5 There are specific risks associated with a team which is predominately older e.g. there could be a lack of innovation and a slowness to move to new technologies or new methods of working, preferring to do things the way they have always been done.

5.6 Experience and knowledge of tenants is valuable but it is equally important to have the skills to deal with the increasingly varied needs of our tenants. There is a growing need/demand for support to vulnerable tenants. Moving tenants onto self-service will free up time for our customer services officers. This time will be invested in the provision of a low level of support to our vulnerable tenants to prevent problems.

5.7 Two of our teams have particular vulnerabilities:

a) ***Corporate Resources Team***- Two members have been in post since the inception of HHP which has resulted in an over reliance on their ITC knowledge. Key to minimising this risk is to have clearly documented system procedures. As businesses become more reliant on robust ITC service the need to have sufficient skills to support this service increases. To strengthen our skill set in this area and recognising the growth in our dependence on ITC system we have included an IT graduate trainee post in our structure.

b) ***Executive Office***-this is a newly established team which experienced a 50% turnover in its first two years.

5.8 Our current turnover rate increased during 2021 with 14 vacancies across all but one team (Property Services). We provided secondment opportunities for four members of staff which allowed them to develop new skills and gain more experience.

5.9 It is very unlikely that the jobs we currently do will be done in the same way as we do them now. We are going to need more skills in the backroom to manage our systems as more tenants move towards self-service. We need multimedia skills to develop and improve how we present ourselves and improve the level of our social media engagement. We will need to assess whether it is better to buy these services in or to provide them in-house.

5.10 An ageing workforce generally results in a higher sickness absence rate as more illness is experienced. There is also a greater risk for long term absences so we are exploring options to encourage and support healthy living. We are reviewing the office layout to ensure it is not contributing to the spread of illness.

5.11 The culture in the organisation needs to keep changing from 'fear of making a mistake' to 'trust' and continuing to explore better ways of working.

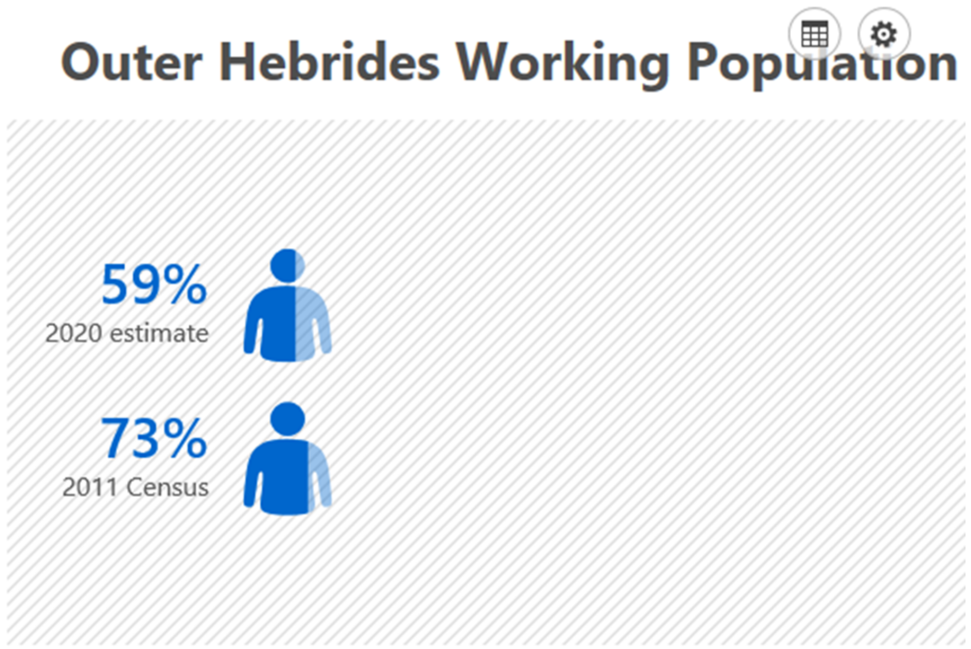
## Ways of working

5.12 We are reviewing options for our working patterns in the future including a blended model of home and office working. Whatever arrangements we put in place will always ensure that we can continue to put our customers' needs first.

## Workforce Supply

5.13 An aging and falling population is placing strain on the workforce supply for most employers in the islands. The source for the statistics below is the Outer Hebrides Fact file on the Comhairle's web site.

5.14 In 2020 it was estimated that 59% of the population in the Outer Hebrides was of working age in comparison to 64% for Scotland. There has been a drop of over 15% in the workforce supply between 2011 and 2016. This trend is reflected in the reduction in applications received for vacant posts. Five years ago a vacancy would have resulted in three or four times the applications now being received for vacancies.




5.14 10% of the population in the Outer Hebrides is self-employed compared with 7% for Scotland.

## WHAT KIND OF WORKFORCE DO WE NEED

6.1 The Board approved an ambitious five year Business Plan in 2019/20. We are entering into our fourth year of the plan which looks to deliver the standards required by Government in our properties and continually improve on our service delivery standards. The Board want all of our tenants to feel that the house they rent from us is a place they can call their home. To achieve the vision of "making our house your home" the workforce need to be:

- Customer focussed by placing tenants at the centre of everything they do, customers should be the first thing we think about when we are looking at our service delivery
- Innovative so we can invest in an environmentally sustainable way in tenants' homes
- Outcome focussed and high performing - using time and resources in a way that avoids waste and delivers the best results for our tenants
- Supported to maintain good physical and mental health
- Motivated by seeing what they do as more than just a job and the impact they can have on the lives of those who live in our communities
- Good leaders - our Managers need to be supportive of their team, demonstrate fairness by recognising excellent performance and dealing fairly and effectively with poor performance
- Aware, agile and adaptable - with constantly changing work environments due to technology, climate change and reducing resources, it is imperative that everyone is on board with looking at how we can change how we deliver our service and be prepared to amend how jobs are carried out

## HOW WE WILL DEVELOP THE WORKFORCE WE NEED?

7.1 The foundations have been laid by the Board in 2019 to develop the workforce by implementing a Competency Framework as part of a new Pay and Grading scheme. The Competency Framework outlines the behaviours required for each post in the organisation making it clear that doing a good job is more than completing a task, it is also about how that task is completed. Managers are taking the lead role with the teams to ensure the Competency Framework is fully embedded in how we all work.

### Training

7.2 Our training plan ensures identified skills gaps are met from a combination of the current workforce and trainee positions.

### Apprenticeships

7.3 In 2022/23 our Business Admin Modern Apprentice will start what we hope will be a rolling programme of modern apprenticeship. On completion of her Business Admin Apprenticeship in August 2022 she will commence a two year Housing Apprenticeship contract.

7.4 We will provide opportunities for young people and equip them for filling vacancies which arise. Our intention is to recruit each year a Business Admin Modern Apprentice with an option attached to extend the apprenticeship by a further two years as a Housing, Technical or IT Modern Apprentice.

7.5 The full detail of the programme will be developed during 2022/23.

### Leadership

7.6 Managers are being given greater flexibility in how they manage their teams and they will be supported to become the leaders our customers need them to be. Our Managers will be leaders whose first response will be to find a solution rather than presenting a problem and they will encourage their teams to develop the same approach. Our Managers have just completed a 12 month Leadership Programme, specifically developed for housing. Each Manager will complete a formal feedback form and there will be a collective agreement about how we can build on and develop the skills gained through the programme. The feedback received from the course provider was:

"*Our final session was yesterday and it was humbling for us to receive the feedback from your managers on the course. I'm biased but I think you've got a great team there and wish you all the best for HHP*."

### Service Delivery

7.7 We are implementing a new housing management system during 2022 which will involve reviewing our key processes, making sure they are documented and that we have triple cover in place. We will also use the opportunity to see how the processes can be improved.

7.8 Executive Team will support Managers to enable them to ensure that all their team members buy into the Board's vision and that they are committed to delivering on our Strategic Goals.

7.9 Staff will be supported in developing ideas which could improve service delivery and we all need to be more willing to try things and learn from the things that fail.

### Plans

7.10 Our detailed plans are at Appendix 1 to this Strategy and will be monitored and managed by the Executive Team. Our actions include:

a) Teams exploring how hybrid working might work for them and proposing changes required to our Flexible Working Policy
b) Review of Recruitment Policy to see how we can accommodate "career advancement" to ensure we have skilled staff to fill vacancies that will arise from retirements
c) Assessing the efficiencies delivered as our Digital Transformation Strategy is implemented
d) Projections for stock numbers by island
e) Retirements due
f) Review of our risks
g) Wider working environment (how will we fit in with the Comhairle's vision for Hubs)

7.10 The cycle for reviewing retirements is below. The opportunity will always be taken when a post becomes vacant to assess whether the best option is a "like for like" replacement or something different.

| | |
|---|---|
| **September** | Review retirements due in the coming 5 years |
| | Review objective for the same time frame |
| | Decide if vacancy needs to be filled and if so how |
| **November** | Include any agreed changes in staffing to long and short term budget proposals |
| **February** | Draft budgets to Board for approval to include an update on any changes required to staffing |

7.11 A summary of the key actions is in Table 3 below and a full action plan is at Appendix 1 to the Strategy.

| | 2022/23 | 2023/24 | 2024/25 |
|---|---|---|---|
| Revise the Flexible Working Policy to ensure it accommodates fully hybrid working | | | |
| Review retirements due in next 5 years | | | |
| Skills Audit completed and gaps identified | | | |
| Trainees in post | 2 Year Housing Modern Apprentice | 2 Year Housing Modern Apprentice | Business Admin Modern Apprentice |
| Key processes documented and triple cover in place | | | |
| Prepare detail for Apprenticeship training programme | | | |
| Full procedure manual completed and tested | Completed | Tested | |
| Training Plan delivered | | | |
| Healthy working options | | | |
| Review of Office space | Completed | Implemented | |

## STRATEGY CHANGE HISTORY

| Version | Change Applied | Date | By |
|---|---|---|---|
| *1.0* | First Strategy | 27 February 2020 | Dena Macleod |
| *2.0* | 2021 update | 20 April 2021 | Dena Macleod |
| *3.0* | 2022 update | 4 March 2022 | Dena Macleod |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *HHP or Partnership* | Hebridean Housing Partnership |
| *Board* | Means the Board of the Hebridean Housing Partnership |
| *Board Members* | All Members of the Board including co-opted Members |
| *SHR* | Scottish Housing Regulator |
| *SFHA* | Scottish Federation of Housing Associations |
| *EVH* | Employers in Voluntary Housing |
| | |
| | |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

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Phone:0300 123 0773

## APPENDIX 1-WORKFORCE STRATEGY ACTION PLAN 2022 TO 2026

**STAFF ENGAGEMENT**

| | Action | Responsible | Completion Date | Measured By |
|---|---|---|---|---|
| 1 | Complete skills audit for staff and ensure any gaps are captured in training plans | Managers | 30 September 2022 | Audits completed |
| 2 | Develop Wellbeing events for staff | Executive Office Manager | 31 August 2022 | Plan prepared for consideration |
| 3 | Encourage staff to share ideas at their monthly Team meetings on how we can improve our service | Managers | Immediately | Number of ideas received and implemented |
| 4 | Conduct staff engagement surveys on a regular basis and implement action plans | Executive Office Manager | 30 June 2022 | Survey results |

**DEVELOPING OUR PEOPLE**

| | Action | Responsible | Completion Date | Measured By |
|---|---|---|---|---|
| 5 | Identify talent in the organisation and developing leaders of the future | Managers | Annually by 30 September | Number of potential leaders identified and developed |
| 6 | Review potential retirements due in next five years | Directors | Annually by 30 September | Completion of review |
| 7 | Fill Housing Modern Apprentice post | Executive Office Manager | 30 September 2022 | Post filled and training completed within 2 years |
| 8 | Fill Business Admin Modern Apprentice post | Executive Office Manager | 30 September 2023 | Post filled and training completed |
| 9 | Build on the skills developed through the Leadership Programme | Manager | 31 March 2022 | Action Plan in place |
| 10 | Build and develop networking opportunities for staff at all levels | Chief Executive and all managers | 31 March 2023 | Number of opportunities provided and considered effective by those who attend |

| | Action | Responsible | Completion Date | Measured By |
|---|---|---|---|---|
| 11 | Develop and implement Housing Education pack for delivering in schools | Executive Office Manager | 31 March 2023 (dependent on COVID-19 impact) | Feedback from the schools on the effectiveness and usefulness of the pack |

**DEVELOPING OUR PROCESSES**

| | Action | Responsible | Completion Date | Measured By |
|---|---|---|---|---|
| 12 | Review of office space in Stornoway and Balivanich and examine options for participating in Community Hubs | Director of Finance & Corporate Services | 31 March 2023 | Staff satisfaction with any changes in working environment and tenant satisfaction with customer service spaces |
| 13 | Implement our Digital Transformation Strategy | Digital Transformation Manager | 31 March 2023 | |
| 14 | Full procedure manual completed and tested | Executive Office Manager | 31 March 2023 | Complete procedure manual |
| 15 | Encourage everyone to ask the question "Can I do this in a better way that uses less of my time?" | Managers | Now | Staff satisfaction |

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Making our house your home



# REVIEW OF POLICIES

## Board 25 May 2022

Report by Chief Executive

## Purpose of Report

1.1 To approve a number of policies which are due for review.

## Summary

2.1 The Board has agreed a schedule for reviewing its policies, which is generally on a 3 yearly cycle.

2.2 The policies reviewed under this report only require minor updates.

2.3 Details of the updates can be found at Paragraph 9.1.

## Competence

3.1 The financial, legal and other constraints to the recommendation in this report being implemented are at paragraph 5.1 – 8.1.

## Recommendations

4.1 **It is recommended that the Board approve the following policies:**

- **a) Appointment of Consultants Policy at Appendix 1;**
- **b) Landlords Fire Safety Policy at Appendix 2;**
- **c) Electrical Safety Policy at Appendix 3;**
- **d) Play Areas Policy at Appendix 4;**
- **e) Water Systems & Legionella Policy at Appendix 5;**
- **f) Office Fire Safety Policy at Appendix 6;**
- **g) Managing Violence & Aggression at Work Policy at Appendix 7;**
- **h) Vulnerable Consumers Policy at Appendix 8; and**
- **i) Personal Relationships at Work Policy at Appendix 9.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Appointment of Consultants Policy | |
| **APPENDIX 2:** | Landlords’ Fire Safety Policy | |
| **APPENDIX 3:** | Electrical Safety Policy | |
| **APPENDIX 4:** | Play Areas Policy | |
| **APPENDIX 5:** | Water Systems & Legionella Policy | |
| **APPENDIX 6:** | Office Fire Safety Policy | |
| **APPENDIX 7:** | Managing Violence & Aggression at Work Policy | |
| **APPENDIX 8:** | Vulnerable Consumers Policy | |
| **APPENDIX 9:** | Personal Relationships at Work Policy | |
| **Background Papers:** | Regulatory Standards of Governance & Financial Management | |
| **Writer of Report:** | Iona France | Tel: 0300 123 0773 |

# Competence

*Financial*

5.1 There are no additional costs as a result of this review of the policies.

*Legal*

6.1 The approval and amendment of policies is a matter reserved for the Board.

6.2 The Board has referred the following function to the Audit & Risk Committee:

> *"monitoring and reviewing policies and procedures relating to the Board's system of internal control, risk evaluation and corporate governance"*.

*Regulatory Guidance*

7.1 The Regulatory Standards checklist has been completed and there is nothing in the report which would result in a breach of the standards.

7.2 This report provides assurance of evidence GF1 and RS4.3 in relation to our Annual Assurance Statement.

*Risk*

8.1 Governance of the Partnership is critical to its long-term viability. Reviewing and updating policies ensures a solid foundation for good governance and mitigates the risk.

# Report Details

9.1 The updates detailed in the table below have been made to the policies.

<table>
<tr><th>Policy</th><th colspan="2">Detail</th></tr>
<tr><td>Appointment of Consultants Policy</td><td colspan="2">Some minor updates for clarity and formatting. Proformas and procedures to be updated following review</td></tr>
<tr><td rowspan="2">Landlord's Fire Safety Policy</td><td>3.2</td><td>updated to include battery powered alarms</td></tr>
<tr><td>9.2</td><td>updated to reference new fire regulation requirements including sprinkler systems</td></tr>
<tr><td>Electrical Safety Policy</td><td colspan="2">Minor formatting</td></tr>
<tr><td>Play Areas Policy</td><td colspan="2">Minor formatting</td></tr>
<tr><td>Water Systems & Legionella Policy</td><td colspan="2">Minor formatting</td></tr>
<tr><td rowspan="5">Office Fire Safety Policy</td><td>2.28</td><td>Table added to define delegated responsibilities</td></tr>
<tr><td>4.4</td><td>Updated to reflect changes in working patterns</td></tr>
<tr><td>Appendix 1</td><td>Removed Portacabin, Harris</td></tr>
<tr><td>Appendix 2</td><td>Balivanich Floor Plan Updated</td></tr>
<tr><td>Appendix 3</td><td>Fire Marshalls updated</td></tr>
<tr><td rowspan="3">Managing Violence & Aggression at Work Policy</td><td>2.1</td><td>Updated to include electronic communication</td></tr>
<tr><td>Appendix 1</td><td>Date updated</td></tr>
<tr><td colspan="2">Processes to be updated following review</td></tr>
<tr><td>Vulnerable Consumers Policy</td><td colspan="2">Removal of Braille as option</td></tr>
<tr><td>Personal Relationships at Work Policy</td><td colspan="2">Minor formatting</td></tr>
</table>

9.2 All policies were updated to ensure consistency with corporate standard.

hebridean housing partnership


# Appointment of Consultants Policy

**Effective Date:** May 2022
**Review Date:** May 2025
**Approved by HHP Board:**

## TABLE OF CONTENTS

# APPOINTMENT OF CONSULTANTS POLICY

## INTRODUCTION

1.1 This policy sets out the approach that will be taken in relation to the procurement and use of consultants, in accordance with best practice, regulatory requirements, budgetary constraints, delegated authorities, and our procurement policies and strategy.

1.2 It is essential that money is spent in a way that ensures Value for Money (VFM). When the use of consultants is deemed necessary, they need to be used sparingly, appropriately and effectively. Therefore, we must ensure that consultants are only used when:

- The work cannot be carried out internally, i.e. the required knowledge is not available in-house or from some other source which we can draw on;
- They can bring relevant knowledge and have proven experience which will add value to the our objectives;
- Staff have the knowledge and capacity to manage them effectively; and
- Management demonstrates the commitment to act on any outputs with clear plans on how this might be done.

## AIMS

2.1 The specific objectives of this policy are to:

- Define the role of a consultant;
- Ensure the use of consultants can be justified;
- Determine how the Partnership will identify consultants with the necessary skills and experience;
- Set out how consultants will be briefed in advance of seeking their involvement in a particular project;
- Explain how consultants will be selected for a particular project, using value-based assessment;
- Allow for the demonstration of clear audit trails and accountability;
- Summarise the arrangement for formalising the appointment of consultants;
- Give guidance on review of consultant performance; and
- Highlight how this policy should be used as part of our policy framework in respect of procurement.

## CONTEXT

3.1 Our approach to the selection and engagement of consultancy services should be taken within the context of its overall approach to procurement with particular regard to ensuring quality and delivering value.

3.2 In accordance with the expectation of the Scottish Government's Procurement Guidelines, the principle of partnering will apply. Partnering involves a high degree of co-operation between us and any consultant engaged and implies a climate of trust and agreement of mutual objectives.

## THE ROLE OF A CONSULTANT

4.1 A consultant is a person or body that supplies us with external professional or technical advice or expertise, under contract, to agreed timescales and for an agreed fee.

4.2 The services provided by a consultant will be unique, specialised, infrequent or periodic, and usually not available to us from the existing workforce.

4.3 Consultancy services are expected to aid our work in, but not limited to, the following ways:

- They will provide additional skills and expertise;
- They are engaged to carry out activities such as investigating problems, providing analysis or advice;
- They will assist with the development of new or existing systems, structures, or capabilities; and
- When an independent assessment of a particular function, situation or project is required.

4.4 The role of the consultant will be clearly detailed in the procurement specification of works.

## JUSTIFICATION FOR THE USE OF CONSULTANTS

5.1 A consultant is never an acceptable substitution for a relatively stable, adequately sized, and high quality management team. However, we will occasionally have the need to employ a consultant to provide a particular set of skills in order to fulfil our business objectives. To that end, the engagement of external support needs to be for defined fixed periods, with clear objectives and outcomes, and at predetermined costs, all of which will be rigorously monitored to ensure Value for Money.

5.2 In conjunction with our Value for Money Strategy, any decision to engage in consultancy services must be backed up by a thorough business case with justifications as follows:

- the reason for the need – is it concerned with the procurement of external skills/expertise, or is it to overcome a shortage of internal resource/capacity;
- what the estimated costs are likely to be;
- Where appropriate, there is a clear 'invest to save' case which will support the expenditure that is going to be incurred in terms of the return on the costs involved;
- evidence that there is no in-house expertise and/or in-house capacity available to undertake the work in the required timescales;
- evidence that the problem is clearly defined and that the alternatives to the use of consultants have been considered;
- definition of the range of the work;
- timescales, milestones, and the form of the deliverables;
- apportionment of responsibilities for data collection, etc; and
- a clear plan of how the findings are likely to be actioned.

5.3 The Business Case should be prepared for review by the Executive Team, and if the need for consultancy is confirmed in principle, a Report should be prepared which seeks the Board's approval to engage consultancy services accordingly.

5.4 There are some areas and tasks within our business environment for which the use of consultants is a requirement. These are detailed at Appendix 1 and may change periodically depending on legal/regulatory requirements.

5.5 Board approval will only apply where the anticipated value of fee is in excess of existing approved budgets or outwith the delegation levels set in our standing orders.

## BRIEFING

6.1 When we wish to engage consultancy services, it is imperative that a strategic brief is prepared in which the overall objectives in relation to the consultancy service are detailed.

6.2 The brief should be a clear specification from which prospective consultants can prepare a costed proposal and from which their performance can be measured. The brief should be prepared in such a way that allows competing proposals to be measured in terms of quality and price.

6.3 It is recognised that different types of consultancy services will require different strategic briefs. However, every brief must have clear objectives, deliverables and milestones, as well as an agreed end date. As a minimum, the brief should contain:

- project detail, aims and objectives;
- intended client group;
- community consultation or tenant involvement;
- functions to be accommodated, such as a link to employment initiatives, support and care initiatives;
- project timetable and key milestones;
- key outcomes/deliverables;
- details of work already completed/work required;
- reporting requirements (frequency and format);
- performance standards;
- detailed financial considerations, including available budget, grants, and indicative cost limits;
- details of payments (linked to achievement of key milestones and final outcomes);
- details of the process to be followed for procuring consultants' services (or of consultants already appointed), including what is expected of the consultant in response to the strategic brief;
- mention of the requirement to ensure that skills and knowledge are transferred to HHP staff;
- Terms & Conditions (legal advice should be sought in accordance with the Partnership's appropriate policy).

6.4 Consultants from the relevant discipline will be invited to respond with proposals for professional services which meet our requirements.

6.5 The Strategic Brief, prepared by us, will be used as the basis for the appointment of the consultant. The successful consultant will be required to prepare a detailed project brief following appointment.

## SELECTION

7.1 We recognise the importance of striking an appropriate balance between cost and quality to achieve best value, so selection of the most suitable external support will not be made on cost alone. We will select consultants in line with our Procurement Policy.

7.2 The selection process, including who is involved and the extent of their involvement, will vary depending on the scale and complexity of the consultancy service required.

7.3 Confirmation of the appointment of a consultant, following the completion of the tendering and evaluation process, will be the responsibility of the Chief Executive.

## APPOINTMENT

8.1 Appointment of consultants will be made through the Public Contract Scotland website, or where appropriate, by letter.

8.2 This letter of appointment will refer to the relevant conditions of appointment for the particular profession, clearly setting out the scope and the nature of the services to be provided and confirming details of the fee agreement. Standard letters will be used, and will include the following elements:

- a description of consultant's tasks and duties;
- definition of how fees are to be calculated;
- breakdown of timing of fee payments;
- a clear statement of standards expected;
- requirement to maintain Professional Indemnity Insurance for the nature, scale and timing of the commission proposed;
- termination of appointment procedure;
- dispute resolution procedure; and
- ownership of drawings, calculations, and other documentation pertaining to the consultancy service provided.

8.3 The Conditions of Appointment will be those relevant to the particular profession (recognising that they may need to be amended to comply with all current legislation), and will be confirmed in the letter of appointment.

In determination of the appointment of consultants the following approach should be adopted:

- check carried out that value of contract is within consultant's capacity;
- financial guarantees should be sought from the holding/parent company in respect of works exceeding £150K where work has been awarded to a subsidiary company; and
- references be obtained for all consultants from bankers and trade suppliers in respect of projects with an estimated cost of over £150K.

8.4 Prior to the confirmation of any appointment, there will be a further check on:

- the scope and currency of the consultant's Professional Indemnity Insurance; and
- whether the appointment would breach the Regulator's Regulatory Standards of Governance and Financial Management, and our Financial Regulations.

8.5 The appointment of a consultant will never take the form of an oral agreement.

## FEES

9.1 The fees payable to each consultant will be the subject of negotiation and will reflect the need for quality service as well as cost.

9.2 Payment of fees will be in accordance with the conditions of appointment. We will check all consultants' fee notices prior to making payment.

9.3 We will make timeous payment to consultants of fees due for each completed stage of the work.

9.4 As far as possible "at risk" works will be avoided.

## MONITORING AND REVIEW OF POLICY

10.1 At the conclusion of each project, the performance of the consultant will be reviewed, using a proforma, and reported to the Board.

10.2 The operation of this policy will be monitored by the Board.

10.3 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance.

## REFERENCES

11.1 Section 31(1) and (2) of the Public Services Reform (Scotland) (PSR) Act 2010 require public bodies to publish a statement of any external consultancy expenditure they have incurred during that financial year as soon as it is reasonably practicable after then end of each financial year.

11.2 The responsibility of reporting this expenditure falls within the remit of the Director of Finance & Corporate Services.

11.3 The use of Appointment of Consultants Policy is supported by related HHP policies and procedures and should be read in conjunction with, but not limited to, the following:

- Procurement Policies and Strategy;
- Openness and Confidentiality Policy;
- Anti-Corruption Policy Statement;
- Code of Conduct Policies;
- Entitlements, Payment and Benefits Policy;
- Development Policies;
- Disclosure of Interest Policy;
- Fraud Policy; and
- Risk Management Policy.

# APPENDIX 1

## AREAS & TASKS WHICH REQUIRE CONSULTANCY SERVICES

**FUNDER'S VALUATION**

**TREASURY MANAGEMENT**

**STOCK CONDITION SURVEY**

**PAY & GRADING REVIEW**

**SALARY BENCHMARKING**

**TECHNICAL PROCUREMENT**

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *HHP or Partnership* | Hebridean Housing Partnership |
| *Board* | Means the Board of the Hebridean Housing Partnership |
| *Board Members* | All Members of the Board including co-opted Members |
| *VFM* | Value for Money |
| | |
| | |
| | |
| | |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

APPENDIX 2


# Fire Safety Policy (Housing stock and Common Areas)

**Effective Date:** May 2022
**Review Date:** May 2025
**Approved by HHP Board:**

## TABLE OF CONTENTS

# FIRE SAFETY POLICY

## INTRODUCTION

1.1 Hebridean Housing Partnership is committed to maintaining the Health and Safety of employees, tenants and members of the public. We recognise the potential health risks associated with fire safety in our homes.

1.2 In meeting these responsibilities, we will ensure that we comply with the relevant legislation regarding fire safety.

## AIMS

2.1 The aim of this policy is to provide a robust fire safety framework which can be implemented to secure the safety and wellbeing of tenants, visitors and firefighters

2.2 The procedures detailed within this policy are intended to facilitate the effective management of fire safety, ensuring that all reasonable steps are taken to comply with the Fire (Scotland) Act 2005, the Fire Safety (Scotland) Regulations 2006 and all other relevant legislation.

## FIRE AND SMOKE ALARMS

3.1 We will provide:

- one functioning smoke alarm in the room which is frequently used by the occupants for general daytime living purposes
- one functioning smoke alarm in every circulation space, such as hallways and landings
- one functioning heat alarm in every kitchen

3.2 All alarms will be interlinked, mains or battery powered, and provided with an integral standby power supply.

3.3 We will ensure that fire and smoke alarms are in proper working order at the start of each tenancy.

3.4 We will ensure that all alarms are installed in accordance with the recommendations contained in BS5839 Part 6.

3.5 Specialised alarms will be given to tenants who have a disability, impairment or special needs (e.g. smoke alarms with a vibrating pad, flashing light etc.).

3.6 Tenants will be shown how to test alarms and then advised to test them on a weekly basis.

## CARBON MONOXIDE ALARMS

4.1 Carbon monoxide alarms will be installed in any room containing a fossil fuel burning appliance.

## EMERGENCY LIGHTING

5.1 For blocks of flats and maisonettes, emergency lighting will be present in all communal areas and common escape routes.

5.2 The emergency lighting system will be designed to automatically illuminate upon the failure of the power supply.

5.3 The emergency lighting system will be tested on a six-monthly basis with a record of the test maintained for three years.

5.4 An annual discharge test will be performed by a competent person. This will involve simulating a power failure and conducting a test of the full rated duration of the emergency lights (e.g. 3 hours).

## FIRE DOORS AND COMPARTMENTATION

6.1 Buildings containing flats and maisonettes will be split into fire-resisting compartments by fire-resisting doors, walls and floors which will provide a physical barrier to fire.

6.2 Doors connecting shared parts of a multi-occupancy dwelling, such as the doors to individual flats or apartments will be rated fire doors.

6.3 Doors used for plant rooms and service penetrations such as rubbish chutes will be fire rated.

## EMERGENCY EXIT DOORS

7.1 We will ensure all doors which are to be used in an emergency can be opened from the inside without the use of a key.

## SMOKE VENTILATION

8.1 Communal areas, where practicable, will have adequate smoke ventilation either through natural means or by mechanical ventilation.

## FIRE EQUIPMENT

9.1 Under Scottish Government legislation, all new build social housing must be fitted with automatic fire suppression systems where the building warrant is applied for on or after 1 March 2021.

9.2 Sprinklers will be installed in existing houses where we are unable to reduce particular risks by other means.

9.3 Fire extinguishers will not be installed in dwellings as tenants will not be trained on the safe use of extinguishers. Accidents can occur if tenants try to use them in the event of a fire or if they are discharged through malice or horseplay.

## FURNITURE AND FURNISHINGS

10.1 Where furniture and furnishings are provided, we will ensure they are fully compliant with the Furniture and Furnishings (Fire) (Safety) Regulations 1988.

## EVACUATION POLICY

11.1 Where a building is over 2 storeys, fire evacuation procedures and fire assembly points will be clearly contained in tenancy handbooks or tenancy start-up packs which will be issued to all tenants at the start of a tenancy. It will be the tenants responsibility to familiarise themselves with the procedure and follow it out in the event of a fire.

11.2 Alternative methods will be available for tenants with language or learning difficulties (e.g. an interpreter will be used, a copy will be in braille, an audio version will be available etc.).

## SIGNAGE

12.1 Where a building is over 2 storeys, fire action signs will be placed in corridors (on every level), entrance doors and common areas. Where fire safety signs are provided they will be in accordance with BS 5499 and the Health and Safety (Safety Signs and Signals) Regulations 1996.

## MAINTENANCE AND REPAIRS

13.1 We will ensure premises, equipment and devices provided for fire safety are subject to a suitable system of maintenance, are maintained in an efficient state, in efficient working order and in good repair.

13.2 All repairs will be carried out within the timescale set in our repair policy by a competent person.

## ACCESS AND FACILITIES FOR FIRE SERVICE

14.1 Where practicably possible, we will ensure:

- there is sufficient means of external access to enable fire appliances to be brought near to the building for effective use
- there is sufficient means of access into, and within, the building for firefighting personnel to effect search and rescue and fight fire

## FIRE RISK ASSESSMENT

15.1 The legal requirements relating to Fire Risk Assessing are complex and are often taken to exclude domestic premises. However, we have a legal duty to risk assess all areas defined as 'workplaces', which will include plant rooms and other non-tenant-accessible areas.

15.2 Furthermore, the fire regulations require common areas to be maintained in a certain condition suitable for the fire authority, which can often only be ensured by carrying out a risk assessment.

15.3 A Fire Risk Assessment Plan is in place to ensure the undertaking of fire risk assessments (and regular reviews) by competent persons in accordance with the plan.

15.4 The following was considered in developing the Fire Risk Assessment Plan:

- Buildings over 2 storeys that may pose a particular risk to tenants;
- 'Workplaces' such as plant rooms come within the scope of the regulations so far as fire risk assessing is required; and

- Common areas of domestic premises require to be maintained in a certain condition and may benefit from a 'representative' risk assessing programme.

## TENANT RESPONSIBILITIES

16.1 We will include fire safety obligations within tenancy agreements and will issue regular fire safety information packs and leaflets to remind tenants to:

- test smoke alarms on a weekly basis
- ensure all communal areas are not obstructed
- ensure fire doors are not propped open or otherwise disabled
- familiarise themselves with any evacuation procedure

## LICENSED HOUSES OF MULTIPLE OCCUPANCY (HMO'S)

17.1 All policies details listed above will be applied. In addition to these, all licensed HMOs and commercial premises that we manage:

- Will be fire risk assessed by a competent assessor, with periodicity determined by the fire risk assessment;
- Will have doors opening in the direction of escape;
- Will be supplied with appropriate, maintained extinguishers;
- Will have the fire evacuation procedure details relayed to relevant persons via the methods detailed in section 12.1 in the case of HMOs and via staff training for commercial premises.

17.2 Within commercial premises not managed by us, the responsibility for the completion of the fire risk assessment will fall upon the tenant. A copy of the completed fire risk assessment will be held by both the tenant and HHP.

## MONITORING & REVIEW

18.1 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance.

18.2 The Health and Safety Committee will monitor compliance on an annual basis and report performance to the Chief Executive in the first instance and then to the Audit and Risk Committee.

## REFERENCES


19.1 BS 5839-6:2013. Fire detection and fire alarm systems for buildings. Code of practice for the design, installation, commissioning and maintenance of fire detection and fire alarm systems in domestic premises

19.2 Building (Scotland) Regulations 2004 Domestic Technical Handbook (as revised)

19.3 The Electrical Equipment (Safety) Regulations 1994. Anyone who manufactures electrical equipment must comply with the Electrical Equipment (Safety) Regulations 1994. These implement into UK law the European Council Directive 2006/95/EEC - commonly referred to as the Low Voltage Directive (LVD). The aim of these regulations is to ensure that electrical equipment designed for use within certain voltage limits is safe to use.

19.4 Fire (Scotland) Act 2005. This deals with the law relating to fire prevention and safety, replacing old legislation, and modernising the operation of the Fire and Rescue Service.

19.5 Fire Safety (Scotland) Regulations 2006. These regulations came in to force on repealing all previous Fire Safety legislation, and placing a requirement on Scottish businesses to do a Fire Risk Assessment that looks at reducing and removing the risk of fire.

19.6 Health and Safety at Work etc. Act 1974. This act defines the fundamental structure and authority for the encouragement, regulation and enforcement of workplace health, safety and welfare within the United Kingdom.

19.7 Furniture and Furnishings (Fire) (Safety) Regulations 1988. These regulations are designed to ensure that upholstery components and composites used for furniture supplied in the UK meet specified ignition resistance levels and are suitable labelled.

19.8 Gas Safety (Installation and Use) Regulations. The statutory instrument that deals with the safe installation, maintenance and use of gas systems, including those within buildings.

19.9 1998 Health and Safety (Safety Signs and Signals) Regulations 1996. Safety signs and signals are required where, despite putting in place all other relevant measures, a significant risk to the health and safety of employees and others remains.

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *We* | *Hebridean Housing Partnership* |
| *Competent person* | *A person suitably trained and qualified by knowledge and practical experience, and provided with the necessary instructions, to enable the required task(s) to be carried out correctly.* |
| *Common Area* | *A common area is a portion of a property that is shared and used by multiple residents. This would include areas such as the lobby, stairway and hallway* |
| *Competent Person* | *person, suitably trained and qualified by knowledge and practical experience, and provided with the necessary instructions, to enable the required task(s) to be carried out correctly."* |
| *Dwelling* | *a house, flat, or other place of residence* |
| *Emergency Lighting* | *lighting provided for use when the supply to normal lighting fails* |
| *Fire Door* | *door or shutter provided for the passage of people, air or objects which, together with its frame and furniture as installed in a building, is intended (when closed) to resist the passage of fire and/or gaseous products of combustion, and is capable of meeting specified performance criteria to those ends* |
| *Alarm* | *device containing, within one house, all the components necessary for detecting smoke and for giving an audible alarm* |
| *Sprinkler System* | *a system comprising thermos-sensitive devices designed to react at a pre-determined temperature to automatically release a stream of water and distribute it in a specified pattern and quantity over a designated area* |
| *HMO* | *a house, premises or a group of premises with shared amenities, occupied by three or more persons from three or more families as their only or main residence."* |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

APPENDIX 3

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# Electrical Safety Policy

**Effective Date:** May 2022
**Review Date:** May 2025
**Approved by HHP Board:**

## TABLE OF CONTENTS

# ELECTRICAL SAFETY POLICY

## INTRODUCTION

1.1 Hebridean Housing Partnership is committed to maintaining the Health and Safety of employees, tenants and members of the public. We recognise the potential health risks associated with electrical safety in our homes.

1.2 We have a duty of care to ensure that electrical installations are safe and are maintained. This duty is discharged through periodic inspections and associated testing to check whether an electrical installation is in a satisfactory condition for continued service.

1.3. Periodic inspection and testing is necessary because all electrical installations deteriorate due to a number of factors such as damage, wear & tear, corrosion, excessive electrical loading, ageing and environmental influences.

## AIMS

2.1 The aim of this Policy is to ensure the effective inspection, maintenance and management of all electrical installations, fixtures and appliances within premises we control.

2.2 All electrical repair work and Electrical Installation Condition Reports will be subcontracted to an external competent body.

2.3 The procedures detailed within this section are intended to facilitate the effective management of electrical safety, ensuring that all reasonable steps are taken to comply with the Consumer Protection Act 1987 and the Electrical Equipment (Safety) Regulations 1994.

## ELECTRICAL CHECKS

3.1 We will ensure that all electrical installations, fixtures, fittings, and any electrical equipment provided, is safe, in a reasonable state of repair and in proper working order at the start of the tenancy and throughout its duration.

3.2 Visual inspections on all electrical appliances will be carried out by a competent person before a tenant moves in.

3.3 We will ensure that service contractors carrying out Electrical Installation Condition Reports (EICR) are registered through the National Inspection Council for Electrical Installation Contractors (NICEIC), the Electrical Contractors Association (ECA), National Association for Professional Inspectors (NAPIT) or other accredited body. Individual engineers working on electrical installations must be trained, competent and hold a relevant industry recognised qualification.

3.4 All works must be carried out in accordance with the Requirements for Electrical Installation IET Wiring Regulations 18th Edition BS7671:2018 (including all amendments)

3.5 The EICR will be carried out every five years.

3.6 We will retain a copy of the Electrical Installation Condition Report for six years. A copy of the most recent report will be issued to the tenant before a tenancy starts. If an EICR is carried out during a tenancy, a copy relating to that inspection will also be given to the tenant.

## PORTABLE APPLIANCES

4.1 We will take reasonable steps to ensure that all appliances (e.g. electric kettles, fridges, washing machines etc.) provided as part of the tenancy agreement are safe.

4.2 An appropriate portable appliance testing (PAT) regime is to be implemented for any appliances that we issued.

4.3 All portable appliances we issue will have the CE Mark, the British Standard Kitemark or the 'BEAB Approved' mark.

4.4 We will issue tenants with a copy of the manufacturer's instructions for all appliances provided.

## REPAIRS AND EMERGENCIES

5.1 Should any faulty equipment be observed, we will ask the tenant to take the item out of service until it is repaired or replaced.

5.2 We will use a competent service contractor to carry out repairs and emergency responses.

## TENANT RESPONSIBILITIES

6.1 Tenants will be issued with information leaflets on electrical safety.

6.2 Tenants will be advised to report any electrical faults immediately.

6.3 Tenants will be informed of any electrical items that are prohibited within our properties.

## MONITORING & REVIEW

7.1 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance.

## REFERENCES

8.1 British Standard BS7671:2018. "Requirements for Electrical Installations. IET Wiring Regulations", is the national standard in the United Kingdom for electrical installation and the safety of electrical wiring in domestic, commercial, industrial, and other buildings. The IET co-publishes BS 7671 with the British Standards Institution (BSI) and is the authority on electrical installation.

8.2 The Consumer Protection Act 1987. The act gives the right to claim compensation against the producer of a defective product if it has caused damage, death or personal injury. The act also contains a strict liability test for defective products in UK Law making the producer of that product automatically liable for any damage caused.

8.3 The Electrical Equipment (Safety) Regulations 1994. Anyone who manufactures electrical equipment must comply with the Electrical Equipment (Safety) Regulations 1994. These implement into UK law the European Council Directive 2006/95/EEC - commonly referred to as the Low Voltage Directive (LVD). The aim of these regulations is to ensure that electrical equipment designed for use within certain voltage limits is safe to use.

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *we* | Hebridean Housing Partnership |
| *Competent person* | A person suitably trained and qualified by knowledge and practical experience, and provided with the necessary instructions, to enable the required task(s) to be carried out correctly. |
| *EICR* | Electrical Installation Condition Reports |
| *NICEIC* | National Inspection Council for Electrical Installation Contractors |
| *PAT* | Portable Appliance Testing |
| *CE Mark* | Conformite Europeene certifies that a product has met the health, safety and environmental requirements of the European Union, thereby ensuring consumer and workplace safety |
| *IET* | Institution of Engineering and Technology |
| *ECA* | Electrical Contractors Association |
| *NAPIT* | National Association for Professional Inspectors |
| *BEAB* | British Electrotechnical Approvals Board |
| *BSI* | British Standards Institution |
| *UK* | United Kingdom |
| *EEC* | European Economic Community |
| LVD | Low Voltage Directive |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

hebridean housing partnership


# Play Areas Policy

**Effective Date:** May 2022
**Review Date:** May 2025
**Approved by HHP Board:**

## TABLE OF CONTENTS

# PLAY AREAS POLICY

## INTRODUCTION

1.1 We are committed to maintaining the Health and Safety of employees, tenants and members of the public. We recognise the potential health risks associated with play areas which we wholly own within our schemes.

1.2 We have a duty of care to ensure that play areas are safe and are maintained. This duty is discharged through periodic inspections to check that paly equipment is in a satisfactory condition for continued use.

1.3. Periodic inspection and testing is necessary because equipment can deteriorate due to a number of factors such as damage, wear & tear, corrosion and misuse.

## AIMS

2.1 All play areas will be visually inspected weekly using the approved inspection form specific to each play area.

2.2 An approved independent specialist will carry out an annual Safety Inspection for all play areas to ensure the long-term safety of the site, equipment and ancillary items. A written report will cover the site safety and condition, equipment, surfacing and ancillary item safety and condition and compliance with the requirements of EN1176 (the European Playground Standard) where relevant. Recommendations for any remedial action required will be given together with an assessment of the degree of risk.

2.3 The Assets and Contracts Manager will monitor reports and plan for repairs from both the weekly inspections and from the independent specialist. These reports will identify any capital improvements and replacements.

2.4 If serious defects that put safety at risk are found during any inspection, these should be corrected without delay. If this is not possible, the equipment must be immobilised, isolated or removed.

## INSPECTION

3.1 The annual inspection written report for each scheme is to be completed as a permanent record of the level of serviceability found.

3.2 Current play area sites are located at Gibson Gardens, Stornoway, Manor Drive, Stornoway and Mackenzie Park, Parkend.

## REPORTS FROM MEMBERS OF THE PUBLIC

4.2 Members of the public are to be encouraged to report any issues for remedial action as soon as they are noticed. This may be reported by a variety of methods i.e. telephone, letter, email or in person. Our Complaints Procedure will be followed obtaining sufficient information to enable remedial action to be undertaken according to the severity of the complaint.

## MONITORING & REVIEW

5.1 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *We* | Hebridean Housing Partnership |
| *EN1176* | European Norm Playground Equipment Standard |
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| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

hhp hebridean housing partnership


# Water Safety/ Legionella Policy (Self-contained units)

**Effective Date:** May 2022
**Review Date:** May 2025
**Approved by HHP Board:**

## TABLE OF CONTENTS

# WATER SAFETY/ LEGIONELLA POLICY

## INTRODUCTION

1.1 We have a legal responsibility to ensure we do all that is reasonably practicable to protect residents, employees, visitors and neighbours from health hazards arising from the use and distribution of water in all our rented self-contained properties.

1.2 Section 3(2) of the Health and Safety at Work etc. Act 1974 (HSWA) makes provision for relevant health and safety legislation to apply to landlords to ensure a duty of care is shown to their tenants' with regard to their health and safety.

1.3. The Control of Substances Hazardous to Health Regulations 2002 (COSHH) provides a framework of actions to control the risk from a range of hazardous substances, including biological agents (e.g. Legionella) - to identify and assess the risk, and implement any necessary measures to control any risk.

1.4 It is recognised by the HSE (HSG 274 Part 2) that for most residential settings, the risk assessment for legionella may show the risks are low and that simple, maintained control measures can help manage the risk of exposure.

1.5 This policy describes the process of risk management and minimum risk control measures for the water systems in accordance with the Health & Safety Executive's Approved Code of Practice (ACOP) and Guidance (Fourth Edition, Published 2013): Legionnaires Disease: The Control of Legionella Bacteria in Water Systems, commonly known and referred to as L8.

## AIMS

2.1 We promise to perform the following actions to control legionella within rented self-contained properties:

- Appoint responsible persons and provide adequate training for our employees.
- Identify all water plant and systems which present a potential risk of exposure to Legionella bacteria.
- Arrange for Legionella Risk Assessments on all the water systems on a representative proportion of our rented self- contained properties and to review these assessments annually and/or when significant changes occur. This risk-based approach shall take into account house types; year of construction; year of upgrade works; heating systems and cold water storage to ensure that the representative approach reflects our stock.
- Eliminate or reduce risks whenever possible by the procurement of plant, equipment and systems which have been designed to eliminate or control the risks of exposure to Legionella Bacteria.

- Establish and operate a written management process for reducing risks from Legionella bacteria in our self-contained properties which reflect the proportional approach to assessing properties.
- Monitor compliance with the management process and review risks and the performance of the risk control measures, revising risk assessments and management processes as required.
- Maintain comprehensive records for each property as assessments are undertaken.
- Employ only competent, adequately qualified and trained personnel and service providers.

2.2 We will carry out sample inspections to determine controls required to keep tenants safe by checking:

- cold water storage tanks and ensuring the lids fit tightly
- identify and remove redundant pipework
- check heating controls so that water can be stored at 60°C unless there is a legionella function

2.3 We will provide advice on how to reduce the risk of legionella by explaining to tenants how to:

- clean showers and shower heads
- flush out cold water systems regularly
- keep hot water safely stored at 60°C were system allows
- flush out water from bath taps

2.4 We will reduce the risk of legionella through our Investment work by:

- removing cold water storage systems when heating, kitchen and bathroom works are planned
- removing redundant pipework when heating, kitchen and bathroom works are planned
- installing hot water heating systems that store heat at 60°C or have a legionella function
- ensuring expansion vessels are safe which could include installing an anti-legionella valve
- servicing a proportion of thermostatic mixing valves annually in accordance with manufacturer's instructions.

## MONITORING AND TESTING

3.1 The extent of monitoring is determined through categorisation of premises and water systems together with the risk assessment process described within this document.

3.2 Where legionella monitoring is identified as a requirement it will be agreed by the Assets and Contracts Manager.

## PROPERTY CATEGORISATION

4.1 We will co-ordinate with our nominated water consultants to determine the correct procedures for minimising legionella within the various water system types and sizes installed within our property portfolio.

4.2 The actual level of risk will be dependent on a number of factors including system design, operation, condition, maintenance and susceptibility of building occupants. It is important to establish the written control scheme and any requirements for remedial measures such as cleaning and disinfection, equipment removal or replacement.

4.3 As part of ongoing monitoring, any change in tenant circumstance should be communicated to the Assets and Contracts Manager to enable a review of the risk of legionella, and potentially the monitoring requirement.

## IDENTIFICATION & ASSESSMENT

5.1 Our housing schemes are traditionally small in number and water systems can vary. We will therefore carry out risk assessments on a proportionate sample of our self-contained properties based on property type and system type in order to ensure all water systems for each scheme are covered.

5.2 Our Property Services team has responsibility for completing site surveys, risk assessments and for the preparation of site specific written control procedures, recording of systems and programming of maintenance and monitoring for each property allocated to them.

5.3 Risk assessments will be carried out when properties are void. A completed copy of the risk assessment and written control scheme shall be located within the Water Management Database.

5.4 Where specialised services are required, such as cleaning and disinfection, we will procure these.

5.5 Future water quality monitoring requirements will be coordinated by the Assets and Contracts Manager. Risk assessments will be reviewed every 2 years or more frequently if changes occur to building water services and / or occupancy in accordance with ACOP L8 guidance.

## TRAINING

6.1 We will ensure that all staff involved in the management and implementation of the risk control programme are trained and competent in the duties they are required to undertake.

6.2 We will engage the services of a nominated water consultant to provide training on Legionella awareness and management

6.3 The nominated water consultant will carry out checks on the legionella risk assessments and written control measures carried out by staff.

## DOCUMENTATION & RECORDS

7.1 We will maintain records of risk assessments and works carried out in the Water Management database.

7.2 The Water Management database will be compiled and maintained by the designated officer.

7.3 The level of documentation provided will be dependent on system category following the format noted below:

*Site Information*

- Risk Management Process.
- Risk Assessment Report and Survey Forms.
- Schematic drawing(s) if available.
- Written Control Procedure.
- Training Records.

**ALL RECORDS WILL BE KEPT FOR A MINIMUM OF FIVE YEARS**

## MAINTENANCE

8.1 We will regularly seek guidance from our nominated water consultants on the current best practice for regular maintenance of all our water systems. This will include:

- Cold water storage tanks
- Water heaters and/or calorifiers
- Showers
- Thermostatic Mixer Valves (TMV)
- Details of commissioning and de-commissioning procedures
- Voids

8.2 The monitoring or de-scaling of showers within individual rented properties will be deemed to be the responsibility of the tenant, who will be informed / issued with guidance on the controls they can easily take to reduce the risk. Care will be taken where the tenant may be vulnerable and / or incapable of carrying out the controls identified.

8.4 New or refurbishment projects that involve work to the water services will ensure that water systems are changed from stored to mains supplied.

8.5 During voids we will take the opportunity to ensure that legionella is reduced by carrying out preventative works.

## LEGAL REQUIREMENTS

9.1 Legislation in the United Kingdom in relation to exposure to hazardous substances including biological agents such as legionella bacteria is contained within The Control of Substances Hazardous to Health (COSHH) regulations. Under the COSHH regulations the employer has a duty to ensure that health risks associated with hazardous substances including micro-organisms such as legionella bacteria are adequately controlled in the workplace by a process of risk assessment and management control.

9.2 Further legal requirements are described in the Health & Safety Executive's Approved Code of Practice (ACOP) and Guidance (Fourth Edition): Legionnaires Disease: The Control of Legionella Bacteria in Water Systems (L8) which came into effect on the 25 November 2013.

9.3 Although failure to comply with any provision of the Approved Code of Practice is not in itself an offence, failure may be taken by a court in criminal proceedings as proof that a person or organisation has contravened the legal requirement to which the provision relates. In such a case, however, it will be the person or organisation that must satisfy the court that compliance with the requirements has been achieved in some other way. The ACOP sets out guidance to satisfy the relevant legislative requirements under COSHH, which include:

- appoint a competent person for day-to-day management.
- identification and assessment of risk.
- preparation of a written scheme for prevention or controlling the risk.
- management and the selection, training and competence of personnel.
- record keeping.
- responsibilities for designers, manufacturers, importers, suppliers and installers.

9.4 L8 ACOP was revised and republished in November 2013 and retained the guidance on the requirements of HSWA and COSHH for employers and those with responsibilities for the control of premises including landlords (L8 ACOP, paragraphs 1 and 2). It applies to the control of Legionella bacteria in any undertaking involving a work activity and applies to premises controlled in connection with a trade, business or other undertaking where water is used or stored and there is a reasonably foreseeable risk of exposure to Legionella bacteria (L8 ACOP, paragraph 22).

## MONITORING & REVIEW

10.1 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance.

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *HHP or Partnership* | Hebridean Housing Partnership |
| *HSWA* | Health and Safety at Work etc. Act 1974 |
| *COSHH* | Control of Substances Hazardous to Health Regulations 2002 |
| *HSE* | Health and Safety Executive |
| *ACOP* | Approved Code of Practice |
| *L8* | Legionnaires Disease: The Control of Legionella Bacteria in Water Systems |
| *deg C* | Degrees centigrade |
| *TMV* | Thermostatic Mixer Valves |
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| | |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

hebridean housing partnership


# Office Fire Safety Policy

**Effective Date:** May 2022
**Review Date:** May 2025
**Approved by HHP Board:**

## TABLE OF CONTENTS

# FIRE SAFETY POLICY

## INTRODUCTION

1.1 It is the policy of Hebridean Housing Partnership to ensure that all employees, visitors and contractors are protected from the risks of fire. In order to achieve this aim, appropriate fire prevention/precaution measures shall be taken; additionally, appropriate evacuation procedures have been developed, implemented and periodically tested. All persons shall be provided with appropriate fire awareness training and instruction. All premises shall comply with relevant fire safety legislation and recognised good practice standards and guidance.

1.2 This policy is prepared in order to comply with Part 3 of the *Fire (Scotland) Act 2005* and *The Fire Safety (Scotland) Regulations 2006*.

## PROCEDURES AND GUIDANCE

General Instruction

2.1 All staff must be familiar with the fire procedures as required by the Fire (Scotland) Act 2005 and The Fire Safety (Scotland) Regulations 2006.

2.2 Our staff operate from a number of offices and other buildings. Fire procedures are posted throughout these premises and can be found on exit routes normally adjacent to fire alarm call points or portable fire equipment where applicable.

2.3 All staff are required to ensure that they are familiar with the exits and the alternative means of escape in case of fire by walking the routes from the areas in which they are employed. Occupants should know their assembly points which are listed at Appendix 1.

2.4 If you have to evacuate the premises:

- exit quickly and calmly;
- go directly to open air and proceed to the assembly point;
- close the door behind you;
- Do not enter an adjacent building;
- Do not stop to collect bags;
- Do not use lifts; and
- Do not attempt to fight a fire unless you have been specifically trained to do so.

2.5 Any staff not at their usual work location on hearing the evacuation alarm must leave the building and go to the assembly point. On no account must they return to their usual work location prior to evacuating the building.

2.6 Break glass fire alarm call points can be found at the Stornoway and Balivanich offices. Their locations are shown at Appendix 2.

2.7 The location of portable fire extinguishers are sited adjacent to storey and final exits and other strategic locations throughout the premises. Their locations are shown at Appendix 2.

2.8 Emergency light fittings are located in each office.

Fire Safety

2.9 Fire safety is everyone's responsibility. All employees, visitors and contractors are expected to follow established safety procedures to ensure the safe use of electrical/gas appliances, the safe use, storage and disposal of hazardous/combustible materials and compliance with the requirements of our Smoking Policy.

<u>Fire Precautions</u>

2.10 Fire doors must be kept closed at all times to maintain compartmentalisation of the building and to prevent the spread of fire and/or toxic smoke.

2.11 Corridors, stairways, landings and escape routes must be kept clear at all times of anything that is likely to cause a fire or accident or to impede evacuation in an emergency.

2.12 Hazardous materials must be stored, used and disposed of in accordance with all legal requirements and safe working practices. This also applies to materials kept by the Handyman Service in their garages and stores. The inventory and location of these substances should also be kept up to date on the COSHH register.

2.13 All fire-fighting equipment must be kept free from obstruction, be visibly conspicuous and readily available for use in an emergency. Portable fire-fighting equipment must not be removed or repositioned without authority from the Corporate Resources Officer.

2.14 Any obvious or suspected damage to, or misuse of, a fire alarm or fire-fighting equipment must be reported to the Corporate Resources Officer.

<u>Housekeeping</u>

2.15 The following general housekeeping rules shall be applied by all staff:

- The photocopier/IT area shall be maintained in a safe and tidy condition;
- All paper/documents/drawings shall, as far as practicable, be secured in storage cabinets when not in use and at the end of each working day. To ensure that storage space is not wastefully used, full use of the archiving system shall be made; and
- Both the Stornoway and Balivanich offices have been designed for use by multiple occupants. No equipment or other hazardous materials should be stored in corridors, access ways or under stairs.

<u>Electrical Equipment</u>

2.16 We have in place a system of regular inspections of portable electrical appliances on all HHP-owned electrical equipment and any faults found are rectified or the item of equipment replaced.

2.17 We reserve the right to carry out such regular inspections on non-HHP owned electrical equipment (e.g. desk fans, charger units, etc) used on the premises.

<u>Fire Extinguishers</u>

2.18 Fire extinguishers are located in the vicinity of all fire exits and must only be used by staff who are trained to use them.

2.19 Do not attempt to fight a fire with extinguishers unless you are certain that you can put it out. If you do use an extinguisher make sure that you have a clear exit behind you. Your main priority should be to evacuate the building.

2.20 There are two types of extinguishers in the offices, both have red bodies but are clearly labelled.

- Water, for use on wood, paper and textile fires (red label)
- Carbon Dioxide, for electrical, metal and flammable liquid fires (black label)

Fire Action Procedure

2.21 Any person suspecting or discovering a fire shall:

- Raise the alarm by breaking the glass of the nearest fire alarm call point; and
- Follow the procedures below "on hearing the fire alarm".

2.22 Any person hearing the fire alarm shall:

- Leave the building by the nearest available exit route – DO NOT USE LIFTS;
- Close all doors (and windows where safe to do so) behind you as you leave;
- Leave the building calmly – DO NOT RUN;
- Go directly to your assembly point designated for the building;
- Never re-enter the building until instructed to do so by a Fire Marshall or the Senior Fire Officer attending; and
- Never re-enter the premises while the alarm is still sounding.

2.23 Instructions given by the nominated staff (Fire Marshall) must be followed and breaches of these procedures will be considered serious and will be dealt with under our Disciplinary Procedures.

Contacting the Fire and Rescue Service

2.24 The Fire Marshalls are the nominated persons for establishing contact with the Fire and Rescue Service. (This action will require to be co-ordinated, by the Corporate Resources Officer or the Senior Fire Marshall present, to ensure that a call is actually made to the Fire and Rescue Service). In the event of a fire alarm being raised they are responsible for accessing the fire alarm panel, contacting the Fire and Rescue Service and undertaking the following procedures:

1. Dial 999, provide the Operator with the premises telephone number and request the Fire Service; and
2. When the Fire Service answers, provide the following message distinctly:
    - There is a fire at XXXXXXXXXX;
    - Inform them of the location of the fire within the building;
    - Advise them if all persons are out of the building and accounted for; and
    - Do not replace the receiver until the address has been repeated by the Fire Service.

2.25 Thereafter the Fire Marshals will be responsible for liaising with the Fire and Rescue Service.

Roles and Responsibilities

2.26 Within HHP a number of personnel have defined responsibilities relating to fire and safety which are detailed at Appendix 3.

Chief Executive

2.27 The Chief Executive assumes overall responsibility for the generation, administration and implementation of our Fire Safety Policy. The Chief Executive may delegate any or all of their responsibility to another person with sufficient and appropriate experience/knowledge.

2.28 The Chief Executive shall:

| Task | Delegated to |
|---|---|
| Be directly responsible for the establishment and maintenance of an effective Fire Safety Plan (see Appendix 2), take a direct interest in such a Plan and publicly support those to whom she delegates responsibility for Fire Safety | Corporate Resources Manager |
| Ensure the Fire Service is contacted in the event of a fire or fire alarm being raised | Corporate Resources Manager |
| Provide adequate funds and resources to meet the Fire Safety requirements | Corporate Resources Manager |
| Ensure that all liability is covered by insurance as appropriate, and renew insurance and loss records annually | Corporate Resources Manager |
| Ensure that responsibility is properly assigned and accepted at all levels | Corporate Resources Manager |
| Ensure that an annual fire drill is carried out at each office in co-ordination with other building users | Corporate Resources Manager |
| Ensure that an audit of the Fire Safety Policy is carried out annually | Corporate Resources Manager |
| Maintain, and periodically update, an effective Fire Safety Policy for the Company | Corporate Resources Manager |
| Monitor the effective operation of maintenance contracts for Fire Safety Systems and Equipment | Corporate Resources Manager |
| Ensure that manual checks are carried out in accordance with the Fire Safety Policy requirements and ensure the following checks are carried out | Corporate Resources Manager |
| Fire extinguishers – monthly visual inspection and annual maintenance inspection | Corporate Resources Manager |
| Fire alarm – weekly | Corporate Resources Manager |
| Emergency lighting | Corporate Resources Manager |
| Appoint and allocate areas for each of the Fire Marshals. | Corporate Resources Manager |

## EVACUATION PROCEDURES FOR THE DISABLED

3.1 Wherever possible HHP will collect and record any tenant or applicant vulnerability so that staff can be aware of any additional communication or other steps they may require to carry out in order to assist and serve an in-office visit or telephone enquiry. This should assist the staff member in dealing with a disabled visitor in an appropriate way should a fire occur.

Wheelchair users – personal assistant in attendance

3.2 On hearing the fire alarm the personal assistant in attendance should proceed with the wheelchair user to the assembly point applicable to the office.

Wheelchair Users

3.3 The wheelchair user should make themselves known to a Fire Marshall, who will ensure that they are removed safely from the building to the assembly point.

Deaf/Hearing Impaired Persons

3.4 There are no visual fire alarm signals within the HHP offices. Deaf or hearing impaired occupants are encouraged, by appropriate signage in our Customer Service areas, to advise an appropriate member of staff of this fact when they visit the office, so that they can be notified of any alarm.

Blind/Visually Impaired Persons

3.5 Blind/visually impaired staff will be specifically shown how to physically locate evacuation and assembly points in the office and should make special arrangements with their Team Leader or Fire Marshall for their evacuation in the event of a fire.

Blind or visually impaired visitors should advise an appropriate member of staff of this fact when they visit the office, so that they can be assisted in the event of a fire.

Evacuation Drills

3.6 In accordance with fire safety legislation, fire evacuation drills will be carried out by HHP at least annually.

3.7 The drills will monitor the effectiveness of the local evacuation procedures and, where necessary, identify required changes. They will also time the evacuation and compare the time to a previously determined acceptable time for the particular building, based on national standards and accepted good practice. (See Appendix 4) In cases where the evacuation takes longer than the expected time, a second drill may be carried out at a later date.

3.8 Reports on the effectiveness of drills will be presented by the Chief Executive. Appropriate feedback information will also be published and distributed to staff.

Fire Marshalls

3.9 Fire Marshalls will be familiar with all the exit points for their area and will direct staff and visitors towards the most appropriate available exit.

It must be stressed that Fire Marshalls are not trained to be fire fighters.

3.10 In the event that a fire alarm sounds, Fire Marshals are to:

- direct staff and visitors towards the nearest available exit;

- maintain a steady flow of people evacuating the building and preventing "bottlenecks" building up by redirecting staff and visitors towards other available exits as necessary (so that they are not placed at risk);
- ensure (as far as is reasonably practicable) that the floor is clear or is actively evacuating;
- leave the building themselves by the nearest available exit;
- carry out a roll call of staff present and to identify staff who are off-site or unaccounted for;
- report to the Corporate Resources Officer or the Senior Fire Marshall present on the status of their area (using a predetermined short checklist);
- maintain an up to date Fire Register;
- keep their Team Fire Pack in a readily accessible location and ensure it contains the following:
    - fire procedure;
    - fire escape plans; and
    - clipboard and pencil.

<u>Employees</u>

3.11 It is the duty of every employee to:

- notify their line manager or team of their location and expected time of return if they are away from the office;
- comply with the building evacuation procedure;
- upon hearing the fire alarm (except for the weekly test), proceed to the assembly point, ensuring their visitors, when present, accompany them;
- comply with instructions from Fire Marshals;
- report any violation of fire safety policy to either the Corporate Resources Officer or a Fire Marshall.

<u>Training, Instruction and Information</u>

3.12 All new employees shall be given local fire safety induction training by their Team Leader (or other appropriate person) in the first month of employment. This will include identification of escape routes, location of fire extinguishers and call points, where the assembly point is and any local hazards that they need to be aware of.

3.13 All employees shall be given general fire safety awareness at least every two years by an appropriate person approved by the Chief Executive.

3.14 The Chief Executive should ensure that Fire Marshalls have been appointed, and have each been trained to an appropriate level.

3.15 The Evacuation Procedures and the Assembly Point location shall be displayed at strategic points throughout the buildings.

<u>Fire Risk Assessments</u>

3.16 In accordance with Part 3 of the Fire (Scotland) Act 2005 and The Fire Safety (Scotland) Regulations 2006 fire risk assessments shall be organised and/or carried out by the Chief Executive (or representative). The risk assessments shall be amended as necessary when circumstances require it (e.g. building changes). The risk assessments shall be reviewed at least annually to ensure their on-going relevance and adequacy.

Housing Stock

3.17 Fire safety within the housing stock will be addressed through the Landlord Fire Safety Policy, and any associated policies, such as the Repairs & Maintenance and Gas Safety Management policies.

## MONITORING & REVIEW

Monitoring and Audit

4.1 Team Leaders and Fire Marshalls shall, as part of their day-to-day duties and during inspections, ensure that fire safety precaution and prevention measures are in place and are working as they are intended to. Any deficiencies observed shall be reported to the Corporate Resources Officer for remedial action.

4.2 An annual report will be prepared for the Chief Executive on the operation of the policy by the Corporate Services Manager. The report will be prepared in April each year.

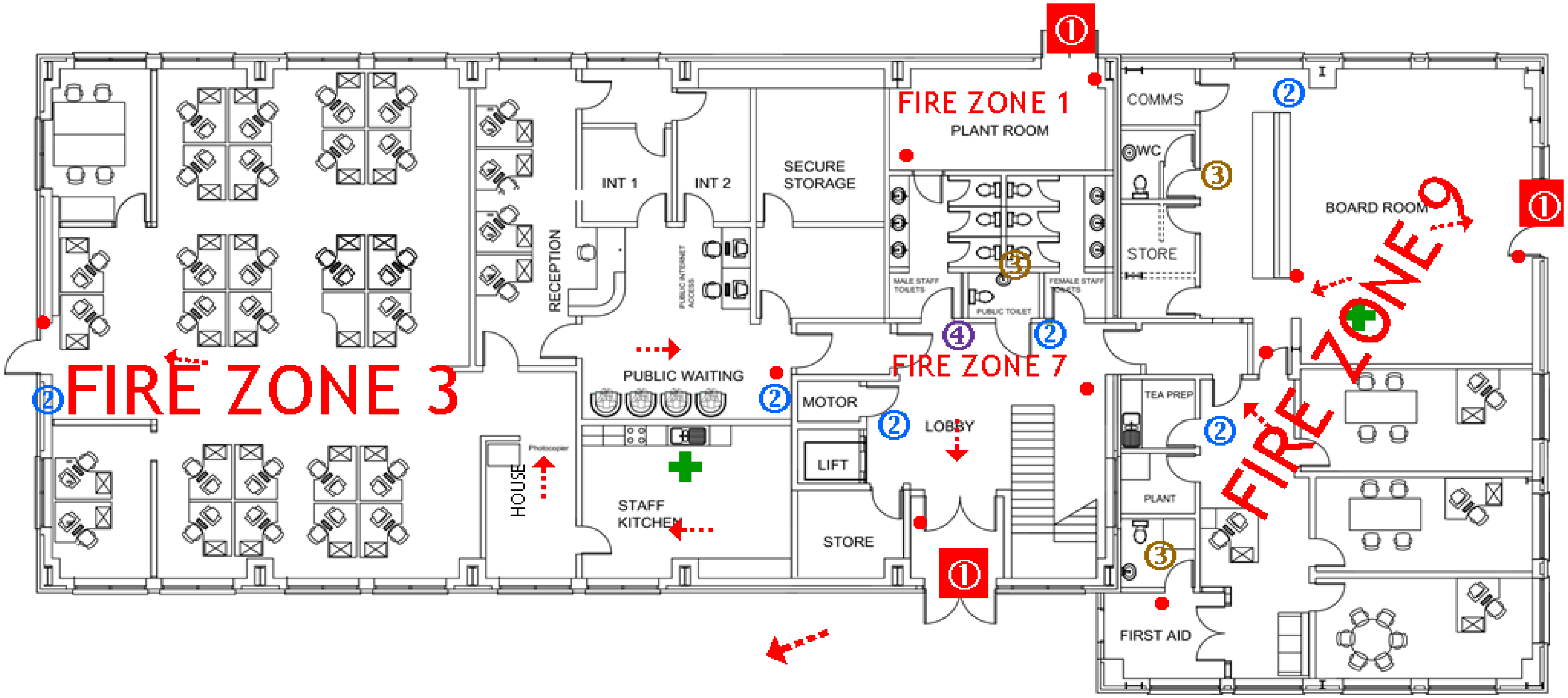
4.3 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance.

4.4 The appendices will be reviewed and updated to reflect any changes in staff and/or working patterns.

**APPENDIX 1 – FIRE ASSEMBLY POINTS**

| | |
|---|---|
| Creed Court Stornoway | Car park at front of building |
| 17 Winfield Way, Balivanich | Car park at front of building |
| Garage 1, Tindill Road, Balivanich | Grass area at front of building |
| Garage 2, Tindill Road, Balivanich | Grass area at front of building |
| Garage 6, Columbia Place | Driveway at front of garages |
| Garage1, Macqueen Street, Tarbert | Road at front of garages |

## APPENDIX 2 – FIRE CALL POINT & FIRE EXTINGUISHER LOCATIONS



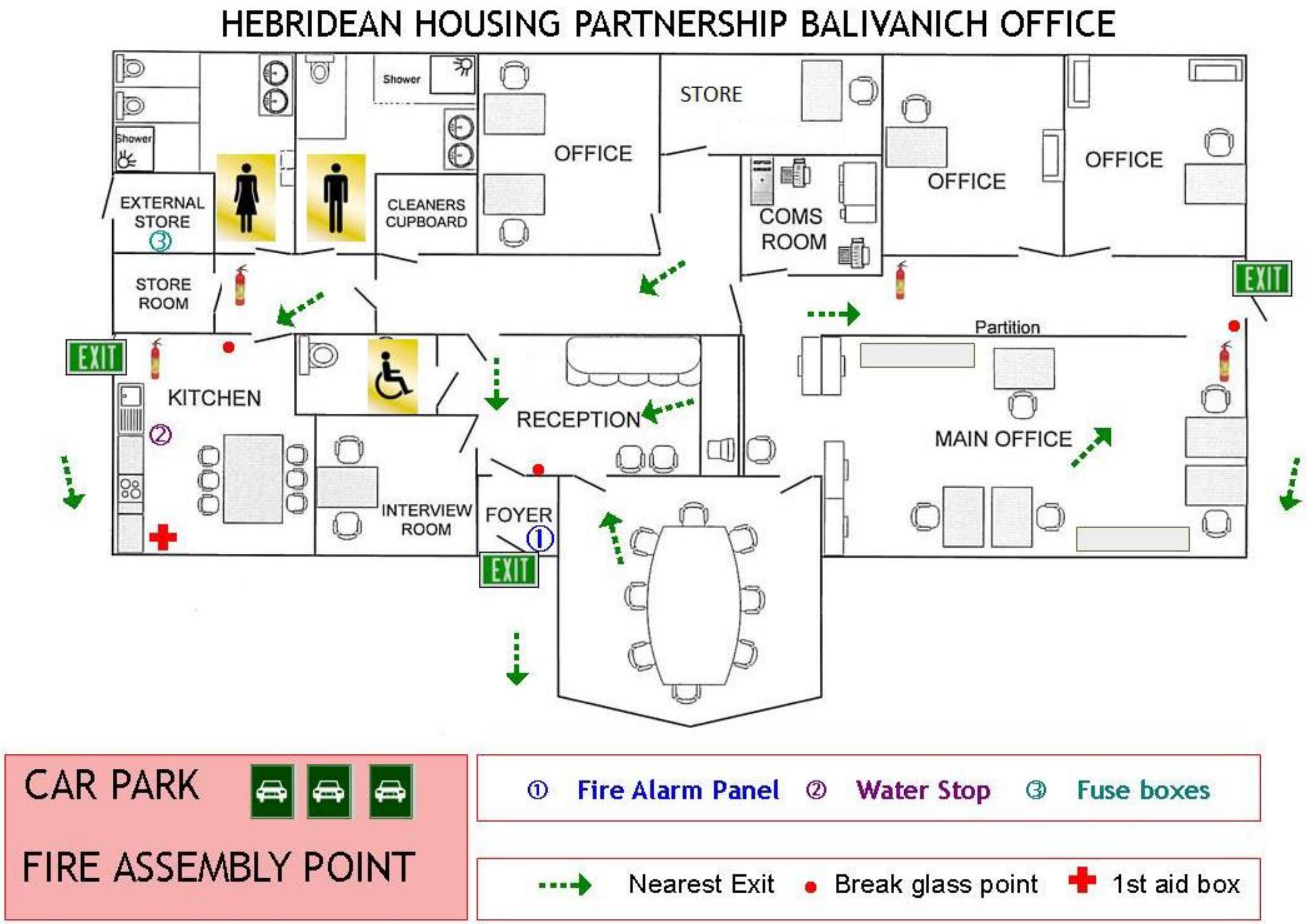

CAR PARK

FIRE ASSEMBLY POINT

FIRE ZONE 3 – MAIN OFFICE
FIRE ZONE 1 - BACK BOILER ROOM
FIRE ZONE 7 – MAIN FOYER & TOILETS
FIRE ZONE 9 – EXECUTIVE AREA

① Exits ② Fire Extinguisher ③ Toilets ④ Fire Alarm Panel

Nearest Exit ● Break glass point 1st aid box




The other properties will be completed once the Fire Risk Assessments have been carried out.

**APPENDIX 3 – FIRE MARSHALLS AS AT 20.04.2022**

Stornoway Office

Angus Smith – Corporate Resources Manager

Shona Matheson/Alick Maclean – Corporate Resources Officer

Mina Maclean – Allocations Officer

Jackie Macleod – Personal Assistant

Nataliya Nedkova – Customer Services Supervisor

Iona France – Corporate Governance Officer

Garage 6, Columbia Place

Alex John Macleod - Harris Handyman

Garage 1, Macqueen Street, Tarbert

Alex John Macleod – Harris Handyman

Uist Office*

Katie Walker – Area Manager

Norman MacAskill – Clerk of Works

Linda Johnson – Housing Officer

Aaron Mason-Gullick – Allocations Assistant

*Given the operation and work practices of this office, we would expect any two from the above marshalls to be present during office opening hours.

Garage 1 & 2 Tindill Road, Balivanich

John Currie – Uist Handyman

**APPENDIX 4 – EVACUATION TIMES**

Current evacuation time target:

Stornoway Office – 3 minutes

Balivanich Office – 2 minutes

These are based on national standards and accepted good practice.

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *HHP or Partnership* | Hebridean Housing Partnership |
| *Board* | Means the Board of the Hebridean Housing Partnership |
| *Board Members* | All Members of the Board including co-opted Members |
| *COSHH* | Control of Substances Hazardous to Health |
| *PAT* | Portable Appliance Testing |
| *Fire Service* | Scottish Fire and Rescue Service |
| *Fire Marshall* | A person who helps makes sure that employees leave a building safely if there is a fire |
| *Team Fire Pack* | Collection of documents and equipment to be used in association with an evacuation process. |
| | |
| | |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

APPENDIX 7

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# Managing Violence & Aggression at Work Policy

**Effective Date:** May 2022
**Review Date:** May 2025
**Approved by HHP Board:**

## TABLE OF CONTENTS

# MANAGING VIOLENCE & AGGRESSION AT WORK POLICY

## INTRODUCTION

1.1 This policy sets out our response to any violent or aggressive behaviour involving employees, contractors and visitors.

1.2 In accordance with its responsibilities for the Health and Safety (H&S) of employees, we will apply a zero tolerance approach to violence and aggression against employees, and will take all reasonably practicable steps to prevent violence in the workplace.

1.3 These will include the provision of safe systems of work, suitable protective equipment and appropriate training.

1.4 Where incidents of violent behaviour from members of the public take place, we will provide appropriate support and help to the victim.

1.5 We will take appropriate action against anybody threatening verbally or physically or committing violent acts against employees or visitors on any sites or premises from which the organisation operates or against employees going about their lawful duties.

## AIMS

2.1 Prevention of violence and aggression is the key aim of this policy, whether it is in person, on telephone calls or through correspondence and other electronic communication. It is accepted that violence and aggression may occur during the course of an employee's duty but we do not consider that it should be accepted as part of the job.

2.2 Our aims are to provide the best possible service to promote and maintain the good health of the people the policy serves. Our tenants, housing applicants and visitors can expect to be treated with respect whilst employees working for or with HHP are entitled to work without fear of abuse or violence.

2.3 Violence is not accepted as an inevitable occupational hazard but as an aspect of challenging behaviour that can be anticipated, reduced and managed to minimize the risk of reoccurrence.

2.4 We will regularly review and update procedures for the assessment of the potential risk of violence in respect of each job within their area of responsibility.

2.5 We will also take appropriate steps to provide employees with the equipment and training to minimise incidents, and to prevent their escalation, with the emphasis on reducing tensions without physical intervention.

## IMPLEMENTING THE POLICY

3.1 The Chief Executive has overall responsibility for the implementation of this policy.

3.2 Procedures relating to the implementation, monitoring and enforcement of the Policy will be developed and maintained by the Health & Safety Committee as required.

3.3 Day-to-day responsibility for the implementation of this policy lies with line managers but all employees are obliged to adhere to, and facilitate the implementation of the policy in the workplace.

3.4 Employees are requested to record all incidents (including verbal abuse, threats and actual physical assault), whether large or small, accurately and as soon as possible. Statements should also be taken from witnesses where appropriate.

3.5 Information will be collated with a view to assessing the scale and nature of the problem on a company-wide basis, and coordinating a response.

3.6 All incident findings will be considered and reflected in future risk assessments in relation to staff safety as well as good practice procedures.

3.7 All employees are reminded of their duty not to endanger themselves or their colleagues. In particular, they are warned against using provocative language or gestures towards members of the public.

3.8 While attempting to prevent an act of violence no employee should risk his or her life or the lives of others.

3.9 In an emergency, employees should dial 999 and ask for the Police.

3.10 The senior manager on site is authorised to take whatever immediate action he believes necessary in order to deal with a violent incident.

3.11 We will inform the appropriate enforcing authority when a reportable incident occurs. We will also, in relation to incidents involving our customers, write to them informing them that they have been flagged as being a visit risk. This risk flag will be used to inform us and those working on its behalf as to future visit protocol. The flag will remain in place until we are satisfied that the risk is no longer significant. This will be reviewed on an annual basis.

3.12 Managers, after appropriate consultation, will prepare a report on the incident and make recommendations for immediate action, where applicable, to the Health & Safety Committee.

3.13 Report forms will be analysed by the Health & Safety Committee and incidents classified in order to build up a picture of violent occurrences from which lessons may be drawn. When a pattern of violence emerges, the Health & Safety Committee will make recommendations as a priority to the Executive Team.

3.14 Where the need for preventive action is identified, the organisation will take all practicable steps to achieve a safer workplace. These may include:

a) measures to improve the system of work;

b) provision of additional protective equipment;

c) provision of alarm systems;

d) reorganising the job to lessen the risk of violence;

e) transferring the employee, after consultation;

f) redesigning work areas;

g) increased training in avoiding and handling violent situations; and

h) reassessment of staffing levels.

3.15 Employees and their representatives are requested to co-operate fully in planning and executing any changes considered necessary to safeguard the workforce.

3.16 All employees who are working away from base must observe safe practices (as detailed in the Lone Working Policy and its procedures) and not put themselves at risk from violent attack.

3.17 When keeping an appointment away from the office, employees must check the identity and risk status of the person they are going to meet and leave his details and telephone number with their line manager, together with details of the time and place of the meeting.

3.18 When travelling on the organisation's business, employees should not carry more cash than is necessary.

3.19 Employees should not travel alone when transporting cash or valuables, if the value of the cash or valuables exceeds the thresholds laid down in our insurance policies which are updated annually. (See Appendix 1) A regular pattern of bank visits should also be avoided.

3.20 Employees must on no account give lifts to hitchhikers while travelling on the organisation's business.

3.21 Where necessary, personal alarms and mobile telephones will be provided by the organisation.

3.22 Employees should not hesitate to call the Police to a violent incident or to consult them if they are worried about the possibility of attack while away from the office.

3.23 Where employees are travelling during their working day, systems will be established whereby the location of individuals at any particular time can be determined; this may include the requirement to report to a central point at the end of an appointment or working day. Such systems must be strictly adhered to. (See Lone Working Policy and Procedures)

3.24 In the case of employees whose families are believed to be at risk because of their position, the organisation will consult security experts and take appropriate action to safeguard the people concerned.

3.25 Not all violent incidents are unavoidable. With effective training employees can learn to defuse potentially violent situations and to minimize risk.

3.26 Training in appropriate techniques will take place on a regular basis from induction onwards.

3.27 Employees are expected to display a sympathetic and supportive attitude towards victims of violence.

3.28 Where an employee suffers injury or illness as a result of violence in the course of employment which necessitates time off work, the sick pay scheme may be extended at the discretion of the Chief Executive.

3.29 Counselling or referral to a counselling service will be offered by HHP, if appropriate.

3.30 Guidance and help with legal action, where applicable, will be provided.

3.31 All proposals relating to measures to reduce the risk of violence will be discussed by the Health & Safety Committee. Where urgent action is necessary the Executive Team will take the appropriate steps and consult with the Health & Safety Committee as soon as possible.

## MONITORING & REVIEW

4.1 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance

## APPENDIX 1 – MAX VALUE OF MONIES TO BE TRANSPORTED BY HHP STAFF

The current 2022/23 limits of our insurance policy are:

- In transit or whilst in Bank Night Safe - £3,000

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *HHP or Partnership* | Hebridean Housing Partnership |
| *Board* | The Board of the Hebridean Housing Partnership |
| *Board Members* | All Members of the Board including co-opted Members |
| *Physical Violence* | The intentional application of force to the person of another, without lawful justification, resulting in physical injury or personal discomfort. Examples include - assault causing death; assault causing serious injury; minor injuries; kicking; biting; punching; use of weapons; use of missiles; spitting; scratching; sexual assault; deliberate self-harm. |
| *Non-Physical Assault* | The use of inappropriate words or behavior causing distress and/or constituting harassment. Examples include - verbal abuse; racial or sexual abuse; threats – with or without weapons; harassment or stalking; physical posturing; threatening gestures; abusive phone calls; threatening use of dogs; swearing; shouting; name calling; bullying; insults; innuendo; deliberate silence. |
| *Health & Safety Committee* | All Members of the Committee |
| | |
| | |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

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# Vulnerable Consumers Policy

**Effective Date:** March 2019
**Review Date:** March 2022
**Approved by HHP Board:**

## TABLE OF CONTENTS

# VULNERABLE CONSUMERS POLICY

## INTRODUCTION

1.1 All organisations which hold a Financial Conduct Authority (FCA) licence are required to have a Vulnerable Consumers Policy. Typically, such policies would be used by banks, building societies and insurance companies to regulate how they deal with vulnerable consumers, but it is equally important that organisations such as ourselves have policies in place which set out how we deal with various types of consumer vulnerability that we may encounter as a Registered Social Landlord (RSL).

## AIMS

2.1 The aims of our Vulnerable Consumers Policy are to:

a) ensure that we deal fairly and effectively with vulnerable consumers;

b) ensure that a consistent approach to vulnerable customers is embedded across all operations;

c) ensure that staff engaged in debt recovery have sufficient training and understanding to deal with vulnerable consumers effectively, including the skills to encourage disclosure from potentially vulnerable consumers;

d) ensure that we work in cooperation with vulnerable customers and their carers/representatives while at all times being fully compliant with data protection requirements;

e) encourage an organisation-wide commitment to tackling and 'doing the right thing' for vulnerable consumers;

f) develop a culture where staff are encouraged to understand and empathise with vulnerability;

g) place an emphasis on training all staff who deal directly with customers to know enough about vulnerability to pick up on warning signs and triggers and refer on appropriately;

h) develop intelligent signposting. It will not be the role off our staff to be experts at dealing directly with all forms of vulnerability that they encounter, but if a vulnerability is identified the customer shall be referred to the right sort of expert help in the most practical way; and

i) develop and maintain contacts with partner agencies with a remit to assist dealing with the various vulnerabilities that we may encounter.

## RISK FACTORS FOR CONSUMERS OF FINANCIAL SERVICES

3.1 The following risk factors are not exhaustive, but summarise the main vulnerability issues for consumers of financial services. When dealing with consumers, debt recovery staff will be mindful of these factors.

a) Low literacy, numeracy and financial capability skills;

b) Physical disability;

c) Severe or long term illness;

d) Mental health problems;

e) Low income;

f) Significant debt;

g) Caring responsibilities, including operating a power of attorney;

h) Being 'Older Old' – for example over 80, although this is a guideline and not an absolute. ('Older Old' consumers may have cognitive or dexterity impairment, sensory impairment such as hearing or sight, onset of ill health with little prospect of recovery, not being comfortable with new technology);

i) Being young – this is associated with less life experience and less appreciation of financial risk and obligation;

j) Change in circumstances – for example bereavement, job loss, divorce;

k) Lack of English language skills;

l) Non-standard requirements – for example armed forces personnel returning from abroad, ex-offenders, recent immigrants;

m) Alcohol and/or drug dependency; and

n) Untidy garden or house.

## TRIGGERS TO ALERT STAFF TO VULNERABILITY ISSUES

4.1 Vulnerability triggers will broadly fall into three areas:

a) Change in payment behaviour. This may include:

   i) payments stopping suddenly;

   ii) late or missed payments;

   iii) part payment;

   iv) change in payment pattern; or

   v) cancellation of direct debit or standing order.

b) Conversational triggers, during interviews or phone calls. This may include:

   i) 'I can't pay';

   ii) 'I'm having trouble paying';

   iii) 'I can't read the statement you sent me'; or

   iv) 'I can't understand the letter you sent me'.

c) Physicals triggers. This may include:

   i) shortness of breath;

   ii) signs of agitation;

   iii) asking to repeat – a sign that the consumer may not be retaining information;

   iv) signs of confusion – an indication that the consumer may not have understood the information;

v) mention or sight of medication;

vi) signs that the consumer may be under the influence of drink and/or drugs; or

vii) signs that the customer is unable to cope, including an untidy garden, untidy home, hoarding, non-reporting of repairs and not engaging in investment programme works.

## VULNERABILITY DISCLOSURE AND DATA PROTECTION

5.1 The Information Commissioner's Office (ICO) has indicated that data protection should not act as a barrier to the recording of information, when this recording would lead to a fair outcome for the customer.

5.2 The ICO would only take action against an organisation where the recording of the information in question had been unfair and/or led to an unfair outcome for the customer.

5.3 When a third party (such as a relative or a carer) is involved in a customer's finances, we shall not disclose information about the customer's account.

5.4 However if a third party contacts us to let us know that one of our customers cannot manage their financial affairs for a while, we shall take a note of that information to assist us to behave appropriately when contacting the customer.

5.5 If a carer can supply evidence of their authority to act on our customer's behalf, a more detailed discussion can take place.

5.6 If no evidence of authority can be provided, we must avoid discussing any account details with the carer and explain why this isn't possible. However the carer should be reassured that their concerns can still be recorded as unverified observations on the customer's account.

5.7 The carer should be advised that their observations will need to be shared with the customer and colleagues. Carers will need to give their consent for this.

5.8 The carer's observations should be recorded, and staff should check why the customer is unable to speak to us directly on the issues raised by the carer.

## GOOD PRACTICE

6.1 We will ensure good practice in the following areas:

a) Training – all staff who deal directly with customers shall be trained to know enough about vulnerability to pick up on warning signs or triggers and refer on appropriately;

b) Avoid rigidly scripted responses – encourage staff to be flexible enough to allow a conversation to develop if they sense that a customer may be experiencing difficulty;

c) 'Removing fear' – staff may feel awkward or scared of having conversations around issues such as mental health or other forms of illness, and dealing with customers who are or become distressed. Therefore they may not feel able to encourage customers to disclose vulnerabilities. We will seek to remove as much of this fear or discomfort as possible via increased understanding, clear guidance on how to respond, and appropriate training;

d) Building trust and encouraging disclosure – the more we know about a customer's situation, the more we can help, either directly or by referral. We will develop clear procedures, develop staff with excellent communications skills, ensure good implementation of data protection requirements, and demonstrate to customers that disclosing leads to positive outcomes;

e) Develop and maintain excellent relationships with the advice sector and support agencies to ensure that we refer customers on to the right source of help;

f) Ensure that staff are encouraged to use judgement and a flexible approach. This may include advice on appropriate methods of payment, affordable repayment plans, offering assistance in dealing with Housing Benefit and DWP, giving assistance to carers to register a power of attorney, and stopping constant letters being sent to customers inappropriately;

g) Recording needs – having systems that enable and encourage staff to record customers' needs and any request for additional support (for example, home visits to collect rent);

h) Putting 'flags' on accounts to ensure that vulnerabilities are identified quickly when customers contact us so that they do not have to repeat over and over what may be difficult details;

i) Providing a range of accessibility options including hearing loops, information in audio, Easy Read, large print, and access to translation services; and

j) Specific steps to ensure that those who have difficulty in understanding are offered meetings in quiet areas, that they are accompanied when appropriate, and are given longer appointments if required.

## MONITORING AND REVIEW OF POLICY

7.1 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance.

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *HHP or Partnership* | Hebridean Housing Partnership |
| *Board* | Means the Board of the Hebridean Housing Partnership |
| *Board Members* | All Members of the Board including co-opted Members |
| *ARC* | Annual Return Charter |
| *FCA* | Financial Conduct Authority |
| *RSL* | Registered Social Landlord |
| *ICO* | Information Commissioner's Office |
| | |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

hebridean housing partnership


# Personal Relationships at Work Policy

**Effective Date:** May 2022
**Review Date:** May 2025
**Approved by HHP Board:**

## TABLE OF CONTENTS

# PERSONAL RELATIONSHIPS AT WORK POLICY

## INTRODUCTION

1.1 We recognise that employees may form friendships and sometimes personal relationships with colleagues or those connected with their work. While we do not wish to interfere with these relationships, we are duty bound to ensure that all staff behave appropriately, adhering to our standards of conduct set out in our policies, and avoid behaviours which could lead to allegations of impropriety.

1.2 This policy sets out the standards expected regarding personal relationships connected with work. You should speak to your line manager if you are unsure of the standards expected of you. If the expected standards set out below are not met, we will manage any breaches following our disciplinary procedure.

1.3 This policy applies to all HHP staff. The policy and procedure are non-contractual. We may charge it at any time as is appropriate. Should changes be made, we will carry out consultation.

1.4 It applies to job applicants in so far as applicants are advised to declare "significant social relationships" with existing staff and contractors.

## AIMS

2.1 Our primary aims are to comply with all relevant legislation.

2.2 To be clear on our standards and expectations concerning personal relationships at work.

2.3 To manage any situations out with the expected standards in accordance with this policy.

2.4 To manage situations that may arise in a fair, consistent and appropriate way, and comply with all relevant discriminatory legislation.

## REQUIREMENTS

3.1 We expect you will:

- not allow any close personal relationships with a colleague, contractor, client, customer or supplier to influence your conduct, judgement or decisions while at work.
- declare a close personal relationship with a colleague or any other person connected to your employment to your line manager. If the relationship is between a manger/supervisor, we expect this to be declared to a more senior manager and the Director/Chief Executive.
- respect your surroundings, your colleagues, and our organisation.
- be aware of your behaviour in any social media interaction connected to personal relationships at work.
- follow the highest standards of behaviour at conferences and all other internal or external events where you are there in connection with HHP.

3.2 You can expect:

- to treat any information concerning a personal relationship connected to your work in the strictest of confidence. This will also be recorded on the personal files of both employees if both of you are staff.
- to discuss the situation with those involved, this will be done by an appropriate senior manager. We may move one or both employees to another job in another department/section/team or, consider other working arrangements in line with the needs of the organisation will discuss options with both employees and seek to reach an agreement regarding the transfer of one or both employees.
- If appropriate measures or working arrangements cannot be put in place, the organisation may terminate the employment of one or both as a very last resort.
- to apply similar principles to an employee who is in a close personal relationship with a client, customer, contractor or supplier, in particular where the employee's job has the authority or a close connection with the individual. We expect the relationship to be declared to the employee's line manager. In these circumstances, we may move the employee to another job in another department/section/team or, consider other working arrangements in line with the needs of the organisation or, as a very last resort may terminate the employment with the employee.
- In situations where a close personal relationship with a Board Member or, another volunteer, a client, customer, contractor or supplier, the Board Member/volunteer will be excluded from any discussions connected to the person they have a personal relationship with. If this is not possible or appropriate, the Board member may be required to step down from their position.

## TERMINATION PROCESS SUMMARY

If termination of employment is the last and final consideration available after other avenues have been explored, the following fair process will be followed:

4.1 The employee being invited by a Director to put forward suggestions for alternative working arrangement that meets our business needs.

4.2 We will take all suggestions put forward into consideration. If we do not deem any suitable and, if we believe that there may be a risk that our business activities and judgements, either internal or external, may be at risk of allegations of impropriety, then we will produce a short report outlining the reasons why dismissal is recommended.

4.3 The employee being invited to a formal meeting in writing. At the meeting, they will have the right to be accompanied by a trade union representative or workplace colleague, and both parties (the employer and employee) will be given the opportunity to put forward their case.

4.4 The meeting will be conducted by those with the authority to dismiss the employee in question.

4.5 The panel deliberating (in private) over the information put before making a decision.

4.6 The decision of the panel being communicated in writing to the employee within 7 days of the decision being made, this letter will also provide details of how to appeal the decision.

4.7 The employee being paid all accrued annual leave and flexi not taken to the date of termination, as well as any payment in lieu of notice as set out in their contact of employment if a decision to dismiss is made.

## MONITORING & REVIEW

5.1 We will monitor the implementation of this policy by exception reporting to the Executive Team.

5.2 We will review this policy every 3 years. More frequent reviews will be considered if, for example, there is a need to respond to new legislation/policy guidance.

## INTERPRETATIONS & ABBREVIATIONS

The following interpretation and abbreviations are used in this policy:

| Word | Interpretation |
|---|---|
| *HHP or Partnership* | Hebridean Housing Partnership |
| *Board* | Means the Board of the Hebridean Housing Partnership |
| *Board Members* | All Members of the Board including co-opted Members |
| *Significant Social Relationship* | Where a person whose close relationship with an individual affects that individual's behaviour, attitudes and self-esteem. This usually exists with a family member, spouse, child, common law partner, close friend, sexual partner, business partner of a person who may serve as a role model to an individual or a person whose acceptance and approval is sought. |
| *Team* | In this context, refers to a work grouping as defined in our organisational structure, or any other regular or ad-hoc grouping which has been created to further or organisation aims. |
| *Personal Relationship* | Any relationship, from friendship through to two people 'being in a relationship together' |
| | |
| | |
| All references to the masculine gender in this policy shall read as equally applicable to the feminine gender | |

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ITEM NO 9.1

# BUSINESS PLAN 2019/20 TO 2023/24

## Board 25 May 2022

Report by Chief Executive

## Purpose of Report

1.1 To present a progress report to 31 March 2022 on the Delivery Plan for the Business Plan 2019/20 to 2023/24.

## Summary

2.1 The progress report to 31 March 2022 is at Appendix 1 and shows that overall we are currently just below target. Approx. 12.5% of the actions are below target because the timescale was not met.

2.2 The New Rent Structure timetable is being produced and will be presented to the Board in June 2022.

2.3 The original target of 214 New Build units includes 50 HWEC units that are currently in development. COVID-19 and Brexit have greatly impacted the construction industry both in terms of prices and availability of materials. Despite this 188 units have been completed with additional funding from the Scottish Government.

2.4 Delays were experienced in the Annual Investment Programmes with 72% of the programmes completed. LCITP heating was delayed due to a late award from Scottish Government, more electrical works were required than was anticipated and a revised start date agreed with contractors delayed completion of bathrooms.

## Competence

3.1 The legal, financial and other constraints to the recommendations of this report are at paragraph 5.1 - 8.1.

## Recommendations

4.1 **It is recommended that the Board review the Delivery Plan Progress report to 31 March 2022 at Appendix 1.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Delivery Plan Progress report to 31 March 2022 | |
| **Background Papers:** | None | |
| **Writer of Report:** | Katia Petteloot | Tel: 0300 123 0773 |

## Competence

*Financial*

5.1 The 5 year Business Plan is supported by 30 year financial projections, 5 year projections and the detailed annual budget for 2022/23.

5.2 The detailed annual budget for 2022/23 was approved in March 2022.

*Legal*

6.1 There are no specific legal issues relating to the Delivery Plan progress report.

*Regulatory Guidance*

7.1 The Regulatory Standards checklist has been completed and there is nothing in the report, which would result in a breach of the standards.

*Risk*

8.1 Reviewing progress on the Delivery Plan on a quarterly basis reduces the risk of the Strategic Goals not being delivered.

**APPENDIX 1**

# Business Plan 2019/20 to 2023/24

**Progress Report to: 31 March 22 Quarter 4**

| | MEASURES OF SUCCESS | Due by 31 Mar 22 | On Target | Below Target | Exceeding Target |
|---|---|---|---|---|---|
| SG 1 | Placing Tenants at the centre of everything we do | 7 | 3 | 4 | |
| SG 2 | Investing in an environmentally sustainable way in tenants' homes | 5 | 2 | 1 | 2 |
| SG 3 | Being a good employer that attracts and retains high quality staff | 6 | 3 | 1 | 2 |
| SG 4 | Working with partners to contribute to the wellbeing of communities throughout the Outer Hebrides | 7 | 5 | 2 | |

| | ACTION PLAN | Due by 31 Mar 22 | On Target | Below Target | Exceeding Target |
|---|---|---|---|---|---|
| SG 1 | Placing Tenants at the centre of everything we do | 11 | 7 | 1 | 3 |
| SG 2 | Investing in an environmentally sustainable way in tenants' homes | 3 | 2 | 1 | |
| SG 3 | Being a good employer that attracts and retains high quality staff | 5 | 2 | | 3 |
| SG 4 | Working with partners to contribute to the wellbeing of communities throughout the Outer Hebrides | 5 | 4 | 1 | |

***Overall Progress***

| | | | |
|---|---|---|---|
| 49 | 28 | 11 | 10 |
| | 57% | 22% | 20% |

**On Target**
More than 75% of actions on target and less than 20% below

**Below Target**
Less than 75% of actions on target or more than 20% below

**Exceeding Target**
100% of actions on target and none below target

| Measures of Success | Target date | Baseline | | Progress to March 2022 | Trend | Lead Officer |
|---|---|---|---|---|---|---|
| **2021-1 Placing tenants at the centre of everything we do** | | | | | | |
| 2021 - 1.1 - % of satisfaction with our overall services > 90% | 31/10/2021 | 88% | X | 86% | | Sevice Development Manager |
| 2021 - 1.2 - Maintain all our homes to meet or exceed SHQS *(exl abeyances & exemptions)* | 31/03/2022 | 100% | √ | 100% | | Investment Manager |
| 2021 - 1.3 - Respond to complaints within SPSO targets | 31/03/2022 | 94% | √ | 94% | | Service Development Manager |
| 2021 - 1.4 - Level of current arrears at 2% of Gross Debit | 31/03/2022 | 1.70% | X | 2.47% | | Director of Operations |
| 2021 - 1.5 - Voids at < 1% of Gross Rent Debit | 31/03/2022 | 0.66% | √ | 0.48% | | Director of Operations |
| 2021 - 1.6 - Provide options for a rent guarantee period | 31/03/2022 | Current Rent Structure | X | | | Director of Finance |
| 2021 - 1.7 - 88% of tenants satisfied with opportunities to participate in decision making | 31/10/2021 | 84% | X | 85% | | Service Development Manager |
| **2021-2 Investing in Properties** | | | | | | |
| 2021 - 2.8 - Deliver 214 new builds | 31/03/2022 | | X | **188 completed** | | Development Manager |
| 2021 - 2.9 - Deliver 50 extra care units in Stornoway by Sept 2022 | 30/09/2022 | None | √ | **On site due to complete mid 2022** | | Director of Operations |
| 2021 - 2.10 - Reduce % of tenants in fuel poverty to under 25% by 2023 (subject to fuel price | 31/03/2023 | 41% | √ | **41%** | | Investment Manager |
| 2019 - 2.11 - 100% properties achieving EESSH by 2020 | 31/03/2020 | 87% | √ | **100%** | | Investment Manager |
| 2020 - 2.12 - 100% of stock assessed in terms of long term viability | 31/03/2021 | 98% | √ | **98%** | | Asset & Contract Manager |
| **2021-3 Being a good employer** | | | | | | |
| 2019 - 3.13 - Flexible working policy in place by 2020 | 31/03/2020 | N/A | √ | **Completed in June 2020, revision being presented to May 2022 Board** | | Chief Executive |
| 2020 - 3.14 - Staff survey in 2020 showing positive feedback. Action Plan by 31 March 21 | 31/03/2021 | 2015 Survey | √ | **Survey completed and reported in March 20** | | Chief Executive |
| 2020 - 3.15 - 10% of staff pursuing and obtaining qualifications | 31/03/2021 | 4% | √ | **14%** | | Training & Development Officer |
| 2019 - 3.16 - 100% of vacancies filled on first attempt | 31/03/2021 | 100% in 2018/19 | X | **80%** | | Chief Executive |
| 2020 - 3.17 - Sustain a minimum level of 65% of HHP staff with a service length greater than | 31/03/2021 | 68% | √ | **82%** | | Chief Executive |
| 2020 - 3.18 - % of staff turnover at less than 10% | 31/03/2021 | 4% for 2018/19 | √ | **10%** | | Chief Executive |
| **2021-4 Working with partners** | | | | | | |
| 2019 - 4.19 - New arrangement in place for the delivery of accommodation for the Foyer b | 01/04/2019 | N/A | √ | **In place 25 April 2019** | | Director of Operations |
| 2020 - 4.20 - Population forecasts decline + demographics | 31/03/2021 | Population at 2011-27,684 | X | **2016-**26,950 **2020-**26,720 | | Chief Executive |
| 2020 - 4.21 - Increased demand for housing in rural areas | 31/03/2021 | 243 at 31 March 2019 | √ | **Total 598 Rural 291** | | Director of Operations |
| 2020 - 4.22 - Community benefit measures delivered across our communities and on all co | 31/03/2021 | 100% of contractors | √ | **100%** | | Director of Operations |
| 2020 - 4.23 - 95% of tenants satisfied with management of the area they live in | 31/03/2021 | 92% | X | 81% | | Service Development Manager |
| 2020 - 4.24 - Complete Housing Demands Study | 30/09/2021 | N/A | √ | **Final report to Board in November 2021** | | Director of Operations |
| 2021-Competencies Achieved | 31/08/2021 | 92% in 2020 | √ | **90% in 2021** | | Chief Executive |

| Action Plan | Target date | Baseline | | Progress to March 2022 | Lead Officer |
|---|---|---|---|---|---|
| **2021-1 Placing tenants at the centre of everything we do** | | | | | |
| 2021 - 1.1 - Carry out affordability checks | 31/03/2022 | 2018 | √ | **Rents benchmarked against peers** | Director of Operations |
| 2021 - 1.2 - Value for money Strategy | 31/03/2021 | 2012 | √ | **To Board in February 2022** | Director of Finance |
| 2021 - 1.3 - New Rent Structure | 31/03/2021 | Current Rent Structure | X | **Behind schedule was due for March 21** | Director of Finance |
| 2021 - 1.4 - Profile our Customers Needs | 31/03/2021 | 20% complete | √ | **25%** | Service Development Manager |
| 2021 - 1.5 - Support Western Isles Housing Association Communities Forum | 31/03/2021 | Grant + Staff time | √ | **Forum is being supported with officer time through staff time and TPAS. Recruitment of additional members is being sought and encouraged.** | Service Development Manager |
| 2021 - 1.6 - Develop tenant scrutiny | 31/03/2021 | 2 groups in place | √ | **TPAS are actively working on setting up scrutiny groups, one of them being on Estate Management following the Tenant Satisfaction Survey.** | Area Managers |
| 2021 - 1.7 -Provide dedicated tenant participation support | 31/03/2021 | Half time post in place | √ | **New contract was awarded in May 21** | Director of Operations |
| 2021 - 1.8 - Ensure tenants maximise their opportunties to access digitial services | 31/03/2021 | Information from survey | √ | **Digital Transformation Manager appointed** | Area Managers |
| 2020 - 1.9 -Develop a digital transformation strategy | 31/03/2021 | IT Strategy | √ | **Approved by Board in November 2020** | Business Support Officer |
| 2021 - 1.9 Implement the digitial transformation strategy | 31/03/2023 | DT Strategy | √ | **New Housing System being implemented** | Digitial Transformation Manager |
| 2019 - 1.10 - Develop an Anti-Poverty Strategy | 31/03/2020 | None in place | √ | **CPP Strategy launched 9 October 19** | Director of Operations |
| 2021 - 1.11 -Benchmark our services with other Housing Associations | 31/03/2022 | High Level desk top | √ | **We have benchmarked 9 areas using SHN's toolkit to compile our tenant report.** | Executive Office Manager |
| 2020 - 1.25 -Key Risk Indicators and Key Control Indicators developed during 2019 | 31/12/2020 | None in place | √ | **Initial KCIs measured with Quarterly performance report. Performance report being reviewed in terms of presentation, format and content.** | Executive Office Manager |
| **2021-2 Investing in Properties** | | | | | |
| 2021 - 2.12 - Develop an Environmental Strategy | 31/03/2023 | None in place | √ | **Draft strategy to be considered by Managers and the Executive Team to be presented to Board in August.** | Investment Manager |
| 2019 - 2.13 - Update Asset Management Strategy | 31/03/2020 | Currrent Strategy | √ | **Completed** | Assets & Contract Manager |
| 2021 - 2.14 - Annual Investement Programmes completed by February each year | 29/2/2022 | 90% delivered by March | X | **72%** | Investment Manager |
| **2021-3 Being a good employer** | | | | | |
| 2020 - 3.15 - Offer shadowing and coaching opportunties to all staff | 31/03/2023 | Informal arrangements | √ | **Following feedback from Leadership course, put shadowing and coaching into place.** | Executive Office Manager |
| 2021 - 3.16 - Team building events | 31/03/2022 | 2 held | √ | **Event held in June 19-survey showing increased satisfaction** | Chief Executive |
| 2021 - 3.17 - Round table discussions with managers | 31/03/2022 | None in place | √ | **Meetings held every month since January 2020 (under review)** | Chief Executive |
| 2019 - 3.18 - Develop use of on line system in particular appraisals | 31/03/2020 | New system in Jan 2019 | √ | **1-2-1 being recorded on Breathe** | Executive Office Manager |
| 2021 - 3.19 - Deliver Annual Training Plan for 2021/22 | 31/03/2022 | | √ | **Staff training plan 2022/23 approved by Board 9 February 2022** | Executive Office Manager |
| **2021-4 Working with partners** | | | | | |
| 2021 - 4.20 - Working with community groups to improve common areas | 31/03/2022 | None in place | √ | **Working with Cearns Community Association to improve the estate** | Area Managers |
| 2021 - 4.21 - Identify opportunities to generate income | 31/03/2022 | | X | | Finance Manager |
| 2021 - 4.22 - Support OHCPP to deliver its aims | 31/03/2022 | Attendance at OHCPP | √ | **Meetings attended Agreement signed. Housing report on the July 21 Agenda** | Chief Executive |
| 2021 - 4.23 - Work closely with voluntary sector | 31/03/2022 | None in place | √ | **Team worked well with voluntary sector during lockdown. We will build on what was achieved** | Chief Executive |
| 2021 - 4.24 - Work with CNES to deliver LHS | 31/03/2022 | IDB | √ | **New build on Target; Homeless targets presenting challenges** | Chief Executive |

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# SHR ENGAGEMENT PLAN 2022/23

## Board 25 May 2022

Report by Chief Executive

## Purpose of Report

1.1 The purpose of this report is to inform the Board of our Engagement Plan for 2022/23 which has been prepared by the Scottish Housing Regulator (SHR).

## Summary

2.1 The Engagement Plan is at Appendix 1 and shows that we continue to be classified as an RSL of systemic importance.

2.2 All Engagement Plans are available on the SHR website and are public documents.

2.3 The key issue highlighted is ensuring we keep the Regulator informed of any material changes to our Development Plans which might affect our financial position or our reputation as per the notifiable events guidance.

2.4 Previously we had been requested to provide updates on 6 of the 39 applicable ARC indicators and an update on our performance is at Appendix 2.

## Competence

3.1 There are no financial or legal issues affecting the recommendation in this report.

## Recommendations

4.1 **It is recommended that the Board note the**:

**a) SHR Engagement Plan for 2022/23 at Appendix 1; and**

**b) Performance Indicators at Appendix 2.**

| | |
|---|---|
| **APPENDIX 1:** | Engagement Plan 2022/23 |
| **APPENDIX 2:** | Performance Indicators |
| **Background Papers**: | None |
| **Writer of Report:** | Dena Macleod |

Engagement plan

Scottish Housing Regulator

# Hebridean Housing Partnership Ltd

**Regulatory Status: Compliant**

## Why we are engaging with Hebridean Housing Partnership Ltd (HHP)

We are engaging with HHP about its **development plans** and because it is a **systemically important** landlord.

We refer to a small number of RSLs as systemically important because of their stock size, turnover or level of debt or because of their significance within their area of operation. We need to maintain a comprehensive understanding of how their business models operate, and how they manage the risks they face and the impact these may have. So we seek some additional assurance each year through our engagement plans. Given HHP's significance in its area of operation we consider it to be systemically important.

HHP has plans to grow through a considerable programme of new homes for social rent, and will receive significant public subsidy to help achieve this.

## What HHP must do

HHP must:

- provide copies of its Board and audit committee minutes as they become available;
- send us by 30 June 2022:
  - its approved business plan and report to the governing body about the plan; and
  - its updated risk register;
- send us an update on its development programme by 31 October 2022. This will include details of the scale and tenure mix, timescales for delivery and any material delays or changes to the programme; and
- tell us if there are any material adverse changes to its development plans which might affect its financial position or reputation, in line with our notifiable events guidance.

## What we will do

We will:

- review the minutes of the Board and audit committee meetings and liaise as necessary;
- meet with HHP's senior staff to discuss the business plan and any risks to the organisation;
- review the development update and liaise as necessary; and

- update our published engagement plan in light of any material change to our planned engagement with HHP.

## Regulatory returns

HHP must provide us with the following annual regulatory returns and alert us to notifiable events as appropriate:

- Annual Assurance Statement;
- audited financial statements and external auditor's management letter;
- loan portfolio return;
- five year financial projections; and
- Annual Return on the Charter.

It should also notify us of any material changes to its Annual Assurance Statement, and any tenant and resident safety matter which has been reported to or is being investigated by the Health and Safety Executive or reports from regulatory or statutory authorities or insurance providers, relating to safety concerns.

**Our lead officer for Hebridean Housing Partnership Ltd is:**

**Name:** Kelda McMichael, Regulation Manager
**Address:** Buchanan House, 58 Port Dundas Road, Glasgow G4 0HF
**Telephone:** 0141 242 5575
**Email:** kelda.mcmichael@shr.gov.scot

## Performance Indicators

| ARC Indicators | 2021/22 | 2020/21 | 2019/20 | 2018/19 | 2017/18 | Comments |
|---|---|---|---|---|---|---|
| **Indicator 2** - Tenants who feel the landlord is good at keeping them informed about services and decisions | 89.19% | 92.11% | 92.11% | 92.11% | 80.62% | The current data for Indicator 2, 25 & 28 is taken from the tenant survey carried out in 2021. The survey was previously carried out in July 2018. An action plan is in place to address issues highlighted by the survey returns. |
| **Indicator 25** - Tenants who feel rent for their property represents good value for money | 78.94% | 78.69% | 78.69% | 78.69% | 66.24% | |
| **Indicator 28** - Factored Owners' satisfaction with the factoring service | 42.11% | 33.33% | 33.33% | 33.33% | 33.33% | |
| **Indicator 8** - Average hours to complete emergency repairs | 2.32 | 2.61 | 2.86 | 3.43 | 8.96 | Performance has been stable and consistently good over the last few years on this measure. |
| **Indicator 15** - Anti-social behaviour cases reported in the last year which were resolved | 93.75% | 100.00% | 100.00% | 82.50% | 69.44% | Levels of ASB have been low with no serious cases during the last 12 months. The majority of cases are closed quickly and within 3 months. |
| **Indicator 16** - Tenancies began in previous year remained more than a year-all | 93.10% | 90.06% | 87.22% | 86.11% | 82.00% | Tenancy sustainment has improved. 12 tenancies ended within 12 months with 5 (42%) of these moving off island. 2 others transferred to other properties. Socio-economic factors driving depopulation in the Outer Hebrides have continued to affect our housing demand and sustainment. Approx. 25% of all terminations since 2013 have been due to tenants relocating to mainland UK. |

| Point of Service Surveys | 2021/22 | 2020/21 | 2019/20 | 2018/19 | 2017/18 |
|---|---|---|---|---|---|
| **Letting Process** | 97% | 95% | 95% | 96% | 96% |
| **Overall Standard** | 89% | 89% | 88% | 90% | 85% |
| **Condition of Home** | 86% | 86% | 82% | 83% | 82% |
| **Decoration** | 84% | 58% | 76% | 72% | 70% |

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ITEM NO 9.3

# EQUALITIES ACTION PLAN

## Board 25 May 2022

Report by Chief Executive

## Purpose of Report

1.1 To present an update to the Equalities Action Plan which accompanies our Equalities & Diversity Policy.

## Summary

2.1 The Equalities Action Plan was approved in May 2021. The Action Plan focused on three key areas.

2.2 *Communication*
The way we communicate with our tenants and partners is continuously reviewed. In 2021/22 we have reviewed 12 of our standard letters which account for 69% of all generated letters in the year. Our new Housing Management System will be able to identify tenants with accessibility needs and tailor letters accordingly. We are also exploring the use of audio technology to further improve communications.

2.3 *Informing & Engaging*
Due to COVID-19 restrictions public events were not possible. This will be addressed now that restrictions have been lifted.

2.4 *Data*
As we move to our new Housing Management System, we are reviewing the equalities data we collect, how we collect it and what use we make of the data. The first quarterly report on complaints equalities will be prepared for 30 June 2022.

2.5 A satisfaction survey for complaints raised in 2022/23 will be going out shortly and the report will include equalities data. A new tenant questionnaire is also being updated with equalities data for this financial year.

2.6 The Action Plan and the Policy is underpinned by the commitment to "Promote a culture that respects and values difference across our customer and employee bases"- it is very much about valuing and treating with respect and dignity everyone we encounter as we deliver our services throughout the islands and beyond.

## Competence

3.1 There are no financial or legal issues affecting the recommendation in this report.

## Recommendations

4.1 **It is recommended that the Board note the actions taken on the Equalities Action Plan at Appendix 1.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Equalities Action Plan 2021/22 | |
| **Background Papers:** | None | |
| **Writer of Report:** | Dena Macleod | Tel: 0300 123 0773 |

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APPENDIX 1

# EQUALITIES ACTION PLAN 2021/22

| | |
|---|---|
|  | **Communication**<br><br>Review our communications<br><br>- website<br><br>- letters<br><br>- newsletters<br><br>to make sure they are accessible and easy to understand for our customers |
| Sandy Matheson speaking at our AGM about Deafness: A Personal Perspective  | **Informing & engaging**<br><br>Invite a key disability speaker to at least one event per year<br><br>Review the location of where public events are held and ensure that they are fully accessible to disabled people. |

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## Data

Improve the data collection on equalities on our customer base starting with complaints and report on a quarterly basis to the Board and Managers Meetings

Ensure that customer satisfaction surveys are carried out that allow for a review of findings by disabilities

Identify gaps in data available and put measures in place to gather data for the future

## Promote a culture that respects and promotes equality, diversity and inclusion within the workplace

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ITEM NO 9.4

# QUARTERLY TREASURY REPORT TO 31 MARCH 2022

## Board 25 May 2022

Report by Director of Finance & Corporate Services

## Purpose of Report

1.1 To inform the Board of the Treasury Management activities for the fourth quarter of 2021/22.

## Summary

2.1 The quarterly Analysis of Investment and Borrowing report required by the Treasury Management Policy is at Appendix 1.

2.2 Financial covenants were met for 2021/22.

## Competence

3.1 Financial and legal constraints arising from the recommendation to this report being implemented are detailed at 5.1 – 8.2.

## Recommendations

4.1 **It is recommended that the Board note the:**

**a) quarterly report on the Analysis of Investment and Borrowing as shown at Appendix 1;**
**b) outstanding loans at 31 March 2022 of £10M; and**
**c) cash balance at 31 March 2022 of £3.294M.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Analysis of Investment and Borrowings | |
| **APPENDIX 2**: | Quarterly Income and Expenditure Profile | |
| **Background Papers** | None | |
| **Writer of Report** | James Morrison | Tel: 0300 123 0773 |

## Competence

*Financial*

5.1 This report deals entirely with the cash resources utilised over the fourth quarter of 2021/22.

*Legal*

6.1 Rule 18.1 to 19 details the Partnership's borrowing powers.

6.2 The effecting of borrowing and lending money is in accordance with the Partnership's borrowing and lending policies and CIPFA's "Treasury Management in Housing Partnerships: A Code of Practice" and has been delegated to the Director of Finance & Corporate Services.

6.3 The Treasury Management Policy requires that as a minimum a quarterly report is provided to the Board in the form "Analysis of Investment and Borrowing".

6.4 The Treasury Management Policy requires that if the cash balances exceed £4M the funds should be spread over no fewer than four interest bearing accounts. The cash balances are in a special interest account with Royal Bank of Scotland (RBOS). The remainder is held in the current accounts with the RBOS.

6.5 The Treasury Management Policy states that we "will ensure at least 50% of net debt is to be hedged (either through entering into fixed rates or using another acceptable instrument) at any one time and so a maximum of 50% of forecast net debt exposed to the risk of rising interest rates".

*Regulatory Guidance*

7.1 The Regulatory Standards checklist has been completed and there is nothing in the report which would result in a breach of the standards.

*Risk*

8.1 There are a number of risks highlighted in the Risk Register in relation to Treasury Management. The risk scored as "high" is the impact of increases in the interest rate and inflation rate and this has been addressed in Appendix 1.

8.2 The COVID-19 pandemic and war in Ukraine has resulted in turmoil in the financial markets. The increase in the bank interest rates mean that there will be an increased cost with respect to any variable loans held. There will also be an increase in interest received on deposit accounts.

## Report Details

*Fourth Quarter Treasury Update*

9.1 The fourth quarter of the year saw £5.332M expenditure of which £2.210M related to new build.

9.2 The income for the fourth quarter was £3.331M and comprised Rental Income (74%), Sale of Shared Equity Units (13%), Government Grants including new build (10%), Insurance Claims (1%) and Other Income (2%).

9.3 In this quarter our total borrowing remained static at £10M.

9.4 Appendix 2 summarises the income and expenditure profiles for the fourth quarter.

9.5 The cash balances at 31 March 2022 decreased quarter on quarter by £1.406M to £3.293M. This was driven by a higher spend in fourth quarter on our Investment and Development Programmes with the majority funded through private finance as we had drawn down the majority of our development grant.

9.6 All covenants were complied with for 2021/22.

# 31MAR22 ANALYSIS OF INVESTMENTS AND BORROWINGS

## INVESTMENTS

| | Mar-21 | Jun-21 | Sep-21 | Dec-21 | Mar-22 | Average |
|---|---|---|---|---|---|---|
| ***DEPOSIT ACCOUNTS*** | **£000's** | £000's | £000's | £000's | £000's | £000's |
| Royal Bank | **749** | 749 | 650 | 450 | 750 | 670 |
| CWS | **0** | 0 | 0 | 0 | 0 | 0 |
| BOS | **787** | 787 | 1 | 1 | 1 | 315 |
| Santander | **1,583** | 1,583 | 1,583 | 833 | 85 | 1,133 |
| Total Deposit | **3,119** | 3,119 | 2,234 | 1,284 | 837 | 2,119 |
| | | | | | | |
| ***CURRENT ACCOUNTS*** | | | | | | |
| General Account | **726** | **469** | **1,157** | **1,699** | **893** | 988 |
| Standing Order | **750** | **652** | **368** | **193** | **503** | 493 |
| Direct Debit | **150** | **750** | **261** | **750** | **500** | 482 |
| Office/Cash | **151** | **750** | **413** | **750** | **537** | 520 |
| Property Factoring | **31** | **33** | **34** | **23** | **25** | 29 |
| Total current | **1,808** | 2,654 | 2,233 | 3,415 | 2,457 | 2,513 |
| | | | | | | |
| Total | **4,927** | 5,773 | 4,467 | 4,699 | 3,293 | 4,632 |

*Balances shown are taken from the Bank Statements and not the ledger.*

The cash held at the Royal Bank is split between 5 operational accounts totalling £3.293M. 5 deposit accounts held with the 4 banks shown above total £0.837M.

## BORROWINGS

| **Core Funding Facility** | £m |
|---|---|
| Estimated debt outstanding (per Business Plan) | 10.00 |
| Actual amount outstanding | 10.00 |
| Difference | - |

## Interest Rates

The Interest Rate that applies to the Partnership is SONIA plus an agreed margin. SONIA is the Sterling Overnight Index Average and replaces LIBOR (London Inter Bank Offer Rate). SONIA has risen from 0.19% to 0.69% as at 31 March 2022.

The Base Rate increased from 0.25% to 0.75% in March 2022 and is anticipated will rise further given this is one mechanism the Bank of England use to control inflation, which at 7%, is running significantly above their 2% target.

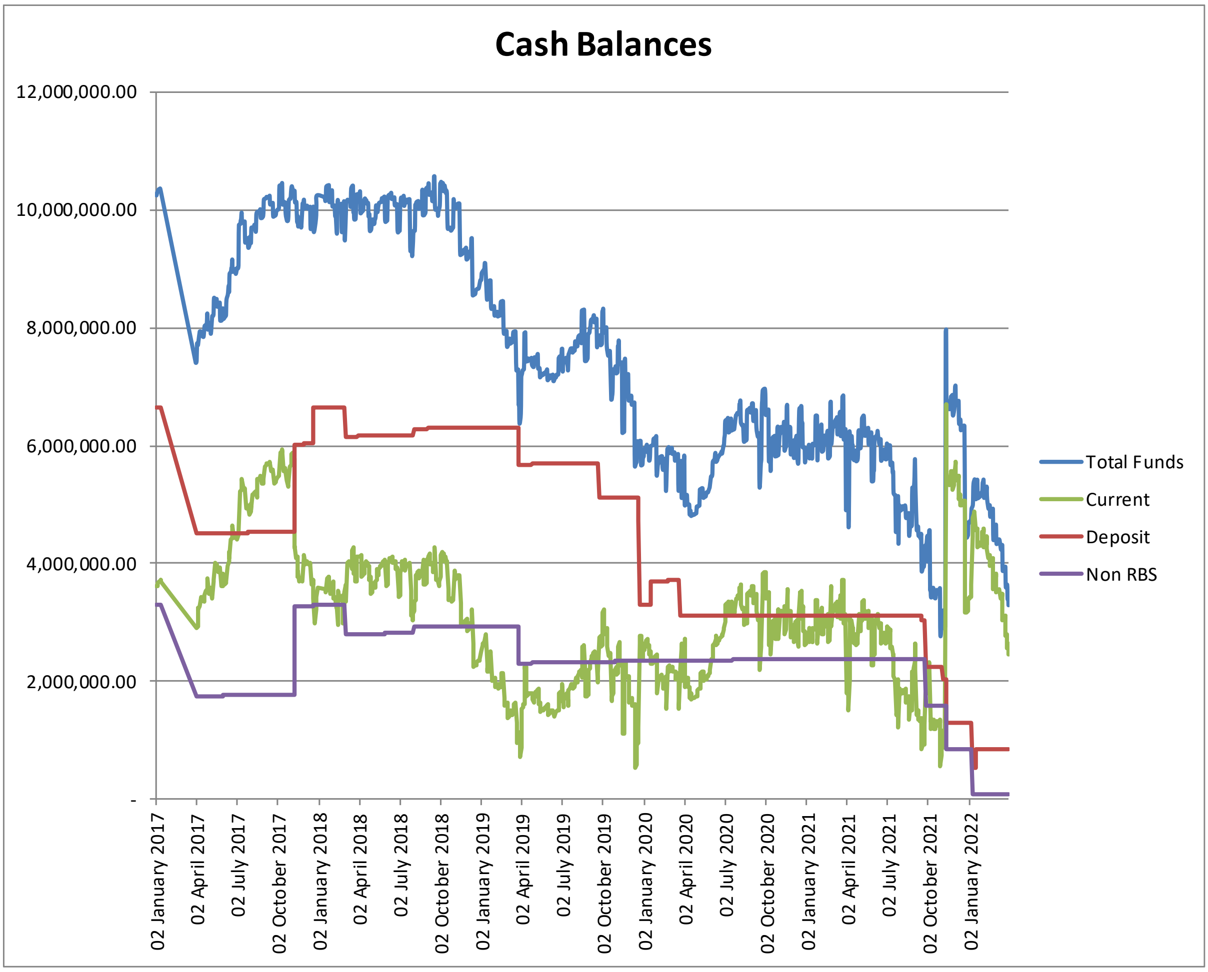
| Borrowings | Mar-21 | Jun-21 | Sep-21 | Dec-21 | Mar-22 | Average |
|---|---|---|---|---|---|---|
| | £000's | £000's | £000's | £000's | £000's | £000's |
| Facilities arranged | 15,000 | 25,000 | 25,000 | 25,000 | 25,000 | 23,000 |
| *Loans outstanding* | 4,909 | 4,909 | 5,000 | 10,000 | 10,000 | 6,963 |
| *Variable/Fixed analysis-amounts* | | | | | | |
| Variable amount | 1,409 | 1,409 | 1,500 | 1,500 | 1,500 | 1,463 |
| Fixed amount | 3,500 | 3,500 | 3,500 | 8,500 | 8,500 | 5,500 |
| Other Hedging | - | - | - | | | - |
| | 4,909 | 4,909 | 5,000 | 10,000 | 10,000 | 6,963 |
| *Variable/Fixed analysis-Percentages* | | | | | | |
| Variable | 28.70% | 28.70% | 30.00% | 15.00% | 15.00% | 21.02% |
| Fixed | 71.30% | 71.30% | 70.00% | 85.00% | 85.00% | 78.98% |
| Other Hedging Products | | | | | | |
| | 100% | 100% | 100% | 100% | 100% | 100% |
| Lenders amounts | | | | | | |
| Core Facility (RBS) | 4,909 | 4,909 | 5,000 | 10,000 | 10,000 | 6,963 |
| Other Borrowings | - | - | - | - | - | - |
| | 4,909 | 4,909 | 5,000 | 10,000 | 10,000 | 6,963 |

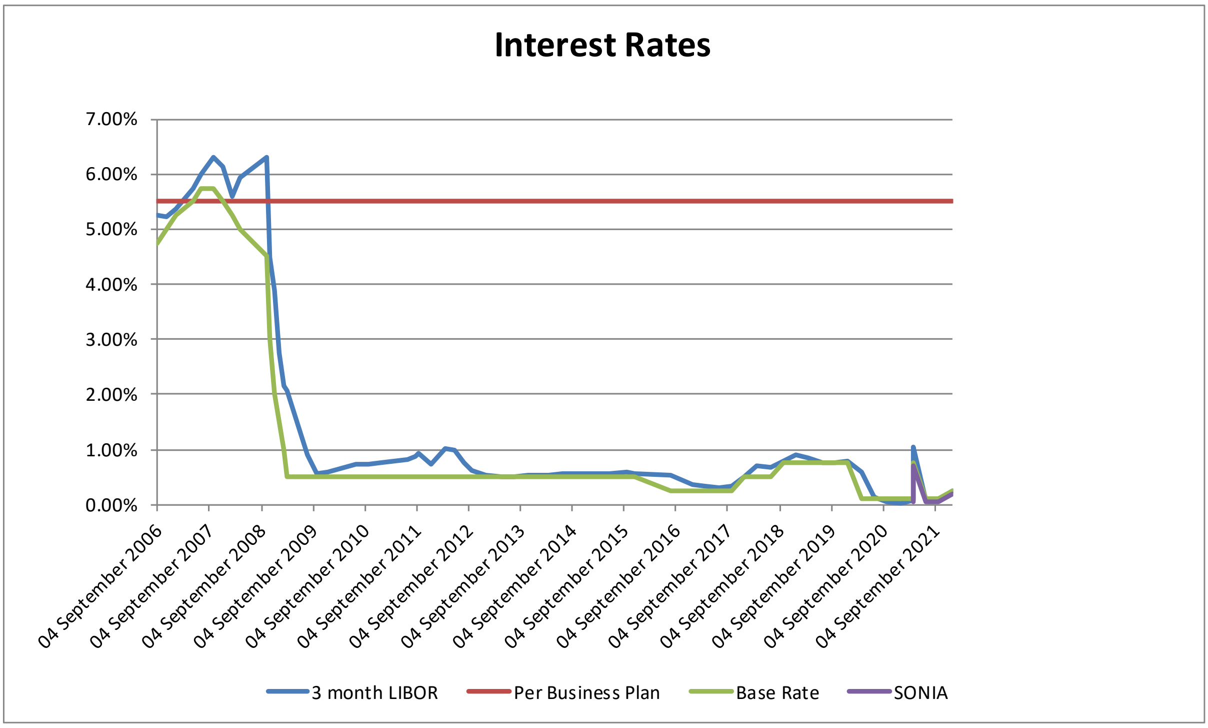
**Average cost of borrowing**

| Amount £000's | Interest | Type | Annual Cost |
|---|---|---|---|
| 8,500.00 | 2.77% | Fixed | 235,758 |
| 1,500.00 | 1.69% | Variable | 25,402 |
| 10,000.00 | | | 261,160 |
| Average cost of funds | | | 2.61% |

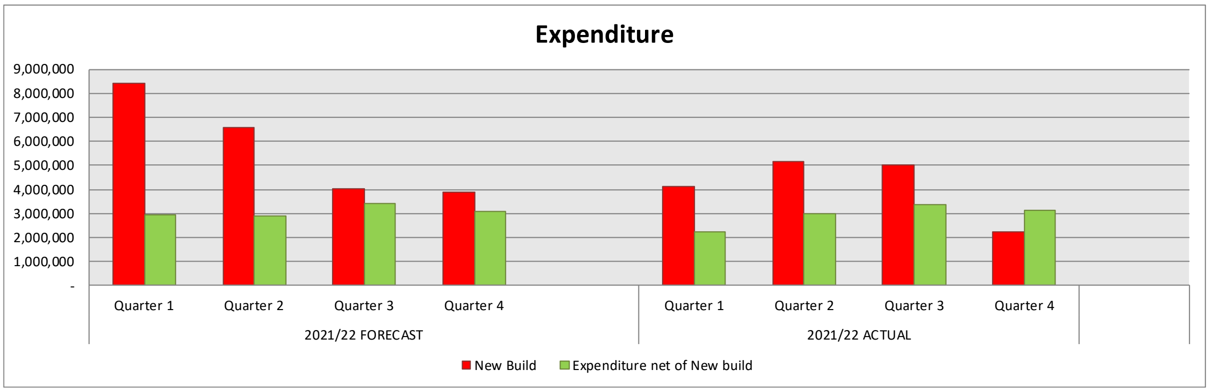
**Anticipated level of borrowing over next 5 years**

| Year | 2021/22 Est | AFS Forecast | Variance |
|---|---|---|---|
| | £m | £m | £m |
| 2021/22 | 10.000 | 10.000 | - |
| 2022/23 | 17.000 | 17.000 | - |
| 2023/24 | 22.500 | 22.500 | - |
| 2024/25 | 24.500 | 24.500 | - |
| 2025/26 | 25.000 | 25.000 | - |


Cash Balances
12,000,000.00
10,000,000.00
8,000,000.00
6,000,000.00
4,000,000.00
2,000,000.00
-
02 January 2017
02 April 2017
02 July 2017
02 October 2017
02 January 2018
02 April 2018
02 July 2018
02 October 2018
02 January 2019
02 April 2019
02 July 2019
02 October 2019
02 January 2020
02 April 2020
02 July 2020
02 October 2020
02 January 2021
02 April 2021
02 July 2021
02 October 2021
02 January 2022
Total Funds
Current
Deposit
Non RBS

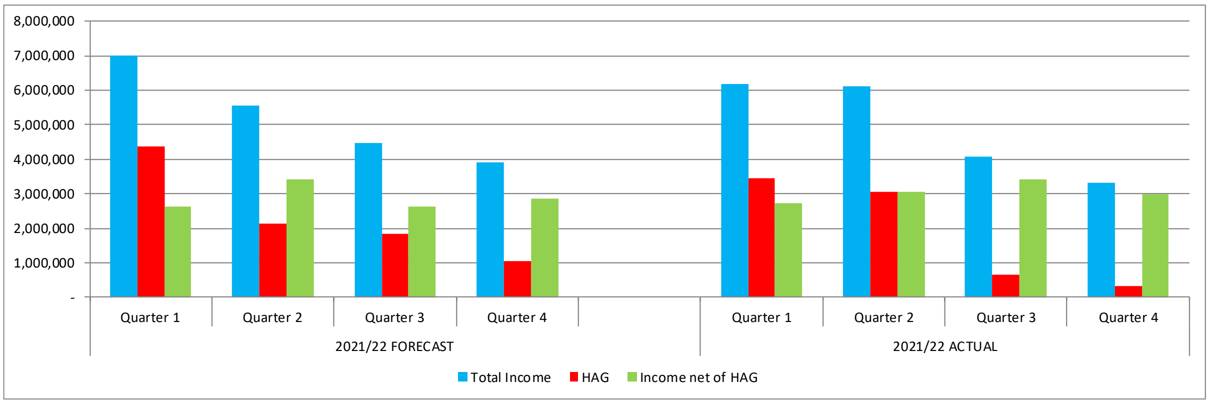

Interest Rates
7.00%
6.00%
5.00%
4.00%
3.00%
2.00%
1.00%
0.00%
04 September 2006
04 September 2007
04 September 2008
04 September 2009
04 September 2010
04 September 2011
04 September 2012
04 September 2013
04 September 2014
04 September 2015
04 September 2016
04 September 2017
04 September 2018
04 September 2019
04 September 2020
04 September 2021
3 month LIBOR
Per Business Plan
Base Rate
SONIA

## EXPENDITURE




Overall the expenditure for the fourth quarter (Q4) of 2021/22 is significantly lower compared to forecast. This is entirely driven by New Build due to delays in getting onto site in a number of developments as originally planned and delays in the Goathill HWEC programme. Expenditure net of new build is broadly in line with the initial budget.

## INCOME




Total Income for the fourth quarter of 2021/22 is down significantly compared to the initial budget. Income net of HAG is broadly in line with the original budget but delays in getting onto site in Lochmaddy, Barra and Blackwater have resulted in a reduction in the value of grant drawn compared to the original budget.

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ITEM NO 9.5

# ASSET MANAGEMENT REPORT

## Board 25 May 2022

Report by Director of Operations

## Purpose of Report

1.1 To provide an annual update on the progress of the Asset Management Action Plan as agreed in March 2020.

## Summary

2.1 The Strategy Action Plan has been updated and is at Appendix 1. Progress is broadly on target and the implementation of the Civica CX Housing Management System will provide further improvement to management reporting and service delivery.

## Competence

3.1 The legal, financial or other constraints to the recommendations in this report are contained in paragraphs 5.1 – 8.1.

## Recommendations

**4.1 It is recommended that the Board note progress on the Asset Management Strategy Action Plan at Appendix 1.**

| | | |
|---|---|---|
| **APPENDIX1:** | Action Plan progress | |
| **Background Papers:** | Risk Register/ Asset Management Strategy | |
| **Writer of Report:** | Angus MacNeil | Tel: 0300 123 0773 |

# Competence

### *Financial*

5.1 There are no financial implications arising from this report. The Strategy is based on a financial framework as set out in the Business Plan.

### *Legal*

6.1 The Scottish Government has set up a legal requirement for Social Housing Landlords to bring their stock up to meet the second milestone of the Energy Efficiency Standard for Social Housing (EESSH2) by 2032.

6.2 The Scottish Government Heat in Buildings Strategy also seeks to drive a pathway to net zero emissions in buildings by 2045. The Strategy sets out a vision for over 1 million homes in Scotland to convert to zero emissions heating by 2030.

### *Regulatory Guidance*

7.1 The regulatory standards checklist has been completed and there is nothing in the report that would be in breach of the standards.

### *Risk*

8.1 There are several risks highlighted in the Risk Register which are relevant to the Asset Management Strategy including:

- Delivery of the Investment Programme;
  a. Supply chain challenges
  b. Failure of a major contractor
  c. Impact of poor inter island transport
- Rent Affordability;
- Climate Change;
- Increased costs to tenants, particularly Fuel Poverty;
- Effectiveness of key IT systems;
- Demographic change; and
- Legislative changes

# Report Details

### *Asset Management Strategy*

9.1 There is a clear expectation from the Scottish Housing Regulator that RSL's will have a clear and robust strategy for managing their housing stock and other assets. This requires a whole organisation approach using informed data to set a clear direction.

9.2 The Strategy is based very closely on guidance from the Scottish Housing Regulator and is an integral part of our Business Plan. Procurement of the Stock Condition Survey was undertaken in May 2022 but no tender returns were received. A follow up to establish the reason for not tendering will be undertaken with a number of consultants. The Stock Condition Survey may require to be delayed to 2023 if the market is unwilling or unable to tender.

# ASSET MANAGEMENT STRATEGY – ACTION PLAN

| REF | ACTION | RESPONSIBLE | TIMESCALE | PROGRESS |
|---|---|---|---|---|
| | **STRATEGIC** | | | |
| 1 | Influence Local Housing Strategy on:<br>• Demand<br>• Population change<br>• Population movement<br>• Development requirements | Chief Executive | October 2022 | Monthly meetings with CNES on annual SHIP programme and through the Investment Delivery Board. |
| 2 | Continue to review current and emerging risks and mitigation measures (including Climate Change agenda) | Chief Executive<br><br>Investment Manager | Each Board Cycle<br><br>May 2021<br><br>May 2022 | Risk Register reviewed on a regular basis by Managers and Audit & Risk Committee.<br><br>Signed up to Climate Change Working Group.<br><br>Heat in Building Strategy - Feedback to consultation complete.<br><br>Environmental strategy and actions to meet EESSH 2 standard drafted and circulated to managers for feedback. Pursuing funding opportunities to develop plan to meet net zero. |
| 3 | Monitor low demand and report on financial impact | Area Manager | Annually - and Allocation report to Board in June each year | Monthly analysis of long-term voids and hard to let assets. Further analysis on reasons for relets and demand in differing areas across island chain. |

| REF | ACTION | RESPONSIBLE | TIMESCALE | PROGRESS |
|---|---|---|---|---|
| | | | | Analysis of areas of low demand and trends.<br>Housing needs and demand assessment carried out 2021, findings inform Business Plan |
| 4 | Work with partners to lobby on fuel pricing | Director of Operations | Ongoing<br><br><br><br><br><br><br><br><br><br>Ongoing<br><br><br><br>Ongoing | Continued lobbying of OFGEM, Energy suppliers and agencies with other Highlands & Islands landlords. Lobbying with partners reflected in Scottish Government acceptance of the need for rural income issues to be reflected in definition of fuel poverty.<br>Preferred supplier arrangement ended by UTILITA in view of energy market pressures.<br>Signpost tenants to CAB and Tigheann Innse Gall for independent Energy Advice where required<br>Currently no switching market as all suppliers pricing at or around price cap levels. Many suppliers have also failed. |

| | **TENANT ENGAGEMENT AND FEEDBACK** | | | |
|---|---|---|---|---|
| 5 | Carry out tenants' survey | Director of Operations | September 2021 | Survey complete. |
| 6 | Continue to develop ongoing satisfaction measurements<br>• Assess satisfaction with homes and environment<br>• Collect, analyse and use data on ongoing basis on repairs, investment, new lets and environment<br>• Develop 2-way communication channels | Service Development Manager<br>Digital Transformation Manager | Monthly<br>Monthly (daily monitoring)<br>June - annually<br>June 2022<br>October 2022 | Tenant Satisfaction Survey and point of service data collected on voids, repairs and investment work and used to inform services.<br>Daily analysis of repairs being issued in terms of nature of works, value, priority. Patterns of repairs analysed in conjunction with other patterns for recall visits, multiple visits to same properties.<br>Recommendations from contractor reviewed daily and actioned.<br>Reasons for voids and relets analysed and compared with socio economic demographics published by CNES.<br>Annual allocation report to Board in June<br>Repairs & Maintenance: Full interface with main contractor which includes ability to update works orders, asset info, appointments etc. in real time<br>Planned works: All HHP contractors will be given access to a portal where works can be tracked, updated, completed and invoiced. |

| | | | | |
|---|---|---|---|---|
| 7 | Develop digital self-service for repairs and maintenance work | Service Development Manager | October 2022 | Civica CX Customer portal will allow tenants to access account info. 3rd party software will launch repairs diagnostics which will integrate back to housing system. |
| | **INFORMATION MANAGEMENT** | | | |
| 8 | Carry out Stock Condition Survey | Director of Operations | October 2022<br><br>May 2022 | Stock condition service tendered May 2022. No interest received.<br><br>Follow up with reasons on zero interest required with consultants |
| 9 | Review and document all processes for data input with Q A system integrated | Service Development Manager | Monthly<br><br>November 2022 | Data reviewed monthly to QA check all data provided by Contractor and ensure data is robust.<br><br>Housing management system - E-invoicing will be possible using new API interface and contractor portal. Being explored as next step of system development. |
| 10 | Development of Asset Management module:-<br>• Life cycle cost (LCC) plans<br>• Investment programme management<br>• Cash flow management<br>• Interfaces with financial systems | Service Development Manager | October 2022 | New housing management system includes a detailed asset management module that tracks 30 year life cycle plans, integrates with finance system, and delivers more advanced reporting tools. New system also delivers dedicated compliance and asbestos modules to enhance our management of key health and safety components. |

| | | | | |
|---|---|---|---|---|
| 11 | Develop interfaces between asset information and customer interface software particularly on repairs diagnosis | Service Development Manager | | New Housing Management System will have a live link between the customer portal and asset information. 3rd party repairs diagnostic tool can be interfaced to provide asset info to users during a repair diagnosis. |
| | **PROTECT CORE STOCK** | | | |
| 12 | Pursue measures to control reactive repairs demand | Service Development Manager/Asset & Contract Manager/Investment Manager | Daily and Monthly process in place. | Daily reports and analysis carried out and circulated to members of staff. Report to Board May 2022 on level and pattern of repairs.<br><br>Measures are in place to monitor daily levels of repairs against daily budget. Review of repairs against correct assets to check for factoring and shared costs. Checks carried out against Planned and Investment programmes to reduce repairs where possible. |
| 13 | Pursue increased focus on planned and cyclical maintenance | Asset & Contract Manager | Annually<br>Every 5 years<br><br>Every 5 years<br>Annually<br>Annually | Annual and 5 year cycles in place.<br>General PPM - stock divided into fifths , 5 year rolling programme<br>Electrical Condition Survey established<br>Fire Safety Inspections<br>Fire door inspections |

| | | | | |
|---|---|---|---|---|
| | | | Annually | Common lighting, communal area, stair lifts/hoists, door entry systems, communal TV/satellite systems inspections |
| | | | Annually | Legionella<br>• On voids/ Investment works/ ASHP have legionella cycles |
| | | | Annually | Asbestos<br>• Sampling on Investment Works<br>• Inspecting communal lofts complete |
| | | | Annually | Gas<br>• Annual service |
| | | | Annually | ASHP<br>• Annual service, includes TMV inspections |
| | | | Every 2 years | Gutter cleaning |
| | | | Annually | Play park inspections<br>Monthly meetings with Contractor to review programme and budget. |
| 14 | Address SHQS abeyances and exemptions<br>• Replace all solid fuel heating systems | Investment Manager | March 2023 | Abeyances being addressed as opportunities arise.<br>Solid fuel systems complete excluding refusals.. Further exploration of enforcement may be required in lead |

| | | | | |
|---|---|---|---|---|
| | • Continue engagement with owners | | Annually | up to EESSH 2, climate change and net zero targets.<br><br>Opportunities offered when possible |
| 15 | Review and agree Investment Programme | Asset & Contract Manager | November Annually | 4-year programme approved up until 2023 |

| | | | | |
|---|---|---|---|---|
| | **PROCUREMENT** | | | |
| 16 | Review options for delivery of Repairs & Maintenance work<br><br>Decision on whether to invoke contract 2-year extension to be taken | Director of Operations<br><br>Director of Operations | March 2024<br><br>March 2024 | Contract now entered year 3 out of initial 5-year contract. |
| 17 | Review outcomes of current investment framework contract | Asset & Contract Manager | September 2022 | Framework expires 31 March 2023 |
| 18 | Determine procurement route for investment programme post 2023 | Asset & Contract Manager | September 2022 | Procurement options evaluated and new framework or alternative approach in place for 2023. |
| | **ENERGY EFFICIENCY AND FUEL POVERTY** | | | |
| 19 | Investigate and pursue replacement of all THTC systems within housing stock by end of strategy period | Director of Operations | March 2024<br><br>May 2022 | Carbon Infrastructure Transition Programme application expected to be approved. Formal notification awaited. |
| 20 | Assess and report on progress against EEESH Standard | Investment Manager | May Annually | Assets assessed against new guidance. Utilise membership of SFHA Innovation Hub and Scottish Housing Network Asset Management Forum for information share on EESSH improvements to assets |

| | | | | |
|---|---|---|---|---|
| 21 | Evaluate options to address EEESH failures | Investment Manager | May Annually | Areas of failures and SAP calculations evaluated against possible areas for improvements. |
| 22 | Assess implications of EESSH 2 standard | Investment Manager | November 2022 | Engagement through RIHAF to influence standard and definitions.<br><br>Energy Efficiency Investment policy to be developed in conjunction with ESG Strategy |
| 23 | Monitor new and emerging solutions to improve energy efficiency | Investment Manager | Ongoing | Ongoing information sharing with members of other organisations. Attendance at relevant events to discuss energy efficiency ratings for Infra-red systems as SAP does not currently provide specific rating. |
| | **ENVIRONMENT** | | | |
| 24 | Carry out annual environmental estate management inspections and link to planned maintenance and investment programmes | Area Managers | February (annually)<br><br>Annually<br><br>Annually | Annual estate surveys carried out.<br><br>Grounds maintenance programmes/ sites reviewed annually. New sites also added for developments.<br><br>Garden Assistance programme reviewed annually. Contract in place until March 2023.<br><br>Review approach to grass cutting with specification and frequency. |

| | | | | |
|---|---|---|---|---|
| | **LAND AND UNADOPTED INFRASTRUCTURE** | | | |
| 25 | Review land assets on regular basis and consider potential uses including disposal | Asset & Contract Manager | Annually<br><br>Annually | At acquisition, land is considered for its capacity and any cost effectiveness. Any land with additional capacity is identified and is considered for inclusion in the SHIP.<br>Minimal land with development potential. We are exploring tree planting in land packages adjacent to existing housing sites. |
| 26 | Survey unadopted roads and footpaths and assess maintenance needs, cost implications and shared ownership responsibilities | Asset & Contract Manager | March 2023 | Unadopted Infrastructure surveys being prepared.<br>Surveys will cover<br>• Roads<br>• Footpaths<br>• Kerbing<br>• Drains/ covers<br>• Parking<br>• Lighting |
| 27 | Evaluate use of drones for survey work | Asset & Contract Manager | March 2022 | Pilot survey undertaken on PPM works. Costs were prohibitive. Options will continue to be explored for modern methods of working |
| 28 | Review effectiveness and specification of grounds maintenance arrangements with CNES | Asset & Contract Manager | March 2022 | CnES retendered works and contract awarded. Contract expires 2026 |

| | | | | |
|---|---|---|---|---|
| 29 | Update contracts with new sites as developments complete | Asset & Contract Manager | Process in place and completed on each scheme handover | Development of handover process with Development Officer to include<br>• Asset and attribute data<br>• Health and Safety/ Building manuals<br>• Life Cycle data<br>• Infrastructure adoption |
| 30 | Pursue adoption of septic tanks and ensure adequate maintenance regime is in place | Asset & Contract Manager | November 2022 | Adoption being pursued through TIG on some sites. Maintenance being carried out as required.<br>Ongoing progression with Scottish Water |
| 31 | Compile survey of existing septic tanks and implement recommendations | | March 2023 | Surveys completed by Engineer. Report reviewed for replacement options.<br>First tank replaced at Beinn Mhor Cottages, Howmore in February 2022. |
| | **ENGAGEMENT WITH OWNERS AND FACTORING** | | | |
| 32 | Explore opportunities to assist owners to participate in maintenance works particularly in relation to SHQS works | Asset & Contract Manager | Ongoing | HHP undertakes surveys and obtains costs and can inform owners of works and costs. |

| | | | | |
|---|---|---|---|---|
| | | | | Take up is very limited but is encouraged. |
| 33 | Explore enforcement options for shared responsibilities with owners if appropriate | Asset & Contract Manager | August 2022 | Participation from private owners continues to be problematic across all programmes.<br>Enforcement options require development to ensure HHP stock and estates do not fall into disrepair. Enforcement will be implemented in serious situations |
| 34 | Improve factoring service delivery and owner satisfaction<br>Review processes and implement improvements identified | Area Managers/Service Development Manager | December 2022 | Data collected checked for detail to ensure clear information is provided to owners. Improvements being made to logs for annual servicing. Works programmed annually. |
| 35 | Annual planned and cyclical maintenance programmes - Ensure good communication with owners | Asset & Contract Manager | Annually | Works surveyed. Letters to owners in place prior to shared works commencing. |
| | **'CAUSE FOR CONCERN' STOCK** | | | |
| 36 | Monitor stock and investigate issues as they are identified and identify options | Asset and Contracts Manager | Ongoing | Investigate issues identified via Investment, Planned and Cyclical Maintenance, daily repairs and stock condition survey.<br>Regular review of data on hard to let and long-term voids or patterns of frequent relets to the same property. |

| | | | | |
|---|---|---|---|---|
| | | | | Several assets have been disposed or are in the process of disposal. 2 Hydro house in the process for disposal and the Caw identified for disposal. |
| 37 | Develop a model to enable an assessment to be made of the value of properties to the business<br><br>Review stock and classify as:<br>• Core Stock<br>• Under Review<br>• Non-core Stock | Director of Operations/Asset & Contract Manager | November 2022 | Modelling tool under continued development.<br><br>Core data feeding through to report to produce categorisation of stock by house types/ areas.<br><br>Refinement and improvement of the tool and data inputs to be continued to add further data which could improve the tool and the information it could provide<br><br>The existing asset management tool will be converted to use new reporting tools procured as part of new housing system. The tool will move away from an excel based format to a live graphical interface with direct integration to the asset database. |
| | **PROGRESS MONITORING** | | | |
| 38 | Report to the Board on progress against this Action Plan | Director of Operations | May/June – Annually | |
| | **SKY DISHES** | | | |

| | | | | |
|---|---|---|---|---|
| 39 | Review whether provision of communal Sky services should be provided due to broadband services providing access to separate online streaming services | Asset and Contracts Manager/ Housing Managers | August 2022 | Undertake surveys for existing stock with communal dishes.<br>No further communal satellite systems considered on developments except by exception.<br>Liaise with Development Officer and best options for future developments. |

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ITEM NO 9.6

# REPAIRS REVIEW

## Board 25 May 2022

Report by Director of Operations

## Purpose of Report

1.1 This report provides the first service review of the Planned, Cyclical and Responsive Maintenance Contract that commenced 1 April 2020. It also provides summary information on the nature and costs of reactive repairs as requested by Board.

## Summary

2.1 The Service Review was carried out to the period ended 31 March 2022. This is attached at Appendix 1.

2.2 Key Performance Indicators on the contract performance are at Appendix 2.

2.3 The first year of the contract was challenging due to the impact of COVID-19 on operation and delivery, consequently a review was not carried out during this period. The second year services have generally operated as normal during the period of this review although COVID-19 protocols have operated throughout.

2.4 Performance has been deemed as satisfactory. New challenges are arising on the service primarily due to the average cost of repairs and the number of repairs impacting on budgets. Operationally the contractor has responded in a good and consistent standard, and this is reflected in the KPI's at Appendix 1.

## Competence

3.1 The legal, financial or other constraints to the recommendations in this report are contained in paragraphs 5.1 – 8.1.

## Recommendations

4.1 **It is recommended that the Board note:**

**a) the Service Review at Appendix 1;**
**b) we will continue to analyse repairs and costs as we progress through the year to seek efficiencies and savings; and**
**c) we will compare performance and costs with peer group landlords to identify potential efficiencies and improvements.**

| | | |
|---|---|---|
| **APPENDIX 1:** | Service Review | |
| **APPENDIX 2:** | KPI performance | |
| **Background Papers:** | None | |
| **Writer of Report:** | Angus MacNeil | Tel: 0300 123 0773 |

## Competence

*Financial*

5.1 There are no direct financial implications arising from this report. The position on repair costs is being monitored and reported through the Management Report.

*Legal*

6.1 We have a requirement to conduct service reviews regularly during the contract period and it is intended to report on these to Board on a 6 monthly basis. The purpose is to evaluate performance across set criteria as contained in Appendix 1.

*Regulatory Guidance*

7.1 The regulatory standards checklist has been completed and there is nothing in the report that would breach the standards.

*Risk*

8.1 Failure to meet adequate scoring against the criteria at Appendix 1 could affect our ability to meet regulatory and legal obligations and performance targets. In addition, contractor failure is identified as a specific issue on the risk register.

## Report Details

*Service Review*

9.1 The Service Review is carried out across

- Service Information – those are minimum standards of service delivery and reporting specified in the contract
- Key Performance Indicator (KPI) – these set out performance targets and are also tied into retention and pain/gain shares with the contractor's payments.

9.2 The main scoring has been carried out by the Asset and Contracts Manager who is the Service Manager as defined in the contract. The Service Manager is responsible for the contract management and delivery.

9.3 The contractor has performed to a satisfactory level given the challenges the sector continues to face with managing supply chains and costs.

*Methodology*

9.4 The methodology is set out in the contract. Each heading is split into items for assessment according to the Contract Service Information and KPI's.

9.5 The KPI's set out minimum targets which the contractor must achieve. Where performance levels are below those set out within the KPI schedule, we may retain the retention until performance levels are brought to the required levels. Otherwise, retentions are released at the end of each quarter. Retentions will roll forward only until the year end (31 March). Failure to meet the performance indicators by the end of the year will result in retentions outstanding at that point being lost to the Contractor.

9.6 In addition, if the Contractor is not on target to achieve the KPI target they will be required to submit proposals for improving performance.

9.7 The Contract Service Information and KPI's will inform any decision on whether to award a contract extension beyond the initial 5-year term. The contract entered year 3 of the initial 5-year term on 1 April 2022.

*Repair Analysis and Costs*

9.8 Information was requested by the Board on 17 November 2021 regarding the nature and volume of reactive repairs. Table 1 provides the number of repairs carried out in 2021/22 as compared to 2020/21. Although COVID and subsequent lockdowns affected the timing and categorization of repairs in 2020/21, the overall number in that year was fairly consistent with previous years. During 2021/22, there was an increase of 326, emergency repairs dropped by 223.

**Table 1 – Number of Orders 2020-2022**

| **2020/21 Orders** | | | | | | |
|---|---|---|---|---|---|---|
| **Repair Category** | **Stornoway** | **Lewis (Rural)** | **Harris** | **Uists** | **Barra** | **Grand Total** |
| Emergency | 658 | 240 | 55 | 189 | 64 | 1206 |
| Routine | 2060 | 831 | 248 | 745 | 257 | 4141 |
| **Grand Total** | **2718** | **1071** | **303** | **934** | **321** | **5347** |
| **2021/22 Orders** | | | | | | |
| **Repair Category** | **Stornoway** | **Lewis (Rural)** | **Harris** | **Uists** | **Barra** | **Grand Total** |
| Emergency | 547 | 190 | 57 | 154 | 35 | 983 |
| Routine | 2288 | 1032 | 261 | 880 | 229 | 4690 |
| **Grand Total** | **2835** | **1222** | **318** | **1034** | **264** | **5673** |

9.9 The total number of orders increased by 6% during 2021/22. The average number of repairs carried out per property in 2020/21 was 2.4 and 2.5 in 2021/22.

**Table 2 – Average Number of Repairs per Property/Area**

| **Repairs/ property** | **Stornoway** | **Lewis (Rural)** | **Harris** | **Uists** | **Barra** | **Grand Total** |
|---|---|---|---|---|---|---|
| Average | 2.5 | 2.2 | 2.2 | 2.9 | 3.1 | 2.5 |
| Emergency | 0.5 | 0.3 | 0.4 | 0.4 | 0.4 | 0.4 |
| Routine | 2.0 | 1.9 | 1.8 | 2.5 | 2.7 | 2.1 |

9.10 The average numbers of repairs carried out to individual properties in each area was compared to check for consistency across these areas. This can be compared to similar RSLs as per Table 3 which shows that the level of Emergency and Routine repairs is within the mid-range of our peer group.

**Table 3**

**– 2020/21 Repairs by Peer Group**

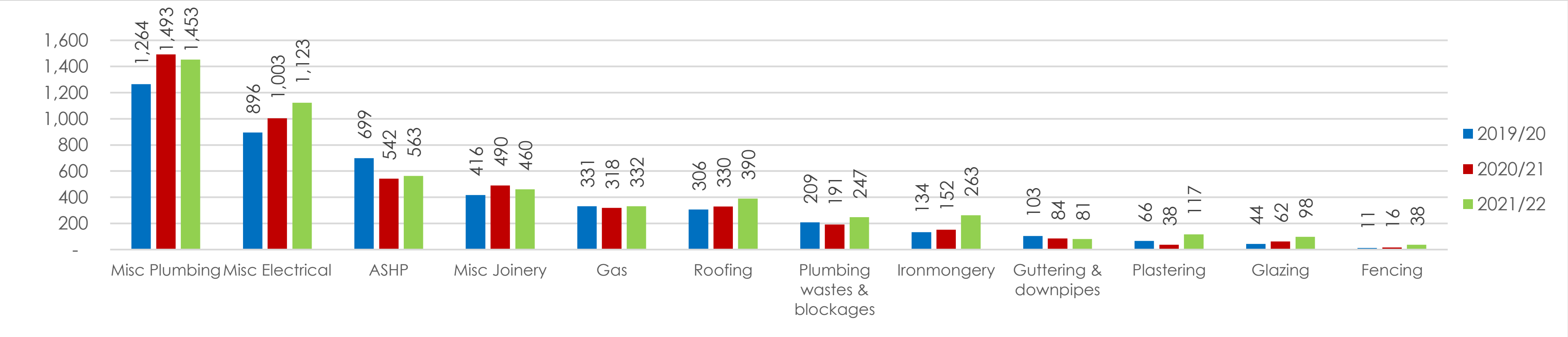
| Landlord name | Emergency Repairs | % repairs that are emergency | Non-emergency repairs | % that are non-emergency | Total Repairs | Stock Count | Repairs per unit |
|---|---|---|---|---|---|---|---|
| **Loreburn Housing Association Ltd** | 1867 | 27.63% | 4891 | 72.4% | 6758 | 2391 | 2.8 |
| **Argyll Community Housing Association Ltd** | 6104 | 43.41% | 7956 | 56.6% | 14060 | 5221 | 2.7 |
| **Dumfries and Galloway Housing Partnership** | 15570 | 58.27% | 11150 | 41.7% | 26720 | 9986 | 2.7 |
| **Hebridean Housing Partnership Ltd** | 1206 | 22.55% | 4141 | 77.4% | 5347 | 2223 | 2.4 |
| **Scottish Borders Housing Association Ltd** | 3165 | 27.12% | 8505 | 72.9% | 11670 | 5565 | 2.1 |
| **Shetland Islands Council** | 527 | 15.36% | 2903 | 84.6% | 3430 | 1598 | 2.1 |
| **Albyn Housing Society Ltd** | 905 | 14.55% | 5315 | 85.5% | 6220 | 3229 | 1.9 |
| **Orkney Housing Association Ltd** | 51 | 3.60% | 1364 | 96.4% | 1415 | 788 | 1.8 |
| **Lochaber Housing Association Ltd** | 201 | 16.46% | 1020 | 83.5% | 1221 | 693 | 1.8 |
| **Orkney Islands Council** | 224 | 19.23% | 941 | 80.8% | 1165 | 872 | 1.3 |
| **(2021/22 Data not available at the time of report)** | | | | | | | |

9.11 An examination of the main areas of repairs was undertaken. These are shown on Chart 1 and have been relatively constant over the last three years

1) Misc Plumbing
2) Misc Electrical
3) Heating
4) Misc Joinery
5) Roofing

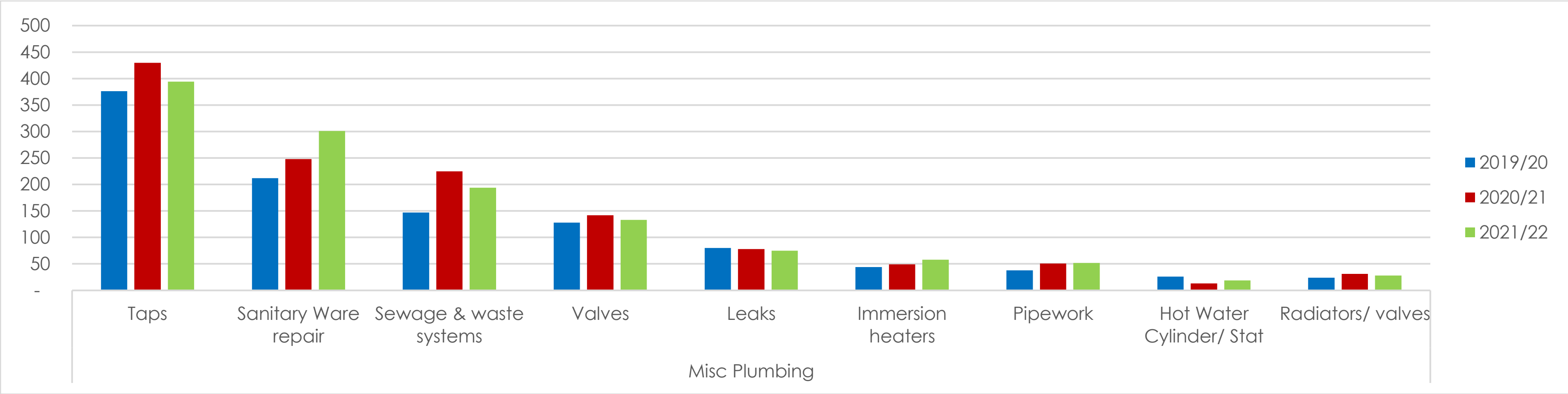
9.12 The period includes the last 3 financial years from 2019/20 through to 2021/22. The last year of the previous maintenance contract is represented in 2019/20 with the subsequent two years being the early period of the current contract.

**Chart 1 – No. Repairs by Works/ Years**



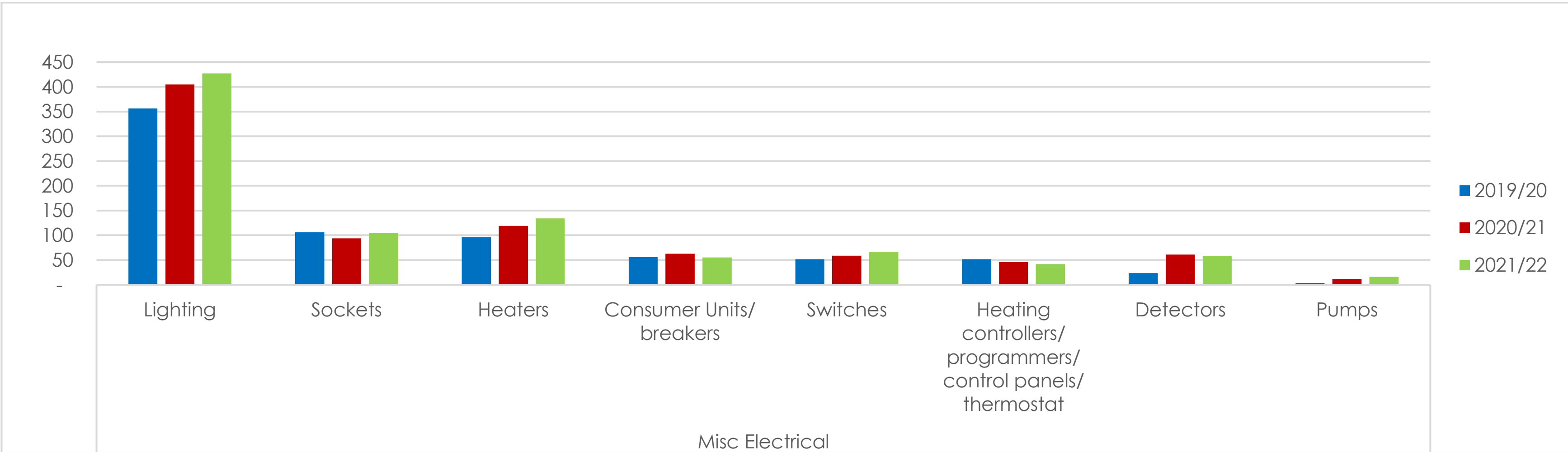

9.13 In order to understand the main sub-elements to the Plumbing and Electrical works, Charts 2 and 3 show further detail. Chart 2 shows the breakdown of the plumbing works mainly relates to supply and waste services. The taps and sanitaryware repairs include full component replacement and repairs to internal mechanisms including re-washering. Sewage and waste systems mainly consists of clearing blockages and obstructions to waste services both internally and to main drains.

**Chart 2 – Plumbing Sub-Works; no. of Repairs/ Years**



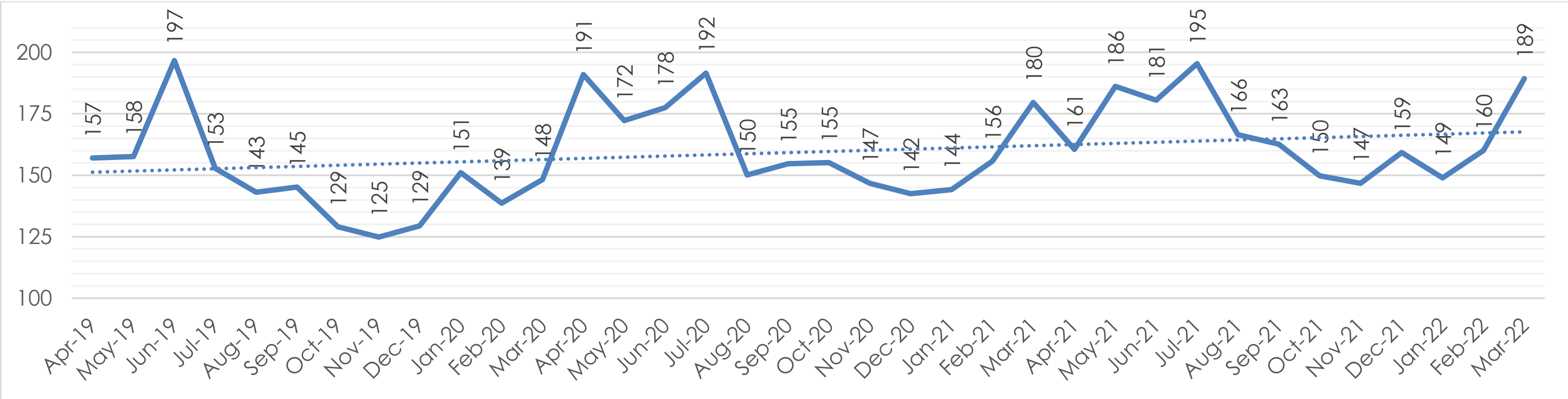

9.14 Electrical repairs generally relate to main circuits and their fittings. Fittings can have several parts making up the component and where lighting circuits are affected by leaks, subsequent safety checks are required before reuse.

**Chart 3 – Electrical Sub-Works; No. of Repairs/ Years**



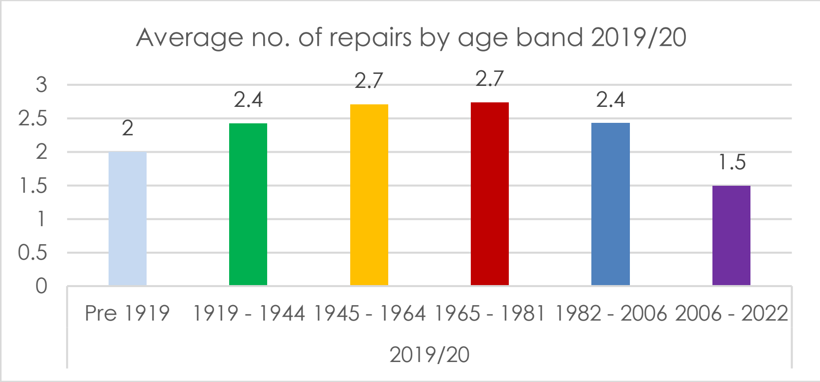
9.15 The average cost per repair shown in Chart 4 has fluctuated over the 3-year period. Individual high-value jobs can distort cost at a particular point in time. Issues in the supply chain over the period has been volatile impacting on cost. Although material prices have seen general increases across the last two years, the impact has been reduced by working with FES FM and their supply chains. Material prices are tracked on a continuous basis and this will continue to be carried out through 2022/23 to analyze if market conditions show any sign of recovery to pre pandemic levels. Labour costs have seen an increase on the cost of the average repair.

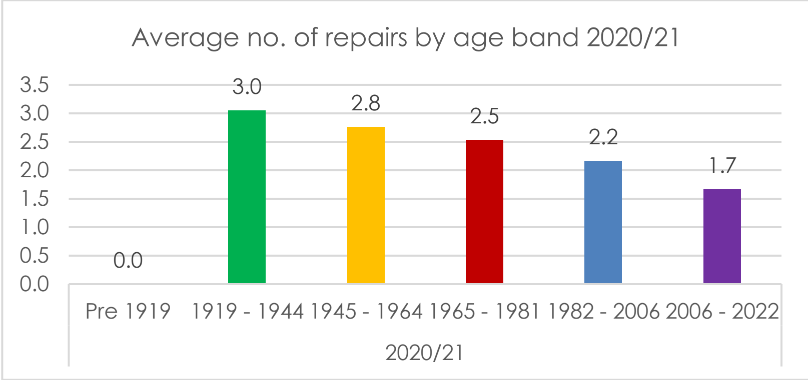
**Chart 4 – Average cost of repairs 2019 to 2022**




9.16 Age of stock – costs were analysed against age of the stock as shown in chart 5. The age brackets are those also used in stock condition surveys. The level of stock pre 1945 is low with the largest part of the stock in the 1945 – 1981 bracket which unsurprisingly has the higher level of repairs, with repairs diminishing the newer the stock as would be expected.

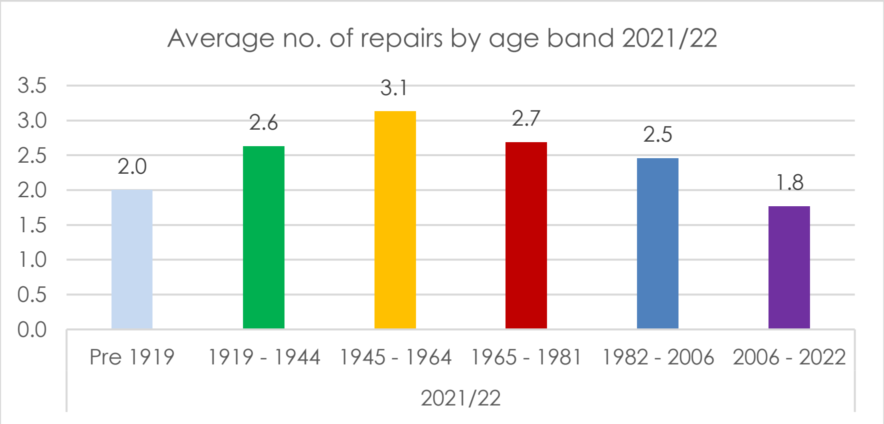
**Chart 5 - % Repairs by age of stock**




**Overall average 2.3**

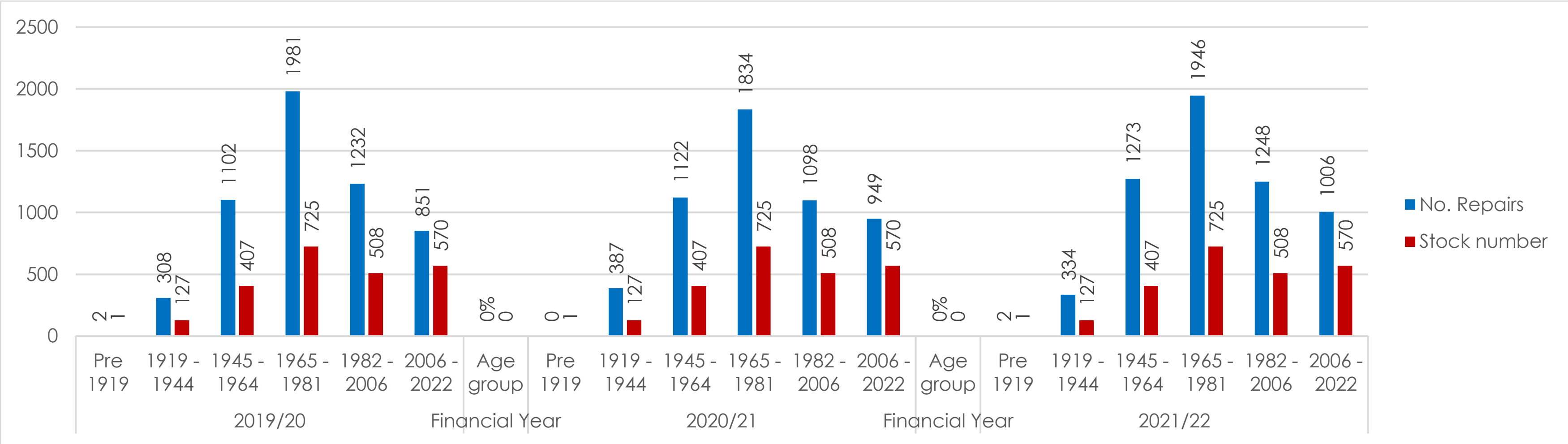
**Overall Average 2.4**




**Overall average 2.4**

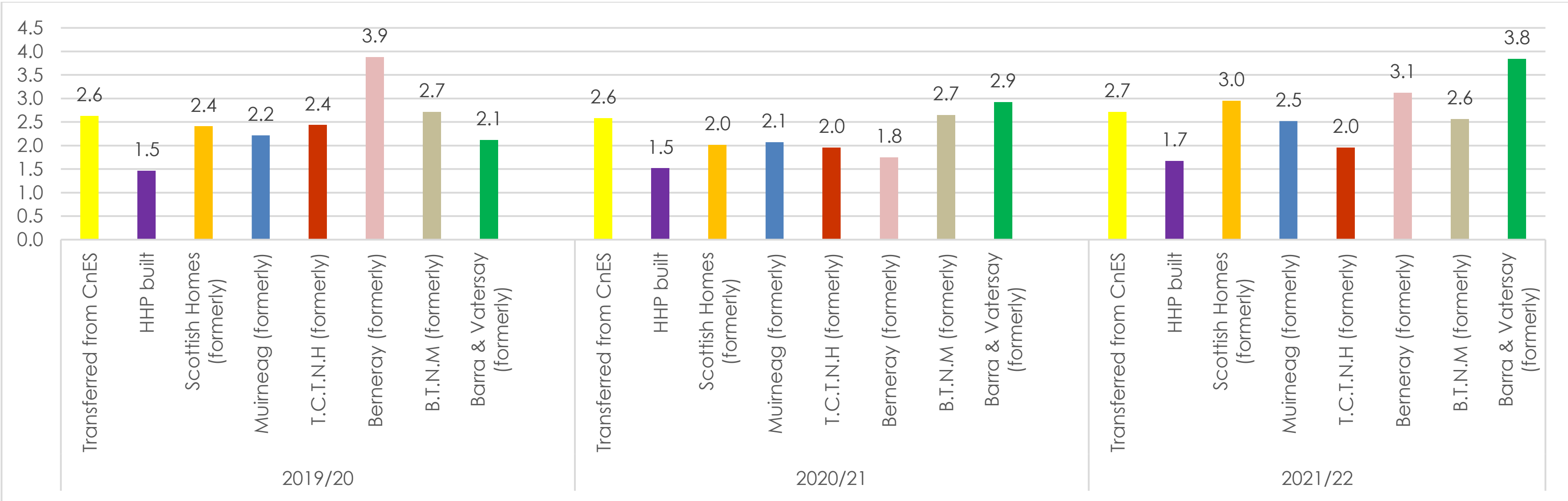
9.17 Repairs relative to Stock numbers - the number of repairs in comparison to the stock numbers by age bracket shows a general increase from 2019 to 2021/22. Increases are seen across most age bands of the stock. The level of repairs in the age bracket from 1945 through to 2006 has shown the greatest increase by approximately 400 repairs. Although the investment programme has seen replacements of major components in kitchen, bathroom and heating it is the smaller components within plumbing and electrical that account for the larger number of repairs with a sizeable element of electrical work relating to lighting which has not formed a significant part of the main investment programme since transfer. The larger numbers of repairs in plumbing relate to small components and parts which are in constant use and would suffer a higher level or wear and tear which would account for the number of repairs.

**Chart 6 – No. of Repairs / stock number by age band**




9.18 Owning bodies - A final analysis was carried out on the various owning bodies that later transferred to HHP. Chart 8 shows that there has been a higher average number of repairs across some of the former housing association stock. In comparison, the level of repairs of HHP built stock since 2006 is lower with the transfer stock remaining constant.

**Chart 8- % Repairs by Body Type**



*Conclusion*

9.19 The main issue in driving pressure on repair budgets has been the increasing number of repairs reported/carried out. At this time, it is difficult to say if this is a continuing trend or whether demand will decrease but it will continue to be closely monitored. Although performance in terms of number of repairs completed per property is average in comparison to peer group we will engage with other landlords to seek potential areas of improvement or best practice. It may also be the case that the increase in repairs over this period is at least in part due to the fact that people spent significantly more time at home due to COVID19 restrictions. However, it is difficult to be definite about this or to identify what the drivers may have been in generating more repair requests. If this was a factor then it would be expected that demand for repairs would fall in 22/23. Early indications are that this may be the case but it is too early to draw any conclusions.

9.20 Labour costs have seen an increase since the previous maintenance contract. Options to achieve efficiencies and reductions in costs are being worked on with FES. This includes breaking down elements of work costs, travelling time on repairs and whether there are specific trades or work types driving these. In addition, the time spent undertaking works are examined for reasonableness. Service and response levels will also be considered. Furthermore, reducing travelling time will reduce the carbon footprint relating to repairs.

## Service Review

Period **12 months from 1st April 2021 to 31st March 2022** **Year 2**
Assessment by: **A MacNeil** Service Manager

i) Contract performance will be scored in line with the KPI Schedule (Appendix 1)
ii) Contract performance will be measured against the following five main headings:

- Quality
- Cost
- Time
- Health and Safety
- Continuous Improvement

iii) Contract performance will be scored using the following bands:
iv) If two consecutive reviews produce unsatisfactory results then this could result in the Employer terminating the contract ref clause 91.2
i.e. Contractor has "Substantially failed to Provide the Service"
v) Contract performance will also form the basis of evaluating whether the two year contract extensions will be invoked.

measurement)

| Criteria | Item ref | Item description | Contract Service Information (minimum service requirements) * | KPI (measurable performance tied into retention and pain/ gain payments) * | Measurable targets | Comments | Performance |
|---|---|---|---|---|---|---|---|
| **Quality** | 1.1 | **Attendance at meetings** | ● | | | Regular monthly meetings well attended during the period. No Risk Reduction meeting required. Contractor has good performance with attending Team meetings. New members added as employed | |
| | 1.2 | **Contractors' reports - accurate & issued on time** | ● | | | Paymechs and Performance reports submitted within agreed timescale. PPM forecasting reports developed and used to tie into management account reporting. More pro active approach by Contractor to be developed | |
| | | | | | | Contractor has good performance in responding to bespoke report requests. Examples of reports submitted - Recharges Target v Actual costs, Community Benefit, Material Price trackers, Average Cost analysis | |
| | 1.3 | **Repair trends reports** | ● | | | Further development required on analysis of repairs trends to track in current market. Repairs analysed by priority, average cost, types of works and drill down into those works types. Monthly expenditure is exceeded budget (refer to chart 1) during the period with a pattern of common work types being the main contributor such as miscellaneous plumbing, joiner, electrical works, roofing and heating (Refer to chart 2). | |
| | 1.4 | **Risk Reporting** | ● | | | Contractor has submitted Risk related Early warning notices in regard to material price rises, supply chain, COVID risks in workforce and closure of landfill site in Benbecula. Risk Register in place and in operation. Monitored and reviewed against HHP Risk Register. | |
| | 1.5 | **How to improve tenant satisfaction** | ● | | | Tenant satisfaction good but more work required in representative sample. Barra surveys undertaken by FES are being brought in line with ARC questionnaires to increase number of surveys. Period of no surveys during July to Sept 21 due to internal staff related issues. | |

**APPENDIX 1**

| Criteria | Item ref | Item description | Contract Service Information (minimum service requirements) * | KPI (measurable performance tied into retention and pain/ gain payments) * | Measurable targets | Comments | Performance |
|---|---|---|---|---|---|---|---|
| | 1.6 | **Right First Time -** Availability of materials, on vans & held stock | | • | Target 90%, annual average 89.46% | There continues to be some stock control issues particularly for dome non standard parts held to turn repairs around more quickly, the parts are held at contractor's cost and include ASHP and INfra red parts . Contractor has maintained contact with suppliers/ manufacturers to maintain supply chain during last year. Right first time reviewed monthly to review nature of stock control issues/ ordering periods. Early Warning process also in place but not required to date. Impact on figures due to some stock issues related to COVID effect on supply chains such as longer manufacture times and demand. | |
| | 1.7 | **Recalls** | | • | Target 3%, annual average 8% | More work required from contractor to ensure Recalls are reduced and works undertaken Right First Time. Recommendations to HHP are accurately diagnosed on site and actioned whilst following process with HHP to ensure costs are controlled. | |
| **Cost** | 2.1 | **Financial Reports** | • | | 100% of all invoices accurate & submitted on time | Paymechs issued on required date. Paymech information is detailed and allows detailed analysis of what repairs and where repairs occur. Paymech analysis to continue to use as financial monitoring and predictive tool to build improvements into complete process. | |
| | 2.2 | • Invoicing | | • | | Performance very good, invoices received timeously including those from sub contractors | |
| | 2.3 | • Increase value for money | • | | | Paymech being used to evaluate value for money, efficiency, planning and resourcing, more work required. Labour costs constitute the majority of average repair costs with costs remaining relatively constant in the last two years, material costs monitored via paymech also. Costs have seen an increase since the former contract. More work required to reduce labour costs and in turn reduce repair costs. | |
| | 2.4 | •[detailing Total of Prices, Actual Costs, anticipated Contractor's share etc.] | • | | | Paymech in use to calculate and forecast Pain/ Gain monthly. Paymech to be used as more of a pro active toll to interpret and understand contributing factors to cost patterns across all trades and housing stock/ age. Improvements made with Recharges with quotation system for compensation events/ rechargeable voids. | |
| **Time** | 3.1 | • Reactive maintenance completion times (days) | | • | Target 4 days, annual average 4.15 days | The first 6 months of the year averaged 4.21, days due to COVID restrictions, protocols and accessibility. The second 6 months averaged 4.10 days. Performance has steadied, performance generally reasonable in recent periods although below target. | |
| | 3.2 | • Achieving Void completion times | | • | Target 95% completion on time, annual average 99.87% | Performance has been good. Additional factors in relation to Lettable standard to be progressed and Rechargeable repairs measures have been introduced. Although performance has been good, mitigations need to be developed across the void process to limit the turnaround delays particularly for voids involving large clear outs. | |
| | 3.3 | • Maintaining tenant appointments | | • | Target 99%, annual average 95.47% | Appointment system in place for routine repairs. Good level of performance although under target | |

| Criteria | Item ref | Item description | Contract Service Information (minimum service requirements) * | KPI (measurable performance tied into retention and pain/ gain payments) * | Measurable targets | Comments | Performance |
|---|---|---|---|---|---|---|---|
| | 3.4 | ● Completion of Planned maintenance works | ● | | | General planned maintenance was delivered. Contractor needs to ensure more work done on maintaining and reporting programme progress with accompanying cashflows and forecasts to period end and end of financial year throughout the year. | ● |
| **Health and Safety** | 4.1 | Did work carried out on the contract fall within the industry standard measures related to Accident Frequency Rate | | ● | Target, reportable incidents per month <1, annual average 0 incidents | No reported incidents, tool boxes talks regularly carried out, COVID protocols in place as standard and followed prior to attending and during the works | ● |
| | 4.2 | ● Did the Accident Frequency Rate improve from the last review | | ● | | Constant good performance during year | ● |
| | 4.3 | ● Health and Safety - covering contractor's operatives | | ● | | No incidents, regularly reviewed, measure will follow good practice, HSE and Government guidance | ● |
| | 4.4 | ● Health and Safety - Incidents within or around tenant premises | | ● | | No incidents, regularly reviewed, measure will follow good practice, HSE and Government guidance to protect both contractor's operatives, HHP Officers and tenants. | ● |
| **Continuous Improvement** | 5.1 | ● Ongoing [over contract duration] Contractor's involvement and commitment to a continuous improvement culture | ● | | | Annual review completed for Community benefit initiatives. These continued via recruitment, apprenticeship appointments, voluntary works, donations, foodbank assistance/ deliveries, storage facilities where required. Continued monitoring of initiatives to improve on efficiencies, innovation, employment/ training, reduction of costs and improvement in quality, collaboration, feedback<br><br>IT and gateway improvements in regard to data reporting, diagnosis and recommendations. Development of options for e-invoicing continuing with Civica Cx development | ● |
| | 5.2 | ● Reduction in duration for completion of Voids works | ● | | measurable against item 3.2 | Minimising turnaround times essential whilst ensuring standard of voids is good and consistent. Collaboration with HHP to deliver improvements, initiatives for voids to reduce turnaround times. Reduction of rechargeable repair costs implemented via Recharge Quotation process. Ensure good communication to minimise turnaround times and identify all works at outset. | ● |
| | 5.3 | ● Reduction in Reactive maintenance - Reactive trends | ● | | measurable against item 1.3 | Regular review of common repairs/ trades, recurring repairs, reviewing specifications and problem components or less durable components, more collaborative facilities management approach to repairs and planned maintenance. | ● |

| Criteria | Item ref | Item description | Contract Service Information (minimum service requirements) * | KPI (measurable performance tied into retention and pain/ gain payments) * | Measurable targets | Comments | Performance |
|---|---|---|---|---|---|---|---|
| | 5.4 | Improved tenant satisfaction | • | • | Target 95%, annual average 90.88% | Tenant satisfaction reviews measure appointment offered/ Contractor on Time. ID shown/ Helpful and Polite/ Satisfaction/ Cleaning done - these core surveys will continue on sample but other initiatives will be explored to improve tenant satisfaction. QA checks also undertaken post repairs to repairs in Barra to ensure sub contractor provides same level of service, standards and satisfaction. Barra surveys will instigated as QA check on sub-contractor services, survey responses have been good. | ● |

### Overall Performance

Performance is assessed as **SATISFACTORY** given the challengs of the last year. The operational elements of delivering the works on site have progressed well.

Supply chains need to monitored to ensure demand for material stocks are maintained as services and manufacturing levels return. Similarly, material and labour costs need to be offset with improved efficiency savings to deliver services within budgets.

KPI PERFORMANCE **APPENDIX 2**

| Pain/Gain Share KPI's | Apr-21 | May-21 | Jun-21 | Jul-21 | Aug-21 | Sep-21 | Oct-21 | Nov-21 | Dec-21 | Jan-22 | Feb-22 | Mar-22 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Customer Satisfaction | | 84.21% | 50.00% | | | | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 92.86% |
| Recalls | 0.00% | 50.00% | 50.00% | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% | 0.00% |
| Maintenance | 50.00% | 50.00% | 50.00% | 100.00% | 100.00% | 50.00% | 100.00% | 100.00% | 50.00% | 100.00% | 50.00% | 50.00% |
| Emergency | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| Right First Time | 92.26% | 87.04% | 90.71% | 87.16% | 91.21% | 88.47% | 91.25% | 94.05% | 89.70% | 87.44% | 89.37% | 84.85% |
| H&S | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| **Pain Gain Share KPI Score** | **85.57%** | **84.25%** | **78.14%** | **96.79%** | **97.80%** | **84.62%** | **98.25%** | **98.81%** | **87.94%** | **97.49%** | **87.87%** | **85.54%** |

| Quarterly/Annual Performance KPI's | Apr-21 | May-21 | Jun-21 | Jul-21 | Aug-21 | Sep-21 | Oct-21 | Nov-21 | Dec-21 | Jan-22 | Feb-22 | Mar-22 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Appointments Kept | 96.08% | 95.29% | 95.25% | 95.96% | 95.83% | 96.28% | 96.60% | 95.79% | 92.50% | 95.72% | 94.35% | 95.92% |
| Invoice's | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| Voids | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% | 100.00% |
| **Quarterly/Annual Performance KPI Score** | **98.69%** | **98.43%** | **98.42%** | **98.65%** | **98.61%** | **98.76%** | **98.87%** | **98.60%** | **97.50%** | **98.57%** | **98.12%** | **98.64%** |

| | |
|---|---|
| **Overall KPI Performance for Retention** | 90.00% |

## Targets and Assessment criteria

| | | |
|---|---|---|
| **Customer Satisfaction** | Target | 95% |
| **Recalls** | Target | 3% |

The KPI score % is set as follows:
=<3Hrs is within target (100%)
3-5 hrs is working towards target (50%)
>5hrs is failing (0%).

| | | |
|---|---|---|
| **Maintenance** | Target | 4 days |

The KPI score % is set as follows:
<4days is within target (100%)
4-6 is working towards target (50%)
>6 days is failing (0%).

| | | |
|---|---|---|
| **Emergency** | Target | 3.5 hrs |

The KPI score % is set as follows:
<3.5Hrs is within target (100%)
3.5-5.25hrs is working towards target (50%)
>5.25hrs is failing (0%).

| | | |
|---|---|---|
| **Right First Time** | Target | 90% |
| **Health and Safety** | Target | <1 reportable incident |
| **Appointments** | Target | 99% |
| **Invoices** | Target | 90% |
| **Voids** | Target | 95% |