**WHEATLEY HOMES GLASGOW
BOARD MEETING**

**Friday 19 May 2023 at 10.30am
Darnick Street, Glasgow**

AGENDA

Welcome to new Board member – Carol Ballingall

1. Apologies for absence

2. Declarations of interest

3. a) Minute of meeting held on 24 March 2023 and matters arising
   b) action list

   Main business

4. Supporting our customers – Wheatley Foundation annual update

5. Strategy refresh – summary and next steps

6. a) 2022/23 Annual return on Charter and year-end performance
   b) 2023/24 Delivery Plan and performance measures

7. Complaint handling performance 2022/23

8. Regeneration update (verbal)

9. Group Suicide Prevention Framework

10. Fire Prevention and Mitigation Framework

    Other business

11. Governance update

12. Finance report

13. Assurance update

14. AOCB

Post meeting visit to My Repairs and CBG training academy.

Report

To: **Wheatley Homes Glasgow Board**

By: **Laura Pluck, Group Director of Communities**

Approved by: **Steven Henderson, Group Chief Executive**

Subject: **Supporting our customers - Wheatley Foundation Annual Report 2022-23**

Date of meeting: **19 May 2023**

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1. Purpose

1.1 The purpose of this report is to:
1) Provide an update on the work of the Wheatley Foundation in 2022-23 and the additional support on offer to customers throughout the cost-of-living crisis; and
2) Outline the impact of the support and Foundation programmes on Wheatley Homes Glasgow customers and set out our priorities for 2023-24.

2. Authorising and strategic context

2.1 The work of the Foundation supports the delivery of our strategy and in particular links closely to the strategic theme, *Changing lives and communities.* This report updates the Board on the performance of the Wheatley Foundation in the last year.

3. Background

3.1 The Foundation was created in 2016 to support our commitment to "Making Homes and Lives Better" for our customers and communities across Scotland. It aims to maximise access to employment, training and learning opportunities for customers of all ages and to support customers by tackling social exclusion and alleviating the impacts of poverty.

3.2 The Foundation helps support our most disadvantaged customers and communities. The Foundation's brand and identity has developed over the past seven years to reinforce our reputation for supporting better lives. This is evidenced by the high-profile external funding awards secured previously from the Scottish Government and European Social Fund.

3.3 The Foundation played a key role in our response to the pandemic, primarily through supporting households via our Eatwell programme. On the back of this global pandemic, which we know had a severe impact on economic resilience within our communities, the cost-of-living crisis has quickly followed, compounding the impact on our customers.

3.4   Throughout 2022-23 the cost-of-living crisis has placed exceptional and unprecedented pressure on household budgets of our customers many of whom are in receipt of universal credit and already economically challenged.

3.5   In August 2022, we introduced the Here for You fund and campaign to support customers through the cost-of-living crisis. The new fund and campaign are managed by the Foundation.

3.6   In addition to the Here for You fund, our extensive wraparound support and Foundation programmes, our customer-focused operating model and approaches we adopt to engaging with our customers put us in a strong position to successfully understand the needs of our customers and respond to these effectively.

4.   Discussion

4.1   A key aim of our new operating model, implemented in late 2021 was to ensure that our frontline teams were visible and even more present within their local communities by directing everyday interactions with customers to our new Customer First Centre ("CFC"). With a target of resolving 90% of customer queries or service requests at the first point of contact, the CFC in its first full year of operations has received and made c1million contacts with customers with 88.7% of these being resolved at first contact.

4.2   As a result, in the 12 months to 31 March 2023 there have been over 75,000 visits to tenants across our communities from housing officers alone. Not only increasing the visibility of frontline staff in our communities but enabling a more in-depth picture of individual customer and community circumstance. This has been key as we have supported customers to navigate the cost-of-living crisis.

4.3   Frontline staff have had a crucial role in understanding customers impacted most by the cost-of-living crisis or those who would benefit from Foundation programmes. By Autumn 2022 it was apparent that the impact of the cost-of-living crisis was likely to be felt across a much wider segment of our customers, impacting those who wouldn't ordinarily access our wraparound services. As such, raising awareness of the support we were able to offer all our customers, as well as frontline teams having extensive knowledge of external support individuals were entitled to draw down, was a key focus prior to the launch of the fund.

4.4   Our Here for You campaign was launched in August 2022 and has continued to be highlighted regularly to our customers in different ways to ensure we reach all our customers. We have highlighted regularly through:

- our social media channels;
- targeted discussions with CFC staff and frontline staff working in customers' homes and our communities;
- part of our annual customer conversations and;
- our annual rent campaign in the run-up to Christmas which carried the 'here for you' messaging, inviting people to reach out for help if they were struggling or worried about paying their rent.

4.5 During 2022-23, the Foundation has provided vital support to thousands of households facing challenges because of the cost-of-living crisis through the Here for You fund. In addition, the Foundation has delivered an extensive planned programme of activity and initiatives for our customers and those living in our communities. Much of this seeks to proactively support customers to maximise employment, learning and training opportunities, tackle social exclusion and alleviate poverty. Ninety percent of the annual Foundation spend is allocated to programmes that are accessed through referral from frontline staff including housing, care and CFC staff or the Foundation team following discussions with tenants about their individual circumstances. The remaining 10% of the budget is spent on initiatives that are funded by the Foundation but delivered by partners in our communities, such as the StreetwYze youth project. These are accessed via the partners referral process but are always delivered in our communities.

4.6 The creation and launch of the Here for You approach brought together the wide range of internal and external customer support and advice already on offer. It also brought together our food, fuel and rent financial support offerings under one recognisable banner and referral process for frontline staff. The aim was to reach those most in need, supporting customers in crisis, while raising their awareness of and access to the range of wider wraparound support on offer to them.

4.7 The Here for You fund has not been means-tested; instead, frontline staff are empowered to use their professional judgement. A critical element of our Here for You approach is the continued customer conversation on individual circumstances, what external support is on offer and how to access this and the services and support we can offer both short and long-term. However, to ensure fair and consistent application of the fund there were several actions taken before and during the campaign and fund launch including;
   ▪ Extensive pre-launch awareness sessions for all senior leads and operational leads.
   ▪ Monthly check-in sessions (until March 2023) with senior leads and operational leads.
   ▪ Material developed to inform and support consistent discussions with frontline staff and;
   ▪ Robust guidelines developed for all staff.

4.8 In the year, we supported 13,600 individual households across all our Foundation programmes, achieving all annual targets including:
   ▪ 19,000 practical interventions to alleviate financial pressures, including support provided through the Here for You campaign.
   ▪ 798 Wheatley Homes Glasgow children and young people participating in targeted Foundation activities.
   ▪ 298 Wheatley Works jobs, apprenticeship and training opportunities created.
   ▪ 36 bursaries provided to assist people to access higher education.
   ▪ £1.6m of external funding secured to support the delivery of Foundation programmes.

4.9 The Here for You campaign has included signposting or helping customers access support or funding from other organisations, through referrals to our own internal wraparound support services, or utilising our Here for You fund.

4.10 Since October 2022, following the launch of the Here for You campaign, there have been over **7400** referrals by WHG staff for customers to get access to support. This included:

- 3031 households receiving 4291 supermarket vouchers;
- 3400 households receiving rent payment support; and
- over 7000 fuel vouchers provided to WHG tenants

"It took a lot of pressure off me - not having the stress of not having the food. Fruit is now a luxury, so we were able to buy fruit with the voucher, it helped me with eating healthier."

4.11 WHG customers have also been referred on to other internal services including Fuel and Welfare Benefits Advice as well as external services including Foodbanks, pantries/larders and Energy providers/funders.

"The advice given on reducing energy consumption was very helpful and has encouraged me to find other ways to achieve this."

4.12 'Struggling with an unexpected bill, expenses, or other debts' has continued to be the most common reason for customers receiving support from the Here for You fund, with 53% of the service requests from frontline staff being for this reason. Other reasons have included Benefit Sanctions; Reduced work hours; Sick leave with no pay; Delay in payment/wages.

4.13 Demand by customers for **financial, benefits and fuel advice** has remained high during 2022-23, with over **£9.7m** financial gain secured for WHG customers as a direct result of the following interventions:

Programme	Households Supported	Financial Gain
Welfare Benefit Advice	5113	£8.7m
Fuel Advice	3432	£309K
My Great Start	932	£713K

Customer had claimed Universal Credit but was having difficulty having their housing costs included in their claim. With support from a Welfare Benefits Advisor, the customer was able to resolve the situation, resulting in a backdated payment of £8,907.

4.14 Our **Home Comforts** programme delivered over **2200 items** of furniture, white goods and electrical appliances to **614 WHG households**, supporting customers to create a home and sustain their tenancy.

"I was over the moon with this service. So grateful for all the kindness shown and the assistance from the delivery guys. The furniture was a whole lot better than I expected. This certainly gave me a lift and look forward to getting up in the morning. It has made me a very happy man."

4.15 **Starter Packs** provides customers who are moving into a new home with a helpful pack including kettle, toaster, cutlery, crockery, pots and pans, bedding, towels, and cleaning materials. **548 WHG tenants** have been supported this year with a pack to help them get settled into their home.

4.16 During 2022, the Foundation supported the opening of a fourth community larder/pantry in Glasgow in partnership with Good Food Scotland. Since opening in September 2022, the new **Kennishead Larder** has become an instant hit in the community with **330 customers** signing up to access healthy, low-cost food including fresh fruit and vegetables, meat, cheese, bread, baby food, nappies, frozen food and tinned goods. Halal meat is also available to cater for the local Muslim community. Tenants spend on average £9.85 each visit, which buys them food and other essentials worth up to £20.

"The larder has been excellent for everybody and has made a big difference in the area."

"You don't realise how difficult times are for people. A lot of people don't have access to cars and can feel isolated at home. They find it easier coming here as they can meet new people and have a chat while saving money on their shopping."

4.17 There are a further 2 Larders that will be opening in the coming months – LINKES in Knightswood and Balbeggie Street in Sandyhills. Both new larders have been developed in partnership with local staff and are utilising space at the bottom of WHG multi-storey flats. Additionally, we are exploring options in Milton and Drumchapel.

4.18 **Wheatley Works** bring together all the Foundation's employability support under one banner, providing a simple referral pathway for staff, partners and customers. Wheatley Works aim to deliver holistic, personalised 1:1 support for customers to help them improve skills and readiness to take up jobs, training and apprenticeship opportunities.

4.19 During 2022-23, Wheatley Works has supported **298 jobs, apprenticeship and training opportunities** for WHG customers.
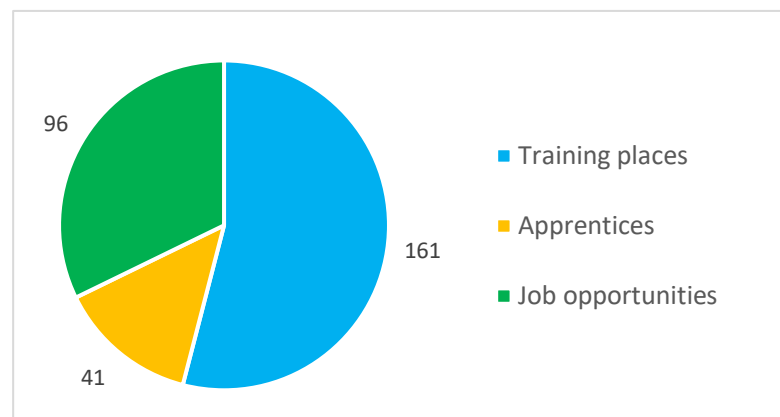
"I was made redundant from my retail job. Wheatley Works helped me to access some training and look at different opportunities. They helped me to change careers and I'm now working for Scottish Legal Aid Board. I couldn't believe my landlord offered this".

4.20 **Way Ahead**, the Glasgow-based ESF employability contract delivered by Wheatley Works, **supported 64 people** that have been long term unemployed to begin removing barriers to training and employment. Way Ahead mentors work with customers with specific issues including addiction, criminal convictions and homelessness

4.21 A total of **75 WHG customers** took up a **Changing Lives** placement or an **Environmental Apprenticeship** within the Neighbourhood Environmental Teams (NETs). The Wheatley Works team provide ongoing support to the trainees and apprentices, helping them to progress into permanent employment. During 2022-23, **38 existing WHG trainees/apprentices secured jobs**, 15 with Wheatley.

"I have really enjoyed learning new skills which hopefully I can carry on into full-time employment. I like to keep myself busy and I am always looking to learn and improve my communication with the customers to give them the best service I can."

4.22 City Building Glasgow recruited **64 new trade apprentices**, with almost one third being secured by young people living in WHG homes.

4.23 **10 WHG customers** benefited from **Community Benefit opportunities** across Wheatley new build sites, including Lowther's Calton Phase 1 site and Loretto's Hallrule site.

David, a WHG tenant, had been on employment support allowance for nine years. Following completion of a 4-week Trades Taster training programme delivered by Wheatley Works, including an on-site placement, David was offered full-time employment with McTaggart Construction in Glasgow.
"The course was really important in getting me mentally ready for work. That was invaluable. I've now got a lot more belief in myself"

4.24 The **Wheatley Pledge** wage incentive scheme supported **4 local charities** in Glasgow to recruit **13 WHG customers** to a variety of roles including bus driver, shop assistant, and an admin assistant with Starter Packs Glasgow.

4.25 **36 WHG tenants** were awarded a **bursary** in August 2022. Students were studying a range of subjects including Nursing, Animation, Microbiology and Electrical Engineering. In addition, year-two support was provided to 22 WHG existing bursary students, including customers on low incomes, lone parents, carers and young people formerly in care.

"The course is based in Ayr, so the bursary has been a god send. Without it, I would have struggled to afford the cost of travel to Ayr from Glasgow for my classes. Having the bursary removed any worries about money and has been a massive help."

4.26 **John Wheatley Learning Network** (JWLN) has provided free access to computers and the internet for **2,905 people living in WHG communities** this year. The network, comprising 37 local centres, assists people to improve their digital skills and has supported 696 enrolments in certificated learning courses.

"The staff are very helpful and we've got great booklets to follow for our learning and our tutor has made learning easy for us. Hindi is our first language, but we are also both students in the ESOL class which also takes place here".

4.27 Enabling people to achieve their potential by addressing imbalances in disadvantage and access to opportunities is what drives the work of the Foundation. No-one should be left behind because of the barriers they have experienced in life or simply because of where they live. To support our customers of the future, the Foundation has committed to delivering a range of education and learning programmes that help give children and young people the chance to thrive.

4.28   Throughout the JWLN, local centres deliver **Youth Access** sessions. The sessions support young people to learn new skills and gain accreditations in areas such as STEM (Science, Technology, Engineering and Mathematics), Music, Digital skills and gaming – **over 400 young people** have benefitted from these sessions across the year.

4.29   The **Dolly Parton Imagination Library** has delivered **2480 free reading books** during 22-23 to **242 children** living in WHG homes. The Foundation has now sent almost 27,000 books to children aged under 5, since the Imagination Library partnership was developed group-wide in 2018.

"I think it's a great project, my son loves books more than toys. For me, I really look forward to a new book coming. Reading is a bonding time for us."

4.30   **StreetwYze** supported almost 200 young people across the East End of Glasgow to take part in workshop sessions to raise awareness of gang culture and knife crime – around one third of the young people supported were from WHG homes. Young people have been learning about the consequences and ripple effect on not only them but the wider community with risk-taking behaviours through these workshops.

80% of young people surveyed said Streetwyze has helped them to make better choices. 92% said the programme had increased their personal responsibility.

4.31   **Curiosity Collective** has supported **over 1100 primary aged children** across WHG communities with 2 Wonderbox activity packs. The aim of this project is to encourage children to engage in play and learning outside the classroom and give them some resources to do this. A final edition of the Wonderbox will be issued in June 2023.

External Funding

4.32   More than £1.6m of external monies has been secured by the Foundation during 2022-23. External monies secured has been a mix of grant fund applications (49%), contracts (39.5%) and donations (11.5%).

4.33   A total of **30 grant fund applications and contracts** have been prepared and submitted since April 2022, with a total value of £3.8m. Of these, 16 have been successful (53%) with a value of £1.4m. A further 3 bids worth £373k are still pending decision and 11 bids worth £2.05m were unsuccessful (37%) while donations totalling over £200k have been received from a range of sources including Group new build contractor and suppliers.

4.34   The cost-of-living crisis continues to disproportionately affect lower-income families who spend a greater proportion on essential bills and food. Therefore, the Here for You campaign will continue through 2023-24, with a key priority to continue to seek and secure external funding that allows existing Foundation programmes to be increased in scale (if required), or the development of new programmes that support customers and communities.

4.35   The Foundation priorities for 2023-24 reflect the Group's efforts to support customers by providing essential wraparound support to those at the highest risk of poverty, including families, young people and lone parents; and delivering programmes that provide access to fair, sustainable training and employment opportunities.

5.   Customer Engagement

5.1   Enhancing customer engagement through co-design and development of services is a key strategic priority. The Group's customer engagement framework *Stronger Voices, Stronger Communities*, ensures customer involvement and feedback shape and determine the scope and nature of new programmes and activities.

5.2   A **You Choose Challenge** was delivered with WHG tenants in Milton this year. Residents were asked to submit ideas to improve their community and then voted to support local organisations including Love Milton, Milton Rattlers and the Arc to deliver community events and activities for toddlers and older people in the community.

5.3   In 2022, the Foundation commissioned independent research organisation Rocket Science to collect customer feedback on the impact of programmes such as EatWell, Environmental Roots, and Changing Lives, engaging 500 participants. Feedback from participants overall has been positive:

- a majority agreed that Foundation programmes have helped their household cope when life is difficult (63%) and have helped them feel more in control of their lives (61%).
- Processes for receiving services were considered straightforward, and successful in supporting vulnerable customers, who would otherwise find it difficult to access support.
- 82% customer satisfaction with EatWell (food vouchers) indicates it is an essential, well-regarded service, with 75% agreeing the service helped them cope when life is difficult and 87% saying it provided essential support during a crisis.
- The Environmental Roots programme is well received with 80% of customer satisfaction and focus group participants confirmed the pre-employability approach worked well for them in providing valuable support, new skills and confidence
- Changing Lives successfully helps customers gain new skills (88%) and creates financial stability (75%) and 81% agreed it helped them identify career goals; and they now felt much more optimistic about going for job opportunities.

5.4   While advice and practical support are valued by participants, some customers told us they continue to experience ongoing worries and financial difficulties due to the cost-of-living crisis, especially around food and increasing energy bills.

5.5   The Foundation will use the customer feedback to make improvements to programmes during 2023-24.

6. Environmental and sustainability implications

6.1 Foundation programmes incorporate our sustainability objectives. This includes creating green jobs and training opportunities and contributing evidence of the Foundation's wider social value as part of Wheatley accreditation submissions, such as the Group's 2021-22 Environmental, Social and Governance (ESG) stakeholder report submissions. The Foundation recently recruited a Greener Communities Officer to ensure there remains a strong focus on sustainability objectives within the work of the Foundation.

7. Digital transformation alignment

7.1 The Group's five-year strategy is underpinned by digital transformation. The Foundation's contribution to the IT transformation agenda ranges from supporting You Choose Challenge online voting to the distribution of digital supermarket vouchers and the extension of online and telephone advice and customer feedback services.

8. Financial and value for money implications

8.1 The Foundation continues to source, secure and maximise funding opportunities, as well as new partnerships to provide value for money for the business, customers and communities. The activities of the Foundation are supported by donations from our RSL subsidiaries and gift aid from Lowther.

9. Legal, regulatory and charitable implications

9.1 The relevant legislation and regulation applying to this performance report is the General Data Protection Regulation (GDPR), particularly in relation to customer information and data sharing. Advice is sought from Wheatley legal, audit and governance colleagues in relation to service delivery, monitoring and evaluation. The information contained in this report meets the Foundation's reporting requirements and objectives as a registered charity.

10. Risk Appetite and assessment

10.1 The matters contained in this report primarily support our Changing Lives and Communities strategic theme and in particular the strategic outcome of "supporting economic resilience within our communities". Our agreed risk appetite for this in relation to finance/reputation and credibility is "open". However, this also recognises the overall benefits of investment whilst ensuring relevant controls to minimise and possibility of financial loss.

10.2 The Foundation measures performance against key strategic indicators monthly and undertakes any improvement work where necessary. We report on this quarterly to the Foundation Board to ensure that it remains informed of progress and to mitigate the risk associated with failure to deliver our strategy.

11. Equalities implications

11.1 Project monitoring and evaluations consider equalities information and Equalities Impact Assessments are undertaken at the outset of new programmes to ensure compliance with equalities legislation.

12. Key issues and conclusions

12.1 Although 2022-23 was extremely challenging in the face of the cost-of-living crisis, **over 13,600 WHG households have been supported** through:

- provision of direct, practical assistance to vulnerable households experiencing crisis and financial hardship; almost 19,000 interventions/supports for WHG tenants were carried out this year;

- offering training and work support for both long term unemployed people and young people with no qualifications/work experience; Wheatley Works has supported 298 jobs and training opportunities for WHG customers

- developing activities for children and young people to reconnect, learn and play. Over 1900 children and young people from Wheatley communities across Glasgow have been supported, with approximately 42% from WHG homes

- 36 students supported to go to university or college through our bursary programme

- A WHG "You Choose Challenge" supported tenants to decide how to make improvements to their own community resulting in increased provision of local toddler and older people activities and services.

12.2 Foundation priorities for 2023-24 reflect the Group's efforts to support customers by providing essential wraparound support to those at the highest risk of poverty, including families, young people and lone parents; and
delivering programmes that provide access to fair, sustainable training and employment opportunities.

12.3 The Here for You campaign will continue through 2023-24 with up to £3m available as approved by Group Board on 26 April 2023. This will include working with organisations that share our values to develop our approach to food security. The development of local Pantry/Larder venues can not only provide a longer-term food security outcome for customers, but they can also play a key role as a Community Hub – acting as a springboard to other local support and connections for customers.

13. Recommendations

13.1 The Board is asked to note the activity undertaken throughout 2022-23 to support customers and communities.

LIST OF APPENDICES:

None

Report

To:	**Wheatley Homes Glasgow Board**
By:	**Aisling Mylrea, Wheatley Homes Glasgow Director**
Approved by:	**Steven Henderson, Group Chief Executive**
Subject:	**Strategy refresh – summary and next steps**
Date of meeting:	**19 May 2023**

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1. Purpose

1.1 To summarise the key issues considered at the recent Board strategy workshop and propose for the Board's consideration, and where applicable approval:

- how the Board's feedback will be reflected in an updated strategy;

- the key issues we want to feed into the wider Group strategy review; and

- how changes to Group level targets, along with updates to our business plan, investment plan and development plan will be reflected in our strategy

2. Authorising and strategic context

2.1 Under the Group Standing Orders the Group Board is responsible for the approval of the overarching Group strategy. Under our Terms of Reference we are responsible for approving our own 5-year strategy, within the strategic context of the overarching Group strategy.

2.2 Any changes to Group level targets are subject to Group Board approval. Any such changes require to be considered by this Board so that we can consider the implications for our contribution to any revised target.

2.3 Our legacy GHA strategy, attached at Appendix 1, was agreed during the pandemic and reflected the strategic and operating context at that time. Our external operating environment has changed significantly since then, in particular the cost-of-living crisis, high inflation economic environment and the policy context for sustainability, including new build.

2.4 We have completed the first two years of our strategy and put in place a strong foundation for the remaining three years. As the mid-point of our strategy, the next year will be a key one to focus on delivery, which will be critical in achieving our 2026 objectives.

3. Background

3.1 As part of our strategy renewal and refresh process the Board held a workshop in March. The workshop was focused on identifying the key priorities for the refresh of our own strategy as well as issues which should be fed into the wider Group strategy review.

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4.   Discussion

4.1   We created Wheatley Homes Glasgow in 2022 with a renewed vision for housing in Glasgow. In creating Wheatley Homes Glasgow it was recognised that a step change and fresh approach would be required to deliver our vision.

4.2   We have gathered a wide range of insight and feedback from tenants over the course of our first year as Wheatley Homes Glasgow, such as through our pulse survey, rent setting and research projects such as the whole families research and through our Customer Voices focus groups. This provided us with a strong understanding of our customer priorities to inform our strategy refresh.

4.3   Taking the customer insight into account the Board affirmed that the following key priorities needed to be reflected in our first Wheatley Homes Glasgow strategy were:

- Recognising repairs as a key overall satisfaction driver and the delivery the service enhancements is the key focus;

- Having a structured and integrated approach to neighbourhoods aligned with a strong focus on the management of neighbourhoods;

- Our integrated neighbourhood approach should always extend to include our new build and regeneration; and

- Enhancing customer communication and recognising this is a major contributor to delivering excellent services.

4.4   The Board were clear that as we enter the mid-point of the strategy lifecycle and are clear on our customer priorities, the refreshed strategy should also be clear on how we will deliver on our objectives.

4.5   A summary of the proposed updates to each strategic theme within the strategy taking into account the feedback from the workshop, previously agreed changes, progress to date and changes in our operating environment is set out below:

Our vision

4.6   The vision statement will be updated to reflect our transition to Wheatley Homes Glasgow, with the emphasis placed on the vision for housing in Glasgow following the transfer of Cube stock and the creation of Wheatley Homes Glasgow.

Delivering exceptional customer experience

4.7   A number of the key principles within the chapter remain valid, in particular prioritising services which mean the most to tenants, reviewing and improving services with customers and the enhanced use of digital to engage with customers.

4.8   A key change in our operating model since 2021 was the creation of the Customer First Centre ("CFC"). The CFC was created to provide exceptional customer experience through quickly and efficiently dealing with customer enquiries at the first time of asking, having specialists on hand where needed and freeing up Housing Officers to spend more time in communities dealing with more complex and neighbourhood issues. This change in our operating model and its focus on delivering exceptional customer experience will therefore be reflected in the strategy.

4.9 To reflect the significance of the CFC in delivering exceptional service a new KPI for customer satisfaction with the CFC, 90% by 2026, is also proposed for inclusion in our strategy.

4.10 Over the last year our operating model supported us to undertake over 75,000+ visits to tenants (registered via GoMobile). It is therefore proposed that this chapter is also updated to reflect our operating model which focuses on presence in communities and direct engagement with customers rather than through processes such as Outcome Star.

4.11 It is proposed that we affirm as a KPI that our tenants receive an annual visit from their Housing Officer and this is tracked and reported. This is based on the annual visit being a formal element of how we understand the condition of our assets, identify any issues which should be fed into neighbourhood plans and proactively identify any service issues such as repairs required.

4.12 Our customer insight consistently identifies the repairs service as our customers' highest priority, however this is not currently articulated in the strategy. The Board discussed at length the proposed areas of focus for our repairs service and how it reflected customer insight and feedback, including:

- The new My Repairs service delivery approach;

- Feedback from the pilot and proposals to roll out Book it, track it, rate it; and

- The planned future, enhanced customer experience for repairs.

4.13 The Board endorsed the new My Repairs service delivery approach and customer experience as well as the roll out of 'Book it, track it, rate it'. Key areas of focus for the Board were tenant communication throughout the repairs experience and how we ensure that we have a strong performance focus to increase and sustain satisfaction. The importance of quality and timely communication with tenants was a theme throughout the workshop.

4.14 It is therefore intended that this chapter is expanded to more prominently recognise repairs as a customer priority. In recognition that the strategy should have a delivery emphasis the updated focus in the strategy will be on the delivery of the My Repairs vision for the service. The strategy will also be more explicit about the importance of excellent communication with tenants in improving satisfaction with the repairs service and achieving exceptional customer experience overall.

4.15 Taking into account the Board feedback at the workshop the Group Delivery Plan for 2023/24, set out in more detail in a separate paper, included specific strategic projects to:

- Further upgrade the City Building digital platforms to improve performance reporting and repairs scheduling; and
- Roll out of Book it, track it, rate it

4.16 In addition to this in response to the workshop feedback we will:

- be working closely with City Building to develop an expanded repairs performance reporting framework, with targets to be agreed by the Board;
- reporting Book it, track it, rate it satisfaction survey results to the Board; and
- asking the Group Scrutiny Panel to consider tenant communication as part of the thematic review on repairs, including how we communicate with tenants what they should expect from the service and how we communicate through the delivery of the service. The results of which will be reported to the Board when complete

4.17 It is also proposed we feed into the wider Group strategy review that it should more strongly reflect the importance of and our focus on clear and consistent excellent communication about the services we provide and, in particular as part of the repairs experience. As part of this we intend to initiate a number of immediate actions, including:

- Refreshing and documenting clear principles for how we communicate which will be informed through engagement with our customer voices;

- A communications campaign via all our communications channels (website, social media and written a booklet for all tenants), on our operating model so customers are clear for all of our services - who they should contact, how they can contact them and what they can expect when they contact us;

- A review of local newsletters to ensure they are clear about who tenants should engage on neighbourhood issues and how they can get in touch with a Housing Officer;

- Setting up Secure Messaging where tenants can use their online account to send a secure message to the neighbourhood team led by the Housing Officer but which includes our wider staff team responsible for delivering services in that area, which will be responded to within 36 hours;

- Reviewing our digital communications to ensure it is signposting customers to the right place.

4.18 Our strategy included reference to using community space in Multi Storey Flats as a possible means to provide online access and support for customers building their digital skills. While we do have some examples of where this is delivered in conjunction with community groups eg in Sandyhills and Cranhill, our new operating model envisages this type of support being available in our Community Hubs. It is therefore proposed that this is no longer a specific commitment in our strategy and an alternative use is set out in the Changing Lives and Communities theme.

4.19 It is proposed that the following key changes are made to the KPIs in this chapter:

- Add a target of 90% for customer satisfaction service for the CFC 2026; and
- Add annual customer visit measure with a target of 99%;

Making the most of our homes and assets

4.20 We have delivered a number of commitments in this chapter to date, including having made a significant difference for thousands of tenants with electric storage heating through new technology and are on track to exceed our £250m investment in existing homes target.

4.21 We have significantly, by some 50%, outperformed the target reduction in CO2. As a result of this we have increase the target by 50% for the remaining years of the strategy. We have also seen an increase in the number of properties achieving EPC band B of approximately 4%, with a further 10% now only marginally below EPC B. This translates directly into lower energy use and fuel bills for our tenants throughout the life of their tenancy.

4

4.22   We have also implemented our new way of working, including the changes to our corporate estate. This included rationalising our corporate estate whilst creating four Community Hubs to support our staff in agile working as they spend more time in communities and be accessible to communities.

4.23   The landscape in which we deliver new homes and regeneration has however changed significantly. Sustainability and Net-Zero are now much more significant features in our approach following the agreement of our Group sustainability strategy and changes in the legislative environment such as new build standards for heating and the Passivhaus Standard. It is intended that this chapter be strengthened and updated to reflect these areas, in particular the impact this will have on our future house types, as well as Board feedback regarding space standards and access to outdoor spaces.

4.24   A key feature in our vision for housing in Glasgow was our plans for building new homes and regenerating existing communities and the Board has reiterated building new homes remains a priority. The Board considered the strategic challenge of maximising the number of new homes we can deliver whilst ensuring the types of homes we deliver reflect all housing demand.

4.25   Taking into account the customer insight from the families research and the Glasgow City Council Local Housing Strategy the Board agreed that we should seek to build more family homes and set a specific target for doing so. It is proposed that this is both reflected in our strategy and raised with the Group Board as something our wider Group strategy should have reference to.

4.26   The Board considered the initial asset appraisals and strategic options of two areas, [redacted], which were identified as prospective areas for regeneration. The feedback from the Board was that the strategic options were the right ones and it is therefore proposed that the strategy now explicitly identifies these areas.

4.27   The Board were equally clear that they should not be explored based on the asset appraisal in isolation and needed to take into account the wider neighbourhood and community context.

4.28   Our customer insight and Board feedback throughout the year identified neighbourhoods and neighbourhood management as a key priority. Reflecting the discussion on regeneration, the Board strongly emphasised that we need a structured and integrated approach to neighbourhood assessment which includes asset appraisal as one aspect.

4.29   The Board identified examples of transport, health, policing, repairs, investment, open spaces and the environment and new build as elements which contribute to the wider neighbourhood.

4.30   It was agreed that a structured approach to assessment, which reflected the wide range of factors which contribute to a neighbourhood, was required. The Board agreed that the model below provided a platform for assessments. In doing so the Board whilst strongly reiterated that customer satisfaction with neighbourhoods will be heavily influenced by the environmental and estate management approach with frontline staff such as NETS, Housing Officers, MyRepairs staff, ASB staff and Locality Directors working together to deliver an integrated approach to exceptional neighbourhood and estate management.

The scoring of each neighbourhood informs the creation of the Neighbourhood Plan.
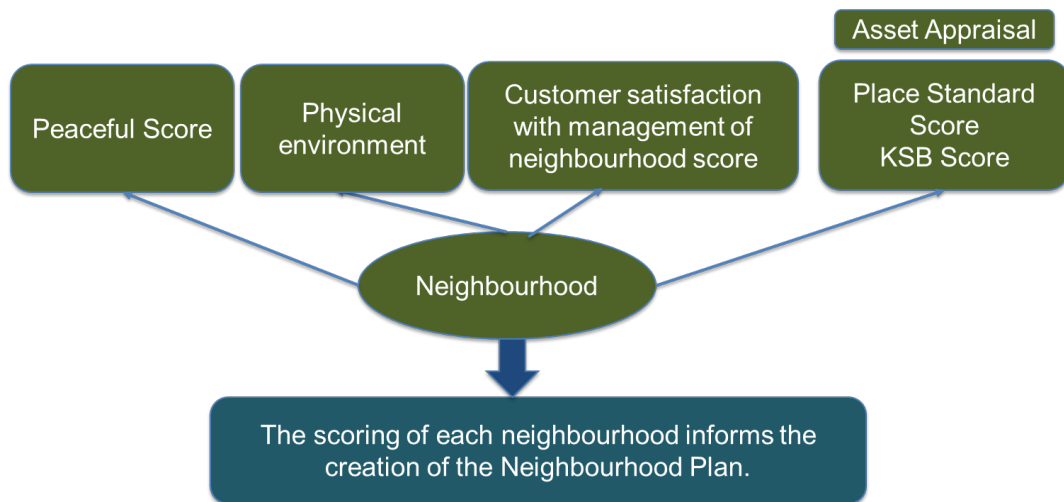
4.31   In recognition that this is a key priority our approach will be piloted in one neighbourhood and that the assessment be reviewed by the Board before being extended to other neighbourhoods. As indicated above, the Board feedback was that the assessment should include detail on how we have understood the key drivers for satisfaction within each neighbourhood, recognising they will be different for each.

4.32   Taking into account the Board feedback it is proposed that this chapter in our strategy be updated to have a stronger emphasis on neighbourhoods. This will include incorporating our agreed vision, the planned approach to have neighbourhood plans covering all our homes and that the language in the strategy always links new build and regeneration with the need to place this within an integrated neighbourhood approach.

4.33   Our strategy initially envisaged us having a delivery role, through the purchase and ownership of network infrastructure, in relation to digital connectivity, particularly in relation to Multi Storey Flats ("MSFs"). Our focus has been however pivoted to partnership working with private structure infrastructure providers to allow our tenants to access low cost, high speed broadband and supporting network deployment across our estate including MSFs. This includes the granting of wayleaves to allow network infrastructure to be put in place, in particular in our MSFs.

4.34   An example of this is our recently agreed recent partnership with Giggle Broadband, where we support network deployment and in return our customers will receive access to quicker and cheaper than market price broadband, it is delivered at a pace that would not happened otherwise and we secure a contribution to the Wheatley Foundation. We anticipate achieving at least 50% coverage of our properties under this and similar types of partnerships, such as City Fibre.

4.35   In terms of KPIs within this chapter the proposed key updates are:

  ▪ New homes and investment levels updated to reflect the latest 5 year plans (as set out in the separate Delivery Plan paper);
  ▪ KPI added to have a neighbourhood plan for all neighbourhoods by 2026; and
  ▪ A KPI added for the number of family homes approved.

6

<u>Changing lives and communities</u>

4.36 The context for this chapter of our strategy has changed significantly, with the cost of living crisis creating further challenges for our customers and communities. Many of the elements remain relevant, such as our commitment to homelessness, supporting tenants and communities into jobs and training and leveraging community benefits.

4.37 There are however areas where our approach has evolved. During the pandemic our focus was on immediate support in relation to food security issues through issuing vouchers. We have since however worked with partners to develop a more sustainable future model through the Kennishead Larder and have others already being developed. It is proposed that this chapter therefore sets out our aim to replicate this type of model, where appropriate, using our multis and a small amount of initial funding to support a wider and more sustainable food security approach.

4.38 Since the strategy was agreed we have further developed our Livingwell model, which continues to be very popular with tenants. Our future focus is now on the expansion of our Livingwell Model and this would supersede our initial plans to achieve a similar outcome through the expansion of the Hub and Cluster model. The Hub and Cluster model does not currently have a sustainable future funding partner path and Livingwell allows us to have more control over the service.

<u>Developing our shared capability</u>

4.39 We have already delivered the key elements of this chapter, with our new operating model and agile working approach in place. The change of operating model and corporate estate have merited reconsidering the blend between virtual and in person learning.

4.40 Taking this into account it is proposed that we update the Community Academy section to reflect both our Community Hub approach and the appetite we have seen from tenants to engage with us digitally. This will see our focus primarily be on our Community Academy being delivered digitally.

4.41 In terms of KPIs within this chapter it is proposed the key updates are as follows:

- KPI added to set a target for how many customers engage with our virtual Community Academy learning

<u>Enabling our ambitions</u>

4.42 The operating context within which we let homes, collect rent and increase rents has changed significantly since the strategy was agreed. The cost of living crisis, sustained increased demand for repairs and high inflation have impacted our ability to do each. Based on this the Board has already agreed changes to the KPIs in relation to rent increases, arrears and days to let and these will not be reflected in the strategy.

4.43 The Board discussed our progress to date within the context of our digital service offering. This is set within the context of our strategy aspirations having been prior to the creation of the Customer First Centre. However the content of the strategy remains highly relevant in terms of enhancing our digital services, engaging customers to ensure what we provide is relevant and ensuring that we become a more digitally mature organisation.

4.44 The theme of the quality of communication and information provision was one reiterated by the Board within the context of our digital services. The Board also discussed the uptake levels for online accounts and their usage for transacting with us. In considering how we can increase the usage of online services the Board agreed that we should take action to promote and drive uptake with our online services. It is intended that this feedback is raised with the Wheatley Solutions and Group Board.

4.45 In parallel with this, given that online repairs is a key target the strategic project for repairs now includes a specific milestone to undertake a programme of engagement with tenants on online repairs. This will build on the initial phase of engagement we have already undertaken through focus groups and an online survey. This will the directly influence updates to our online repairs which would make it more appealing and easier to use for tenants.

4.46 A specific priority is our website and it is intended as part of our planned engagement with customer voices on our communication principles we will also get their feedback on the current website, including: how well it communicates the services we provide, and what they should expect from us; the types of information the website tenants want from the website; and how intuitive the layout is.

4.47 In terms of the chapter more widely, it is proposed that it contains a specific reference to the work we will do to ensure that rents remain affordable, including through business efficiency.

4.48 In terms of KPIs within this chapter it is proposed they will be updated as follows:
   ▪ Gross rent arrears target and days to let target amended to reflect 2023/24 Delivery Plan
   ▪ 2.9% rent increase removed

   Next steps

4.49 Subject to Board agreement that the above reflects its discussions we will reflect the feedback from the workshop in an updated strategy document which will be the first for Wheatley Homes Glasgow.

4.50 It is proposed the outcomes of actions identified, such as customer and scrutiny panel engagement on repairs communication and the website, will be added to the action list and reported to the Board in September.

5. **Customer Engagement**

5.1 The strategy workshop focused strongly on customer insight and feedback following customer engagement. As a result of this we have identified areas where we wish to undertake further customer engagement.

6. **Environmental and sustainability implications**

6.1 There are no specific environmental or sustainability implications associated with this report.

7. **Digital transformation alignment**

7.1 As set out in the body of the report.

8. Financial and value for money implications

8.1 There are no financial or value for money implications associated with this report.

9. Legal, regulatory and charitable implications

9.1 There are no legal, regulatory or charitable implications associated with this report.

10. Risk Appetite and assessment

10.1 We have no single risk appetite in relation to strategy. Our risk appetite statements reflect each individual element of our strategy.

11. Equalities implications

11.1 There are no equalities implications associated with this report.

12. Key issues and conclusions

12.1 Our strategy workshop focused on aligning customer insight and priorities with the priorities in our strategy. Based on the Board's feedback our revised strategy will have an enhanced focus on repairs, the integration of regeneration and neighbours and customer communication. We will also feed these areas into the wider review of the Group strategy.

12.2 The wider review of our strategy will bring it up to date to reflect the changes in our operating context, progress we have made in a number of areas and reflect areas where we want to refine our focus.

13. Recommendations

13.1 The Board is asked to agree the proposed areas of focus and updates to inform the creation of the new Wheatley Homes Glasgow strategy.

LIST OF APPENDICES:

Appendix 1 – [redacted] can be found here

Report

To:	**Wheatley Homes Glasgow Board**
By:	**Aisling Mylrea, Wheatley Homes Glasgow Director**
Approved by:	**Steven Henderson, Group Chief Executive**
Subject:	**2022/23 year end performance and Annual Return on the Charter**
Date of Meeting:	**19 May 2023**

_____

1. Purpose

1.1 This report presents year end performance for 2022/23, including:

- Draft Annual Return on Charter results for 2022/23 and seeks approval for submission to the Scottish Housing Regulator;
- Non Charter strategic results and performance measures;
- Delivery Plan strategic projects.

2. Authorising and strategic context

2.1 The Group Board approved the overarching structure for the implementation of our strategy via our Group Performance Management Framework ("PMF") at its meeting in June 2021. The Board agreed the programme of strategic projects and performance measures and targets for 2022/23 in April 2022.

2.2 This Board subsequently agreed our own specific targets in May 2023. The figures reported for the Charter are subject to further validation and checks by the Scottish Housing Regulator.

3. Background

3.1 We are responsible for meeting the standards and outcomes set out in the Scottish Social Housing Charter and are accountable to our tenants and customers for how well we do so. The Charter is part of the Scottish Housing Regulator's (SHR's) assessment of how these outcomes are being met. All RSLs and Local Authority housing services are required to complete the Charter indicators and submit these by 31 May each year. The SHR publishes results for all organisations at the end of August each year.

3.2 The SHR uses the Charter results to focus attention on important risks and key aspects of landlord performance. The outcomes apply to all social landlords, with the exception of those relating to Local Authorities for their homeless duties and to councils and registered social landlords that manage sites for Gypsies / Travellers.

3.3   There are 30 Charter measures, of which 7 are collected by customer satisfaction surveys. Following agreement with the SHR, our customer satisfaction survey will be undertaken this year. We will therefore report comprehensive survey-based measures in line with the previous returns.

3.4   Cube's properties migrated to WH Glasgow in April 2021. To reflect the different rent billing cycles for Cube customers, for financial rent-based measures we report WH Glasgow A and WH Glasgow B. WH Glasgow B distinguishes those previous Cube customers whose rent is billed differently.

4.   Discussion

4.1   Our external operating environment continued to be challenging during 2022/23, with the cost of living crisis immediately following the pandemic and high inflation continuing to impact our customers, communities and wider business. Within this context we achieved strong performance in several key areas, including tackling homelessness, arrears and days to let.

4.2   This report outlines our performance against targets and strategic projects for 2022/23 as at the end of the year. This includes annual results with those measures that will be reportable to the Scottish Housing Regulator as part of the Charter 2022/23.

4.3   It also includes the measures added for 2022/23 covering areas of performance related to the implementation of our engagement model, visibility of the Customer First Centre and monitoring of the strength of our Board and administration. Unless stated, measures are reported for the year.

4.4   We also delivered or directly benefitted from a number of major projects and wider activities, such as:

- Implementation of our engagement framework, recruitment of over 1000 Customer Voices and a community led development approach introduced;
- Major changes to our repairs service, including core IT platform upgrades and the creation of a collocated My Repairs team ;
- The advancement of the major strategic regeneration project at Wyndford;
- Reorganisation of the RSL borrower group, in particular to support Wheatley Developments and our future capacity to deliver new homes;
- Strategic Sustainability Framework agreed and pathway to Net Zero Group created;
- Exceeded out carbon reduction targets by over 50% and improved 4% of our stock up to an EPC band B
- Strategic homelessness policy implemented; and
- New operating model for customers and staff implemented.

4.5   Draft Annual Charter return measures will firstly be discussed, followed by progress against other Board measures shown by strategic theme. Thereafter, an update will be provided on the year end position with strategic projects. Where appropriate wider sector performance context, drawn from the Scottish Housing Network and Housemark, is included.

Charter Returns

4.6   This section presents a summary of key draft Charter measures, highlighting where they are also a strategic result. A full set of draft Charter results against targets is provided in **Appendix 1**.

<u>Gross Rent Arrears</u>

4.7   Our target for gross rent arrears was 6.10%, reflecting the highly challenging economic context and cost of living crisis impacting our customer and communities. A key focus throughout the year has been supporting tenants as much as possible through these challenges. As set out in Table 1 our end of year result was better than our target at 5.84%. This represents strong performance following a reduction in arrears over the final two periods.

Table 1

Gross Rent Arrears (Charter)	2022/23 Results	2022/23 Target		2021/22 Results
WH Glasgow A	5.87%	N/A	-	5.15%
WH Glasgow B	5.47%	N/A	-	5.19%
WH Glasgow Combined	5.84%	6.1%	🟩	5.16%

4.8   The following chart shows the trend in our gross rent arrears against target throughout the year.

Chart 1

Wheatley Homes Glasgow
Gross Rent Arrears 2022/23 against Target
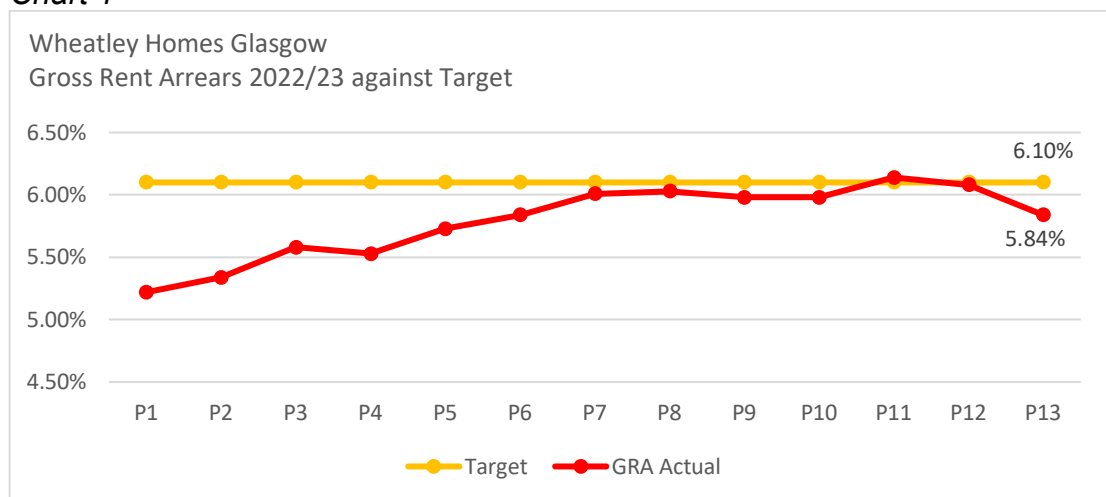
<u>Average Days to Re-Let</u>

We let properties on average at 20.61 days for the full year, with an improvement compared to 23.48 days last year. This is set within the context of the Scottish Housing Network data showing that the average for RSLs and Local Authorities was twice as long at 30 days. The chart below shows the performance trend over the year:

Chart 2

WHG Average Days to Re-Let (ARC) 2022/23 - In-period

3

Table 2

Average days to re-let (Charter)	2022/23 performance		2022/23 Target	2021/22 Results	SHN sector average
WH Glasgow	20.61	🟥	16	23.48	30

4.9　One of the challenges currently impacting our void turnaround is the delays in resolving utility issues such as debts on meters or missing pre-payment keys where engagement from utility providers is an issue. This is a sector wide challenge and we are working with stakeholders and engaging utility providers to seek improvements in turnround times.

Tenancy Sustainment

4.10　We ended the year fractionally below target for tenancy sustainment. For the ARC measure this translated to just 26 (of 3037) lets and 12 (of 2,947) new lets for the revised measure (the revised measure excludes deaths and those moving to a sister RSL property transferring to another property).

4.11　Tenancy sustainment considers new lets made in the previous reporting year (2021/22) to allow for 365+ days specified by the Regulator.

Table 3

Tenancy Sustainment	Charter 2022/23	Target		Charter 2021/22	Revised 2022/23	Target		Revised 2021/22
WH Glasgow	89.13%	90%	🟨	92.26%	90.57%	91%	🟨	93.85%

Repairs

4.12　The average time taken to complete our emergency and non-emergency repairs is shown in the table below. We are above target for both indicators, with sustained high demand for our repairs service and a period of severe weather conditions in December impacting performance. We completed 4.4% more emergency repairs and 35% more non-emergency repairs compared to last year.

4.13　We have made a number of changes to our repairs service over the last six months to improve future performance, in particular, our My Repairs team co-located with City Building Glasgow. Over the first period of this year the average number of days for non-emergency repairs has reduced to 7.35 days. This is in line with what the Scottish Housing Network average was (7 days) for 2022/23

Table 4

Average time to complete (Charter)	Emergency (hours)			Non-emergency (days)		
	Target	2022/23		Target	2022/23	
WH Glasgow	3.00	3.36	🟥	5.50	8.88	🟥

4.14　There has been an improvement in the percentage of repairs completed right first time compared to last year at 91.47%.

Table 5

Percentage of repairs completed right first time (Charter)	2021/22	2022/23	Target	
WH Glasgow	91.03%	91.47%	92.0%	🟨

4

4.15   Satisfaction with repairs has improved from 88.8% last year to 89.8% this year. This is above the wider sector average data from Scottish Housing Network which shows an average of 89.27% and the wider UK position where the median was 86.4%.

Table 6

Satisfaction with repairs (Charter)	2021/22	2022/23	Target	SHN average	Housemark median
WH Glasgow	88.8%	89.80%	89% 🟩	89.27%	86.4%

4.16   Development of new approaches in 2022/23 to collection, monitoring and reporting of customer experiences aims to increase the number of completed surveys in future years. We are undertaking repairs satisfaction call backs to provide us with an ongoing source of insight. The results for the year to date are showing satisfaction levels of 91%.

Gas Safety

4.17   We continue to be 100% compliant for gas safety checks.

Table 7

Gas safety checks unmet (Charter)	2021/22	2022/22
WH Glasgow	0	0

SHQS

4.18   Our Charter 2022/23 results for SHQS and EESSH are shown in the table below, alongside figures for the previous year. They reflect the most recent guidance from the SHR in relation to electrical testing. Over this year nearly 5,000 homes more homes have a valid EICR as we have forced access where necessary.

Table 8

SHQS and EESH	Percentage of properties meeting the SHQS		Percentage of properties meeting the EESSH	
	2021/22	2022/23	2021/22	2022/23
WH Glasgow	89.69%	99.29%	99.10%	100.00%

4.19   Properties which do not meet SHQS and/or EESSH can be either because they fail the criteria or are subject to exemption or abeyance. In terms of EESSH fails, we have just 2 properties. Our exemptions and abeyances for SHQS and EESSH are detailed in the following table.

Table 9

SHQS and EESH	SHQS Exemption 2022/23	SHQS Abeyance 2022/23	% of total stock with SHQS Exemption or Abeyance 2022/23	EESSH Exemption 2022/23	% of total stock with EESSH Exemption 2022/23
WH Glasgow	33	270	0.71%	0	0.00%

Medical Adaptations

4.20   During 2022/23 we completed 1,225 medical adaptations on an average of 23.06 days, an improvement from 38.19 days in 201/22. This reduction improves the quality of life and independence for tenants. The table below shows the number of households waiting, completions and the average time to complete adaptations.

Table 10

Medical Adaptation	Households Waiting 2021/22	Households Waiting 2022/23	Number Completed 2022/23	Average Days to Complete	Target
WH Glasgow	100	81	1,225	23.06	35 🟩

Summary Charter Performance

4.21   Within the context of a very challenging external environment and sustained high demand for repairs we still met or were only marginally below 80% of our targets. A full breakdown of our performance against the full set of measures is provided in Appendix 1.

Other Key Performance Measures

4.22   The following sections present draft year-end performance against non-Charter strategic and compliance measures by strategic theme. The dashboard for Board level measures is shown at **Appendix 2**.

⊘   **Delivering Exceptional Customer Experience**

Customer First Centre

4.23   The CFC had steadily improved performance up until December with grade of service of 83.39% being achieved for calls being answered within 30 seconds against our performance target of 80%

4.24   The impact of the severe weather in December led to a significantly higher demand level in December and January, which in turn impacted average waiting times. This impacted year-end performance where the CFC answered 76.04% of calls from our customers within 30 seconds against a target of 80%.

4.25   The CFC reported an average wait time for our customers of 52.66 seconds this year. Recent feedback from Housemark shows average wait times increasing nationally, with the average doubling from around 50 seconds in 2019/20 to over 100 seconds. This reaffirms that whist above our target the CFC's year-end average wait time for our customers remained comparatively strong performance.

4.26   A separate Delivery Plan paper sets out how we intend to refocus the CFC measures for 2023/24 to focus on customer satisfaction as they principal measure rather than can handling times.

4.27   Overall, the call abandonment rate for our customers this year was 4.12%, better than the target of <7% and the typical industry benchmark of 5%. An

external benchmarking report for 2022 has noted an increase in call abandonment figures across the sector to c9%.

4.28   At year-end, a First Contact Resolution level for Customer Service Advisors of 88.99% was achieved (715,652 of 804,157 calls handled), just under the 90% target for the year.

4.29   The % of CFC customer interactions that are passed to Housing and Lowther staff for resolution has remained on target throughout the year, at 6.15% year-end against the 10% target.

Table 11

Measure	2021/22 Value	2022/23 Value	Target	Status
WHG - % calls answered <30 seconds (Grade of Service)	N/A	76.04%	80%	🔺
WHG - Average waiting time (seconds)	N/A	52.66	30	🛑
WHG - Call abandonment rate	N/A	4.12%	7%	✅
Group - % first contact resolution at CFC (Customer Service Advisors)	92.33% (March 2022)	88.99%	90%	🔺
Group – Percentage of CFC customer interactions that are passed to Housing and Lowther staff for resolution	N/A	6.15%	<10%	✅

Complaints Handling - SPSO

4.30   Our Charter measures on complaints are included in Appendix 1 and show that 94.63% of complaints (stage 1 and 2) were responded to in full and the average time for a full response (stage 1 and 2) was 5.79 working days. Stage 2 complaint timescales improved to within the 20-day target this year at 18.24 working days on average, compared to 20.78 working days last year.

4.31   Repairs constitute the biggest proportion of complaints, as we would expect given it is the most frequent service we provide. Estate services and Anti-social behaviour are also common issues for complaints. We continue to learn from the analysis of these complaints and this learning is being provided in more detail in the separate complaints handling report to the Board.

4.32   In the last quarter, the new Business Improvement Team has been established and work has taken place on a complaints improvement plan with a focus on:

   ▪ Increased awareness of the importance of complaints
   ▪ Improved analysis and learning
   ▪ Improved quality of response.

4.33   Working with colleagues across Group, the Business Improvement Team will use upgraded reporting to ensure we effectivity manage, monitor, understand and learn from complaints. These performance measures include those reported to the SHR and, in the future, to SPSO. The key performance measures to the end of 2022/23 for Charter and SPSO measures are set out below, with further detail included in Appendix 3.

Table 12

Charter - average time for a full response to complaints (working days)				
	2021/22		2022/23 – Stage 1 - 5-day target, Stage 2 - 20-day target	
	Stage 1	Stage 2	Stage 1	Stage 2
WHG	3.98 🟩	20.78 🟨	4.23 🟩	18.24 🟩

Table 13

SPSO Indicator 2 - number and % of complaints at each stage that were fully closed within timescales of 5 and 20 working days			
	Stage 1 - responded to within 5 working days	Stage 2 - responded to within 20 working days	Escalated complaints - responded to within 20 working days
	2022/23	2022/23	2022/23
WHG	88.11%	90.63%	93.46%

Customer Voices

4.34 Our customer voice programme exceeded all strategic engagement targets for 22/23. This included the recruitment of over 1000 customers and carrying out around 800 events and activities. These activities included:

- Surveys;
- Local neighbourhood walkabouts to look at neighbourhood issues;
- Online or in-person focus groups to explore issues around housing service improvement;
- Rent focus groups;
- Scrutiny sessions; and
- Community safety and investment panels and;
- Other local events such as fun days, coffee mornings and open days.

4.35 A more detailed update on customer insight activity, including the works proposed to be initiated in relation to our strategy (covered in a separate agenda item) will be prepared for the next meeting.

🏠 Making the Most of Our Homes and Assets

New Build Programme

4.36 Over the course of the year there have been significant challenges on the delivery of new build such as cost, supply chains and contractor capacity. We completed 119 handovers within the financial year against a business plan target of 155.

4.37 This included the successful handovers of Damshot, Hurlford and Watson Street as well as 20 handovers at Sighthill. We continue to face challenges at Sighthill in relation to programme adherence and quality control. The remaining 36 units on site are assumed for handover in quarter 1 of this year, however we continue to liaise with Keepmoat over this. Liquidated and Ascertained damages continue to be applied to the project.

Table 14

Sites	Handovers 22/23	Target 22/23	Diff.
WHG	119	155	-36
Damshot (Social)	26	26	0
Hurlford Avenue (MMR)	27	27	0
Watson St Ph2 (MMR)	46	46	0
Sighthill (MMR)	20	56	-36

<u>Investment in Improvement, Modernising and Maintaining Homes</u>

4.38   We have delivered our expected investment spend relative to budget and met all output areas for gas and electric heating, kitchens and windows with a spend of over £51m.

<u>Planned to Reactive Repairs Spending</u>

4.39   We have set a Strategic Result for each year over the life of the strategy to achieve a ratio of planned to reactive repairs spend of 60:40. Our ratio for 2022/23 is tabled below. As a result of the decision to prioritise reactive repairs due to the sustained high demand levels in 2022/23, we show an adverse variance in the percentage of planned spend compared to 2021/22.

Table 15

Percentage Spend 2022/23	Planned (2021/22)	Planned (2022/23)	Variance (Mar '22 to Mar '23)	Reactive
WH Glasgow	65%	48.4%	-16.6	51.6%

<u>Volume of Emergency Repairs</u>

4.40   The table below shows our position against the strategic result to reduce the volume of emergency repairs by 10% by 2026, based on the original use of 2021/22 as the baseline year. The demand for repairs during 2022/23 and volume of emergencies completed has increased by 4.4% compared to the previous year.

Table 16

Area	Completed Emergency Repairs		
	2021/22	2022/23	Variance to 2021/22
WH Glasgow	68,246	71,251	4.40%

👤 Changing Lives and Communities

<u>Peaceful Neighbourhoods</u>

4.41   Overall, the number of Anti Social Behaviour ("ASB") incidents decreased from 4,800 last year to 4,766. Noise nuisance remains the biggest issue in relation to ASB within our communities, where 53.6% (2,500) of all reported ASB related to noise nuisance.

4.42 To help with noise nuisance, our Prevention & Solutions Hub was created to tackle these repeat cases in a focussed manner to prevent further future incidents occurring. The approach takes an early intervention methodology to ASB, to prevent the behaviour from escalating further in terms of frequency and severity.

4.43 The focus for 2023/2024 will be to review the operating model within the CIP by redesigning our approach to safer communities. Part of this will be to embed the Prevention and Solutions approach to continue to reduce the volume of repeat complaints of anti-social behaviour and improve the number of 'peaceful' tenancies within our communities.

Accidental Dwelling Fires

4.44 We have a Strategic Result to reduce accidental dwelling fires by 10% over the life of the strategy. We have had 112 accidental dwelling fires in 2022/23, a reduction from the 121 last year. The quarterly profile of these throughout this year is shown in the table below.

Table 17

Number of recorded accidental dwelling fires	2022/23			
	Q1	Q2	Q3	Q4
WH Glasgow	18	38	38	18
Total	**112**			

4.45 In our efforts to reduce the number of Accidental Dwelling Fires experienced, the number of Home Fire Safety Visits (HSFV) undertaken by the Fire Safety Team has significantly increased in the last 4 years.

Reducing Homelessness

4.46 We made 1,318 lets to homeless applicants this year, 60% of the Group total (2,213). We did not meet our target of 60% of relevant lets due to priority letting to Wyndford customers as has previously been indicated to the Board.

Table 18

Percentage of Lets to Homeless Applicants	Relevant lets			Charter Result	
	2022/23	Target		2021/22	2022/23	2021/22
WH Glasgow	51.9%	60%	🟥	58.3%	50.2%	55.7%

Jobs and Opportunities

4.47 Foundation programmes focus on supporting our customers access to jobs, training, and apprenticeship opportunities, supporting vulnerable children, and alleviate poverty.

4.48 Delays in newbuild developments in Glasgow have contributed to less opportunities than projected being created for our customers, however all customers referred to Wheatley Works have been supported. We would expect the delays to positively impact our performance in future years as they do go on site and complete.

Table 19

10

Strategic Results	2022/23 Target	2022/23 performance	
4,000 jobs, training and apprenticeship opportunities delivered	370 - WH Glasgow	298 - WH Glasgow	🟥
10,000 vulnerable children benefit from targeted Foundation programmes	780 - WH Glasgow	798 - WH Glasgow	🟩
20,000 Wheatley Customers accessing services which help alleviate poverty	3,638 - WH Glasgow	5,125 - WH Glasgow	🟩

🤝 Developing our Shared Capability

Sickness Absence

4.49   We lost 2.74% of working time due to staff sickness absence in the year 2022/23 (compared to our target of 3%), an improvement from the 2.77% year to date result reported at the end of Quarter 3.

Table 20

Sickness Rate	Target	2022/23		2021/22	
WH Glasgow	3%	2.74%	🟩	2.29%	🟩

4.50   Looking externally the Office for National Statistics (ONS) Labour Force Survey published on 26 April 2023 estimates that 185.6 million days were lost to sickness in the UK in 2022 - a rise of 35.8 million days compared with the year before and the highest on record. ONS also report that the most common reason for sickness absence across the UK was minor illnesses, which accounted for 29.3% of absence.

Summary of Strategic Project Delivery

4.51   The full list of our strategic projects is attached to this report as **Appendix 2**. Eight projects completed during quarter 4 of 2022/23:

- NETs Digital Service
- Corporate Estate
- Engagement Framework – Phase 2
- Strategic Sustainability Framework
- Asset Strategy for Glasgow
- Meets the Needs of Owners
- Review of Group Allocations Policy and Systems
- Implement Year 2 of the Group Homelessness Framework

4.52   While the vast majority of our strategic projects have now concluded, 4 did not fully conclude within the anticipated milestones. Work continues into quarter one 2023/24 on the following projects:

- CFC second interim review
- RSL digital services model (to complete in month)
- Wyndford Regeneration (carried forward as a project into 2023/24)

4.53   For the CFC second interim review, a full independent evaluation will be presented to Group Board in June. The updated Strategic Agreement with

GCC is showing as overdue. However, this has been approved by Group and relevant RSL Boards and is currently progressing through GCC committees.

5.   Customer Engagement

5.1   The successful implementation of our Stronger Voices Framework and recruitment of over 1000 customers will play a key role in supporting our future customer engagement.

5.2   A number of strategic projects over the year have involved customer engagement as part of the project and a number of projects were focussed on enabling future customer engagement.

6.   Environmental and sustainability implications

6.1   A key project for 2022/23 was the development of a strategic sustainability framework. The framework has now been approved and work is underway to launch the framework with staff, reflect the framework in our strategy refresh and develop appropriate measures and targets as part of the review of these for 2023/24.

7.   Digital transformation alignment

7.1   Our strategy is underpinned by digital transformation and a number of projects delivered over the year directly related to our digital programme.

8.   Financial and value for money implications

8.1   There are no direct financial implications arising from this report. Any financial requirements related to actions and projects within the report are subject to separate reporting and agreement.

9.   Legal, regulatory and charitable implications

9.1   The Scottish Housing Regulator requires an Annual Return on the Charter from each RSL. Key indicators within this return are also included in quarterly performance reporting. RSL Boards approve the returns, and the figures are included in the year-end performance report to the Board. RSLs are also required to involve tenants in the scrutiny of performance, which the Group does through its Tenant Scrutiny Panel, and to report to tenants on performance by October each year.

10.   Risk Appetite and assessment

10.1   Our agreed risk appetite in relation to board governance is "cautious". This level of risk tolerance is defined as "preference for safe delivery options that have a low degree of inherent risk". We mitigate this risk by reserving the agreement of individual performance targets and strategic projects to Boards and providing the Board with regular updates in relation to progress against these targets and projects.

11.   Equalities implications

11.1   Project monitoring and evaluations consider equalities information and Equalities Impact Assessments are undertaken at the outset of new programmes to ensure compliance with equality legislation, where applicable.

11.2   Our equality, diversity and inclusion project, under the governance programme stream, is complete. Our newly revised equality, diversity and inclusion policy will provide a stronger basis on which we can advance our ambitions.

11.3   The expansion of our Customer Voices and collation of monitoring information will support co-creation and influence which is based on a more diverse range of perspectives.

12.   Key issues and conclusions

12.1   Despite a challenging operating context of a cost of living crisis and high inflation we performed strongly in a wide range of areas, including relative to wider sector benchmarking. The support we provided to tenants over the year ensured that our arrears levels remained below our target.

12.2   We also delivered strong performance in relation to gas safety checks, average time to complete medical adaptations and sickness absence.

13.   Recommendations

13.1   The Board is asked to:

1) Approve the draft Annual Return on the Charter results for submission to the Scottish Housing Regulator;
2) Delegate authority to the Group Director of Housing and Property to make any non-material updates to finalise the results prior to submission; and
3) Note the outturn year end performance against non-Charter measures and strategic projects.

List of Appendices

Appendix 1 – Draft Annual Return on the Charter 2022/23
Appendix 2 – Board Measures Dashboard 2022/23
Appendix 3 - Complaints
Appendix 4 – Strategic Projects Dashboard 2022/23

	Appendix 1	Wheatley Homes Glasgow		
	Charter Indicators	2021/22 Results	2022/23 Draft Results	2022/23 Target
	ARC survey questions measured annually. Annual results for ARC submission are from 2019/20.			
01	Percentage of annual tenants satisfied with the overall service	87.64%	87.64%	N/A
02	Percentage of annual tenants who feel their landlord is good at keeping them informed about their services and decisions	88.17%	88.17%	N/A
03	Percentage of complaints responded to in full at Stage 1 and at Stage 2 (combined)	97.67%	94.63%	96%
04	Average time in working days for a full response at Stage 1 and at Stage 2 (combined)	6.05	5.79	6
05	Percentage of annual tenants satisfied with the opportunities given to them to participate in their landlord's decision making processes	80.11%	80.11%	N/A
06	Percentage of stock meeting the Scottish Housing Quality Standard (SHQS)	89.69%	99.29%	99.36%
07	Percentage of annual existing tenants satisfied with the quality of their home	87.05%	87.05%	N/A
08	Average time to complete emergency repairs (hours)	3.12	3.36	3
09	Average time to complete non-emergency repairs (working days)	8.07	8.88	5.5
10	Percentage of reactive repairs completed right first time	91.03%	91.47%	92%
11	Number of times in the reporting year that you did not meet your statutory obligation to complete a gas safety check within 12 months of a gas appliance being fitted or its last check.	0	0	0
12	Percentage of tenants satisfied with repairs or maintenance carried out in last 12 months	88.77%	89.76%	89%
13	Percentage of annual tenants satisfied with the landlord's contribution to the management of the neighbourhood they live in	82.01%	82.01%	N/A
14	Percentage of tenancy offers refused during the year	22.24%	19.89%	Contextual
15	Percentage of anti-social behaviour cases reported in the last year which were resolved	100%	100%	98%
16	Percentage of new tenancies sustained for more than a year - overall	92.26%	89.13%	90%
17	Percentage of lettable houses that became vacant	7.83%	6.92%	8%
18	Percentage of rent due lost through properties being empty	0.55%	0.49%	0.6%
19	Number of households currently waiting for adaptations to their home	100	81	Contextual
20	Total cost of adaptations completed in the year by source of funding (£)	£2,533,158	£2,645,431	Contextual
21	Average time to complete approved applications for medical adaptations (calendar days)	38.19	23.06	35
22	Percentage of court actions initiated which resulted in eviction - overall	69.57%	27.84%	Contextual
23a	Percentage of referrals under Section 5, and other referrals for homeless households made by the local authority, that resulted in an offer	78.54%	94.28%	Contextual
23b	Percentage of offers made to LA Section 5 and other referrals for homeless households that result in a let	113.12%	84.15%	Contextual
25	Percentage of annual tenants who feel that the rent for their property represents good value for money	79.43%	79.43%	N/A
26	Rent collected as % of total rent due	98.93%	97.45%	Contextual
27	Gross rent arrears (%)	5.16%	5.84%	6.10%
28	Average annual management fee per factored property.	£187.27	£194.48	Contextual
29	Percentage of annual owners satisfied with the factoring service	60.23%	60.23%	N/A
30	Average length of time taken to re-let properties (calendar days)	23.48	20.61	16.00

Appendix 2 - WHG Board - Delivery Plan 22/23 - Strategic Measures

1. Delivering Exceptional Customer Experience

Measure	2021/22	2022/23		
	2021	2022		
	Value	Value	Target	Status
Average time for full response to all complaints (working days) - overall	6.05	5.79	6	✅
Average time for full response to all complaints (working days) - Stage 1	3.98	4.23	5	✅
Average time for full response to all complaints (working days) - Stage 2	20.8	18.24	20	✅
Group - % of first contact resolution at CFC	92.33% (March 2022)	88.99%	90%	🔺
Group - Call abandonment rate	3.81% (March 2022)	4.72%	7%	✅
WHG - Call abandonment rate	New	4.12%	7%	✅
Group - % calls answered <30 seconds (Grade of Service)	85.42% (March 2022)	76.79%	80%	🔺
WHG - % calls answered <30 seconds (Grade of Service)	New	76.04%	80%	🔺
Group - Average waiting time (seconds)	30 (March 2022)	57.64	30	🛑
WHG - Average waiting time (seconds)	New	52.66	30	🛑
Number of customers involved in Customer Voices Programme	New	1,050	1,000	✅
Number of customer voices activities carried out	New	793	434	✅
Number of WHG Geographical panel sessions	New	11	9	✅
Number of customers involved in Wheatley Homes Glasgow Geographical panels	New	316	300	✅
Number of Scrutiny focus groups	New	12	12	✅

Measure	2021/22	2022/23		
	2021	2022		
	Value	Value	Target	Status
% new tenancies sustained for more than a year - overall	92.26%	89.13%	90%	🔺

2. Making the Most of Our Homes and Assets

Measure	2021/22	2022/23		
	2021	2022		
	Value	Value	Target	Status
Reduce the volume of emergency repairs by 10% by 2025/26	Apr to Mar21/22 – 68,246	71,251	+4.4%	🛑
Average time taken to complete emergency repairs (hours) – make safe	3.12	3.36	3	🛑
Average time taken to complete non-emergency repairs (working days)	8.07	8.88	5.5	🛑
% reactive repairs completed right first time	91.03%	91.47%	92%	🔺
Number of gas safety checks not met	0	0	0	✅
% of tenants who have had repairs or maintenance carried out in last 12 months satisfied with the R&M service	88.77%	89.80%	89%	✅
Average time to complete approved applications for medical adaptations (calendar days)	38.19	23.06	35	✅
% Planned repair spending	64.96%	48.40%	60%	🛑
% Reactive repair spending	35.04%	51.60%	40%	🛑
New build completions - Mid-market	142	93	129	🛑
Number of HSE or LA environmental team interventions	0	0	0	✅
Number of accidental fires in workplace	0	0	0	✅
Group - Number of open employee liability claims	8	13	Contextual	

| Measure | 2021/22 | 2022/23 | | |
| | 2021 | 2022 | | |
	Value	Value	Target	Status
Group - Number of days lost due to work related accidents	258	464	Contextual	
Number of new employee liability claims received	0	0	0	✅

3. Changing Lives and Communities

| Measure | 2021/22 | 2022/23 | | |
| | 2021 | 2022 | | |
	Value	Value	Target	Status
% ASB resolved	100%	100%	98%	✅
% Lets Homeless Applicants - overall (ARC)	55.73%	50.20%	Contextual	
% Relevant lets to Homeless Applicants	58.29%	51.9%	60%	🔴
Number of lets to homeless applicants (10,000 for Group by 2025/26)	1,683	1,318	Contextual	
WHG - Total number of jobs, training places or apprenticeships created including Wheatley Pledge	361	298	370	🔴
Group - Over 70% of our customers live in neighbourhoods categorised as peaceful	70.1%	68.5%	68.5%	✅
Group - 100% of relevant properties have a current fire risk assessment in place	100%	100%	100%	✅
Number of accidental dwelling fires recorded by Scottish Fire and Rescue	121	112	Contextual	

4. Developing Our Shared Capacity

| Measure | 2021/22 | 2022/23 | | |
| | 2021 | 2022 | | |
	Value	Value	Target	Status
Group - Number of vacancies across Group and Subsidiary Boards	New	4	Contextual	
Group - Attendance levels across Group and Subsidiary Boards	New	85%	Contextual	

Measure	2021/22	2022/23		
	2021	2022		
	Value	Value	Target	Status
Group - Instances where Board reports are not issued 7 days in advance of Group and Subsidiary Boards	New	0%	5%	✅
% Sickness rate	2.29%	2.74%	3%	✅

5. Enabling Our Ambitions

Measure	2021/22	2022/23		
	2021	2022		
	Value	Value	Target	Status
% lettable houses that became vacant	7.83%	6.92%	8%	✅
% court actions initiated which resulted in eviction - overall	69.57%	27.84%	Contextual	
Average time to re-let properties	23.48	20.61	16	🛑
WHG C - Gross rent arrears (all tenants) as a % of rent due	5.16%	5.84%	6.1%	✅
WHG A - Gross rent arrears (all tenants) as a % of rent due	5.15%	5.87%	Contextual	
WHG B - Gross rent arrears (all tenants) as a % of rent due	5.19%	5.47%	Contextual	

Appendix 3 – 2022/23 ARC and SPSO measures

1.1   This appendix provides ARC and SPSO measures for 2022/23.

1.2   For Group RSLs, ARC measures include complaints received from all customers who receive a service provided by the Group RSL or on their behalf. This includes factored homeowners but does not include factored homeowners in non RSL stock or Lowther tenants who are considered private sector tenants. The SPSO measures includes complaints received from all customers regardless of which Group Subsidiary they receive a service from.

Charter (ARC) Measures

1.3   ARC measures are reported to SHR for each Registered Social Landlord (RSLs) in the Group.

1.4   The table below outlines the average time for a full response (working days) for Stage 1 and Stage 2 complaints. Performance in 2022/23 for WHG (including Lowther Factored homeowners). All targets are being met for this measure. This is a significant improvement from 2021/22. The results for WHG include complaints from homeowners who receive a factoring service from Lowther on behalf of that RSL.

Charter - average time for a full response to complaints (working days)				
Subsidiary	2021/22		2022/23 – Stage 1 - 5-day target, Stage 2 - 20-day target	
	Stage 1	Stage 2	Stage 1	Stage 2
WHG	3.98 ■	20.78 ■	4.23 ■	18.24 ■

1.5   The table below outlines the average time for a full response to complaints (working days) overall, for Stage 1 and Stage 2 combined. WHG achieved the overall target of 6 days for 2022/23

Charter - average time for a full response to complaints (working days)		
Subsidiary	2021/22 Target - 8 days	2022/23 – Target - 6 days
WHG	6.05 ■	5.79 ■

1.6   The additional ARC complaints measures – The percentage of all complaints responded to in full at Stage 1, Stage 2 and overall – are calculated at year end and the results for 2022/23 are displayed below. This simply shows the number that were still in the process of being responded to at the end of the year (i.e., they came in during March and were still within timescale rolling over into April).

Charter - the percentage of all complaints responded to in full at Stage 1 and Stage 2				
Subsidiary	2021/22		2022/23 – YTD Stage 1 -, Stage 2	
	Stage 1	Stage 2	Stage 1	Stage 2
WHG	97.49%	98.94%	94.83%	93.12%

Charter - the percentage of all complaints responded to in full - overall		
Subsidiary	2021/22 Target - 96%	2022/23 – Target – 96%
WHG	🟩	🟨

SPSO Measures

1.7 SPSO measures includes all customers who raise a complaint. We are required to report on these indicators annually to the SPSO.

1.8 All indicators required for the annual submission are displayed below. In addition to this, an annual report must be published no later than the end of October each year. As this is the first year, this will be developed after we have the full annual results at year end 2022/23 for publication by the end of October 2023.

1.9 Stages of complaints are defined as:
- *Stage 1 complaints* – are first time reports of dissatisfaction with services.
- *Stage 2 complaints* – directly received as Stage 2, i.e. not escalated from Stage 1. This can be cases which are considered a risk to reputation or requires investigation due to the number of issues raised that could not have been reasonably resolved at Stage 1 as part of a frontline resolution.
- *Escalated complaints* – complaints that were received into the organisation at Stage 1 and later escalated to Stage 2.

1.10 A summary of this year's figures for each of the indicators are included below.

Indicator 1 - total number of complaints received.

SPSO Indicator 1 - total number of complaints received - YTD		
Subsidiary	Stage 1 (this includes escalated complaints as they were first received at Stage 1)	Stage 2 (directly received as Stage 2, i.e. not escalated from Stage 1)
WHG	3844	33

Indicator 2 - number and % of complaints at each stage that were fully closed within timescales of 5 and 20 working days. Full response has been given to customer/resolution has been reached, including those with outstanding actions. Extensions of time to a complaint will be included in the total count and will be considered "late".

SPSO Indicator 2 - number and % of complaints at each stage that were fully closed within timescales of 5 and 20 working days			
Subsidiary	Stage 1 - responded to within 5 working days	Stage 2 - responded to within 20 working days	Escalated complaints - responded to within 20 working days
	2022/23	2022/23	2022/23
WHG	88.11%	90.63%	93.46%

Indicator 3 - the average time in working days for a full response to the complaints at each stage.

SPSO Indicator 3 - the average time in working days for a full response to the complaints at each stage			
Subsidiary	Stage 1 - responded to within 5 working days	Stage 2 - average time in working days to respond to complaint	Escalated complaints - Average time to respond to complaints after escalation from Stage 1 to Stage 2
	2022/23	2022/23	2022/23
WHG	4.23	18.06	18.26

Indicator 4 - the outcome of complaints as a % of overall complaints for 2022/23.
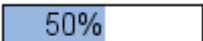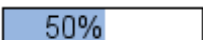
SPSO Indicator 4 - the outcome of complaints as a % of overall complaints			
Subsidiary	Stage 1 - upheld	Stage 1 - partially upheld	Stage 1 - not upheld	Stage 1 - resolved
WHG	48.15%	10.18%	29.94%	11.73%
	Stage 2 - upheld	Stage 2 - partially upheld	Stage 2 - not upheld	Stage 2 - resolved
WHG	43.75%	28.13%	28.13%	0.00%
	Escalated complaints - upheld	Escalated complaints - partially upheld	Escalated complaints - not upheld	Escalated complaints - resolved
WHG	48.83%	14.49%	35.75%	0.93%

WHG Board - Delivery Plan 22/23 - Strategic Projects

A. Repairs Programme Stream

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
Improve Customer Contact & Communications	31-Dec-2022	✅	100%	01. Taking into account customer feedback, implement revised customer comms for all repair types (including owner repairs)	30-Jun-2022	Yes	Complete as previously reported
				02. Proposals for customer feedback to Boards developed and agreed	30-Jun-2022	Yes	
				03. Approach to real time repairs feedback on repairs agreed	31-Dec-2022	Yes	
Develop IT & Systems	31-Dec-2022	✅	100%	01. CBG Servitor upgrade implemented	31-May-2022	Yes	Complete as previously reported
				02. Localz phase 1 installation (pilot with CBG)	31-Oct-2022	Yes	
				03. Localz phase 1 full roll out programme agreed	31-Dec-2022	Yes	
Service & process redesign	30-Jun-2022	✅	100%	01. DGHP improvement plan defined and agreed	31-May-2022	Yes	Complete as previously reported
				02. Quick wins for the repairs service in the West implemented (opening up appts, better communication between CBG and CFC, approach to customer comms)	30-Jun-2022	Yes	
				03. Planning complete for implementing redesigned	30-Jun-2022	Yes	

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
				repairs delivery model			
				04. DC approach to migrate to Group Servitor agreed	30-Jun-2022	Yes	
[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]

B. CFC Programme Stream

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
CFC interim review	31-May-2022	✅	100%	01. External interim review concluded	30-Apr-2022	Yes	Complete as previously reported
				02. Present findings of interim review to Group Board	30-Apr-2022	Yes	
				03. Present findings of interim review to RSL Boards	31-May-2022	Yes	
CFC second interim review	31-Mar-2023	🛑	50%	01. Scope of second interim review finalised	31-Dec-2022	Yes	A brief for independent evaluation has been developed and consultant will develop full evaluation intended to come to Boards in the summer. This is intended to give one full year plus one full winter evaluation.
				02. Undertake second interim review	28-Feb-2023	No	
RSL digital services model	31-Mar-2023	🛑	50%	01. Review existing digital services offering with customers, including existing usage rates, functionality, and projected future lifespan	31-Aug-2022	Yes	Due to conclude in month
				02. Scope future RSL digital services model, including role of apps, online services,	31-Jan-2023	No	

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
				repairs digital offering and self-service			
				03. Undertake engagement with Customer Voices	28-Feb-2023	Yes	
				04. Present recommendations to ET for next 3 years	31-Mar-2023	No	

C. Engagement Programme Stream
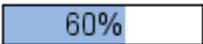
Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
Wheatley Whole Family approach	30-Sep-2022	✅	100%	01. Complete the research phase, including survey of households with children and follow up focus groups	31-May-2022	Yes	Complete as previously reported
				02. Present findings and proposed approach to ET	30-Jun-2022	Yes	
				03. Engagement with customer voices on the proposed Whole Family approach	31-Aug-2022	Yes	
				04. Final implementation approach agreed by ET	30-Sep-2022	Yes	
Engagement Framework – Phase 2	31-Mar-2023	✅	100%	01. Develop a programme of engagement using customers' preferred methods	31-May-2022	Yes	Project now complete
				02. 2022/23 Engagement plans, including mechanisms for allocation of funding, agreed by Boards	31-May-2022	Yes	
				03. Develop learning and development programme for staff as well as Customer and Community Voices	30-Sep-2022	Yes	

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
				04. Customer voices feedback to group wide governance event(s)	31-Mar-2023	Yes	
				05. Complete recruitment of Customer and Community Voices	31-Mar-2023	Yes	
Customer data collection exercise (Contact info, equalities and communication preferences)	30-Nov-2022	✅	100%	01. Project approach and proposed resource requirements agreed Group Executive	31-May-2022	Yes	Complete as previously reported
				02. Data collection exercise undertaken (RSL tenants, Lowther tenants & Care customers)	30-Sep-2022	Yes	
				03. Update to Group Executive on outcome of data collection exercise and proposed actions	31-Oct-2022	Yes	
				04. Update to Boards on outcome of data collection exercise	30-Nov-2022	Yes	

D. Assets & Sustainability Programme Stream
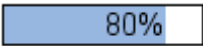
Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
Corporate Estate	31-Mar-2023	✅	100%	01. East Glasgow and Bathgate Hubs complete	31-Jul-2022	Yes	Complete as previously reported
				02. West Glasgow Hub complete	30-Sep-2022	Yes	
				03. East Hub (NMR) complete	30-Sep-2022	Yes	
				04. CFC Lipton House agreed	31-Dec-2022	Yes	
				05. South Hub (Dumfries)	31-Mar-2023	Yes	

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
				complete			
Strategic Sustainability Framework	31-Jan-2023	✅	100%	01. Pathway to Net Zero Advisory Group recruited and in place	31-May-2022	Yes	Following the framework being launched with partner Boards, a summary version has now been finalised and launched with staff.
				02. Commission an independent review of energy efficient technologies and low emission heating systems installed to date	31-May-2022	Yes	
				03. Draft framework reviewed by Advisory Group	31-Jul-2022	Yes	
				04. Update on sustainability framework and independent review to Group Board	31-Aug-2022	Yes	
				05. Independent review complete	30-Sep-2022	Yes	
				06. Draft framework and outcome of independent review to ET	31-Oct-2022	Yes	
				07. Draft framework approved by Group Board	31-Dec-2022	Yes	
				08. Group wide launch of strategic sustainability framework	31-Jan-2023	Yes	
Asset Strategy for Glasgow	31-Mar-2023	✅	100%	01. Strategic assets appraisal undertaken for Glasgow, taking into account our planned development programme and liaison with partners (GCC)	31-Dec-2022	Yes	Complete following strategy workshop.
				02. Engage frontline	31-Jan-2023	Yes	
				03. Refine assessment	31-Mar-2023	Yes	

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
				04. Set out approach to March WH Glasgow Board	31-Mar-2023	Yes	
Wyndford Regeneration	31-Mar-2023	🛑	60%	01. Issue demolition tender documents	30-Jun-2022	Yes	This project will remain at 60% complete for 22/23. As it is a multi-year regeneration the strategic project 23/24 was approved by Group Board on 26 April.
				02. Co-create investment plans with customers and seek their input on new build proposals including the Wyndford Future Focus Group	31-Mar-2023	Yes	
				03. Update to Wheatley Homes Glasgow Board	31-Mar-2023	Yes	
				04. Conclude our rehousing strategy	31-Mar-2023	No	
				05. Masterplan agreed with GCC	31-Mar-2023	No	

E. Governance Programme Stream

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
Equality, Diversity & Inclusion	31-Oct-2022	✅	100%	01. ET agree proposed survey approach for staff and tenants	31-May-2022	Yes	Complete as previously reported
				02. EDI update to Group Board, including revised Equality, Diversity and Inclusion Policy for approval	31-Aug-2022	Yes	
				03. Equalities results from customer data collection exercise analysed and proposed actions to Group Executive	30-Sep-2022	Yes	
				04. Update SHR Annual Assurance Statement on progress with equalities	31-Oct-2022	Yes	

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
Updated Strategic Agreement with GCC	31-Mar-2023	🛑	80%	01. Group Executive agree an outline updated strategic agreement for discussion with GCC	30-Sep-2022	Yes	Wheatley Group and WH Glasgow Boards approved the agreement during March. Agreement will now go to GCC committees in June.
				02. Present outline strategic agreement to Group Board for consideration	31-Oct-2022	Yes	
				03. Update to Wheatley Homes Glasgow Board	30-Nov-2022	Yes	
				04. Board approvals of draft strategic agreement with GCC	28-Feb-2023	Yes	
				05. Present to GCC for approval	31-Mar-2023	No	

H. Other - Changing Lives & Communities

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
Implement year 2 of the Group Homelessness Framework	31-Mar-2023	✅	100%	01. Undertake a review of existing customer engagement in homelessness service design and delivery	30-Jun-2022	Yes	Complete and being incorporated into future reporting.
				02. Develop an action plan to maximise engagement opportunities	30-Nov-2022	Yes	
				03. Undertake a review of existing tenancy sustainment performance reporting and develop and agree a new consistent group wide approach to reporting	31-Dec-2022	Yes	
				04. Proposal drafted and available for ET review	31-Mar-2023	Yes	
Review of group	31-Mar-2023	✅	100%	01. Updates to policy agreed	31-May-2022	Yes	Homes4DG launched on

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
allocations policy and systems				by ET and RSL Boards for consultation with tenants			time on 26 April. We have re-registered over 50% of all applications and are pro-actively contacting all other customers to establish if they still want to be re-housed and support them to complete an application if needed. First adverts went live 28 April.
				02. Undertake customer consultation	31-Jul-2022	Yes	
				03. Present findings to Wheatley Board	31-Aug-2022	Yes	
				04. Present findings to RSL Boards	30-Sep-2022	Yes	
				05. Undertake testing of the new system in D&G	31-Mar-2023	Yes	

J. Other - Enabling our Ambitions

Delivery Plan Project	Delivery Date	Status	% Progress	Milestone	Due Date	Completed	Progress Note
NETs Digital service	30-Nov-2022	✅	100%	01. Undertake build phase	31-Jul-2022	Yes	Complete as previously reported.
				02. Undertake testing of the product	31-Aug-2022	Yes	
				03. Commence pilot	30-Sep-2022	Yes	
				04. Go Live	30-Nov-2022	Yes	
				05. Provide update to Board	30-Nov-2022	Yes	

Report

To:	**Wheatley Homes Glasgow Board**
Report by:	**Aisling Mylrea, Director of Wheatley Homes Glasgow**
Approved by:	**Steven Henderson, Group Chief Executive**
Subject:	**2023/24 Delivery Plan and performance measures**
Date of Meeting:	**19 May 2022**

1.   Purpose

1.1   This report provides:

- an overview of the strategic projects contained within the Delivery Plan 2023/24 for Wheatley Homes Glasgow; and
- the proposed Wheatley Homes Glasgow specific key performance and targets 2022/23 for Board consideration and approval.

2.   Authorising and strategic context

2.1   The Group Board approved the overarching structure for the implementation of our strategy via our Group Performance Management Framework ("PMF") at its meeting in June 2021. The Board agreed the programme of strategic projects and performance measures and targets for 2023/24 in April 2023.

2.2   Under its Terms of Reference the Board is responsible for approving its individual targets and for monitoring performance against agreed targets.

3.   Background

3.1   As part of agreeing the Performance Management Framework in June 2021 the Group Board agreed a broad five-year programme of strategic projects to support the delivery of our new strategy and performance measures and targets for the life of the strategy. Our own measures for the life of the strategy were subsequently agreed by this Board.

3.2   In agreeing the 5-year programme and measures and targets, the Group and this Board recognised and agreed that we would require to remain agile and flexible throughout the life of the strategy. As such, the programme and targets are subject to annual review to take into account what has been delivered to date, our business operating context and the external operating environment.

3.3   For the same reasons, we also review and where appropriate update our 5-year strategy each year. As part of this process we recently held a strategy workshop, the outputs of which are covered in more detail in a separate paper.

4.   Discussion

4.1   <u>Strategic and business context</u>

4.1.1 Our strategic and business context continued to evolve significantly during 2022/23. This included:

- The cost-of-living crisis and the impact this has had on our customers and communities;

- A significant level of senior change in the business;

- Our ongoing repairs transformation, with a heightened emphasis on damp and mould processes and procedures;

- The influence on our rent setting process of The Cost of Living (Tenant Protection) (Scotland) Act and our below inflation rent increases for 2023/24; and

- The significant level of tenant engagement over the year which has provided valuable customer insight on key priorities for tenants.

4.2   <u>Delivery Plan 2023/24</u>

4.2.1 The 2023/24 Delivery Plan is the third yearly plan of our five-year strategy. As has been reported to the Board since 2021 and is covered for 2022/23 in a separate paper, we have already delivered or commenced a wide number of major strategic projects and activities linked to key themes and targets within our strategy.

4.2.2 The majority of the projects delivered to date were key enablers to the delivery of our overall strategy and/or associated strategic results. As such, the focus of our year-3 delivery plan projects narrows to either the follow-on projects linked to these major projects or to measuring their impact, most specifically through customer satisfaction-based measures.

4.2.3 The Delivery Plan focuses on the most strategically important areas, summarised under three broad areas of focus:

- Customer satisfaction, feedback and insight – reinforced as at the heart of our strategy and performance framework;

- Repairs – reaffirmed as customers' top priority;

- Development, regeneration and sustainable neighbourhoods – a continued focus on regenerating and building new and sustainable communities.

4.2.4 These areas were strongly influenced by the feedback from this Board's March workshop, where each of these areas was identified as a strategic priority, in particular in relation to neighbourhoods.

4.2.5 The full list of proposed projects and milestones to be reported to this Board is set out at **Appendix 1**.

4.2.6 External dependencies have been identified to recognise that the delivery of some projects is not entirely within our control. A more detailed update on each of the four streams including recent relevant Housemark national analysis where applicable, is set out below.

<u>Customer satisfaction, feedback and insight</u>

4.2.7 Over 2022/23 we focussed on developing the infrastructure to enhance the amount of customer insight we can collect, in particular through the recruitment of over 1000 customer voices and real time customer insight technology My Voice and Localz ("Book it, Track it, Rate it").

4.2.8 The pilot phase of Localz was launched earlier this year with City Building Glasgow for our repairs. As it is rolled out we will report satisfaction levels to the Board within performance reports.

4.2.9 This focus on insight and satisfaction more widely is reflected in the projects and changes to our measures. The projects to fully roll out Book It, Track It, Rate It and implement My Voice will significantly expand the level of real time customer feedback and instant customer satisfaction ratings. This will, in aggregate, provide us with significant customer insight.

4.2.10 My Voice is currently in the pilot phase within the Customer First Centre ("CFC") and this has allowed us to introduce a new measure for 23/24 – Customer Satisfaction (CSAT). This will now become the principal performance measure for the CFC; providing direct feedback from customers, in real time, about how satisfied they were with the service.

4.2.11 The pilot phase is currently attracting a response rate of c24% and satisfaction levels have averaged 4.2/5(84%). Over the course of the year we will expand the pilot in a controlled way, with a focus being on having the necessary capacity to respond to customer feedback.

4.2.12 This will provide a much greater level of insight into customer perception of the service and inherently reflects all aspects of the experience such as time to answer, first time resolution and the call handler.

4.2.13 Based on this the Grade of Service measure, the % of calls answered after 30 seconds, will now become a contextual measure. We will continue to monitor, manage and report performance but it will be replaced by CSAT as the key CFC measure and achieving high CSAT will be the main focus of the CFC.

4.2.14 By way of context recent Housemark analysis indicated that nationally average national call-waiting times more than doubled from around 50 seconds in 2019/20 to over 100 seconds. For large urban areas the increase has been more pronounced, to over 300 seconds. The analysis also concluded that whilst waiting a long time for a call to be answered does not necessarily mean a poor service, of all the non-satisfaction measures collected, call wait times correlated most strongly with overall perception.

4.2.15 Further engagement with Housemark affirmed that an average wait time of 40 seconds or less would represent excellent performance for a landlord of our nature. They also indicated that a more material impact on satisfaction arose when waiting time is 100 seconds or above. They also affirmed that first time resolution is as significant a driver of satisfaction as call waiting time. Our focus on monitoring and reporting CSAT, first time resolution and average waiting time therefore gives us the data on the key satisfaction drivers.

4.2.16   The cloud telephony project, approved by the Group Board, is focussed on ensuring that a critical part of our operating model has a robust and reliable platform. We also anticipate that it will provide us with better performance information which can, in turn, support us in continuously improving the customer experience. Customer insight will be a key driver of how we prioritise what functionality to implement with the new platform.

4.2.17   The Lowther Homes technology platform review project has been developed based on feedback from their customers, some of whom are Wheatley Homes Glasgow factored homeowners, that they want better online functionality, such as consent for works, and better billing arrangements.

4.2.18   In terms of engagement related measures, as previously agreed having successfully implemented our customer engagement framework we will no longer report on the number of Customer Voices and number of events.

4.2.19   It is intended that each Board will however receive a bi-annual customer insight report. This will aggregate all the key sources of customer feedback during the period, for example, My Voice, Book It Track It, Rate it, engagement activities and events and complaints into a more in-depth insight report. This is consistent with feedback from Boards across the Group that they want to see the various strands of customer feedback linked together and how we plan to respond to consistent themes or trends.

4.2.20   The delivery of the satisfaction, feedback and insight projects and performance targets will support the following outcomes:

- Ongoing, real time customer satisfaction data for key services such as our Customer First Centre and repairs;

- customer feedback and insight that we can use to quickly deploy service improvements; and

- increasing overall customer satisfaction;

Repairs

4.2.21   Our engagement with customers over 22/23 reinforced that repairs remains the key driver of tenant satisfaction. The introduction of Book It, Track It, Rate will, as set out above, provide us with more real time feedback on the service.

4.2.22   As previously discussed with the Board, our focus for repairs is improving the service based on tenant feedback and having performance measures which reflect tenant priorities.

4.2.23   We will be implementing a number of technology related upgrades within City Building Glasgow, such as enhancements to the scheduling and reporting functionality which enable us to have access to better performance data.

4.2.24   In tandem we will be making changes to existing systems which will allow us to enhance our automated performance reporting into areas previously discussed by the Board such as: no of cancelled/rescheduled jobs; number of repeat visits; no of jobs with follow on repairs; and damp and mould. A key focus is ensuring that our system set up and data are consistent across the group to allow like for greater like comparisons and internal benchmarking in future.

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4.2.25   Over the course of the year the repairs performance framework and reporting to Boards will therefore be expanded as the technology and system changes are implemented. A measure we are however introducing immediately is the % of repairs complaints which move from Stage 1 to Stage 2. This provides us with an understanding of how well we are resolving issues for tenants when something has not gone well from the customer's perspective.

4.2.26   The Housemark UK data analysis identified that 'a relatively strong correlation between the length of time it takes to complete repairs and overall perception(satisfaction)'. Based on this we engaged with Homemark further to understand how the number of days impacted satisfaction.

4.2.27   The feedback from Housemark was that our proposed target of an average of 7 days for non-emergency repairs would be in the top quartile (up to 9 days). This is also in line with the Scottish Housing Network data showing an average of 7 days for 2022/23. They also indicated that where repairs are completed in less than 7 days this can translate in up to 4% better satisfaction than the national average. However, they also indicated that this increased satisfaction is also linked to the ease of communication and how easy the landlord is to deal with.

4.2.28   This affirms that our focus on the CFC answering calls quickly, repairs being completed quickly and right first time are conducive to achieving strong customer satisfaction. Our enhanced real time satisfaction monitoring for repairs and the CFC will elevate our ability to affirm this is the customer's perception.

4.2.29   Delivery of these repairs projects and activities will support the following strategic outcomes:

- Stronger and more harmonised core repairs systems and platforms;

- Higher quality data and performance reporting which can support driving service improvement and efficiency monitoring; and

- Improved satisfaction with the repairs service for both tenants and owners – aiming to improve year on year to 2025/26, supported by new approaches to the collection, monitoring and reporting of customer experience.

Development, regeneration and sustainable neighbourhoods

4.2.30   The clear feedback from our recent strategy workshop was that regeneration and the delivery of new homes, especially where combined, need to be set within the context of how they interact with the wider neighbourhood. This is consistent with feedback from tenants which, particularly through our more local engagement, has highlighted the need for an integrated view of neighbourhoods in terms of physical assets, the environment and services. In response to feedback from customers, we are also focusing on building more family housing as part of our new build programme.

4.2.31   Taking this, and feedback from the workshop, a strategic project to develop a new neighbourhood planning approach for us has been included. This would provide a future framework to plug new build and regeneration into, in particular how it would impact the neighbourhood based on the relevant Neighbourhood Plan. We anticipate that the approach will also be transferable to other part of the Group.

4.2.32 The sustainability of our homes and neighbourhoods is also a key element of how we build, invest and deliver services to homes. The operationalisation of our Group strategic sustainability framework and development of a related performance framework is therefore a strategic project for 23/24.

4.2.33 We also anticipate that as My Voice rolls out over the course of the year it will consider how we can get feedback from customers on their environment and for new build, satisfaction with their new home.

4.2.34 The delivery of our new build and regeneration aspirations requires us to have the necessary funding in place. A linked project is a planned renegotiation of our covenants to release capacity for greater investment in existing homes, including retrofit.

4.2.35 Development, regeneration and sustainable neighbourhoods and performance targets will support the following outcomes:

- Sustainability embedded in all our activities through a strategic framework;

- A neighbourhood approach, involving co-creation with customers, which drives increased satisfaction with neighbourhoods;

- A fully developed future vision for the future of Wyndford, driven by the views and aspirations of local communities; and

- Funding in place to deliver our long term ambition to deliver 4,000 new homes over the next 10 years.

4.3 Measures and Targets 2022/23

Strategic Results and Key Performance Indicators (KPIs)

4.3.1 When initially agreeing measures and targets in June 2021, it was recognised these would be subject to ongoing review as well as formal review annually. Despite the extent of business and strategic change during 2022/23, we have made significant progress in this period and remain on track to deliver the vast majority of key outcomes and performance measures in our own and the wider Group strategy. A more detailed update on what we delivered in 2022/23 is set out in a separate agenda item.

4.3.2 The full list of proposed measures and targets to be reported to the Board from Year 3 of the strategy, 2023/24, is set out at **Appendix 2**.

4.3.3 At its last meeting, the Group Board agreed changes to a number of measures and targets as part of the rolling five-year development and investment plans. The annual review has highlighted a small number of additional measures where economic conditions mean we have revisited a measure and/or revised targets from Year 3 of our strategy, 2023/24.

4.3.4 There are a few proposed additions and deletions of measures, as follows:

- Introducing new measures for damp and mould in relation to how we meet our targets to get to every customer within 48 hours and have completed the repair in no more than 15 days;

- Limit annual rent increases: it was agreed for year 2 onwards that this strategic result would no longer specify a 2.9% cap, with the increase set annually via the business plan

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In the current climate, it is proposed we remove this measure altogether, with the Board considering this separately each year as part of business planning and rent setting processes;

- Board administration: all newly added measures for 2022/23 met target, demonstrating processes are in place and are measured through a combination of individual Board updates, regular updates on recruitment to the RAAG Committee and annual individual appraisals; and

- Customer voices: all targets have been met or exceeded in 2022/23 and focus is now on the influence they have and the feedback loop to customers on this reflecting feedback from this Board.

4.3.5 All other proposed changes are captured in **Appendix 2**, with pertinent points summarised below:

- New build: Targets are currently based on the Business Plan, as per 5 year plans, and will be increased as additional funds are secured;

- Gross rent arrears: It is proposed the target for maximum arrears levels for the next two years is lowered ;

- Reduce volume emergency repairs by 10%: Volume has further increased during 2022/23 and as this increased customer demand is not anticipated to reduce, a change to the baseline year and new targets are proposed, with a -10% reduction on 2022/23 volumes by 2026;

- Average days to let a home: The strategic target is currently to get this to 14 days. While there has been progress in reducing days to let in 22/23, it is proposed to increase the strategic result to 16 days. Both Scottish Housing Network and Housemark benchmarking affirm this remains highly challenging and upper quartile performance. This also recognises external factors impacting voids we cannot control but can have a substantial impact, namely utility connections such as meter repairs and reconnections;

- Percentage of reactive repairs carried right first time (ARC) updated to 90%; and;

- Streamline and consolidate all satisfaction targets to 90%.

Outstanding/ Updated Baselines

4.3.6 Many strategic results were new to our PMF for the Group Strategy 2021-2026 and therefore involve work to establish baselines. Several of these are now in place with targets in place. For the remaining baselines, new approaches to the collection, collation and reporting of these measures are underway:

- Our comprehensive customer satisfaction surveys will be undertaken in 2023/24;

- Following the CFC pilot, the MyVoice roll out to other pillars during 2023/24 will provide several additional customer measures.

5.   Customer Engagement

5.1   Our Delivery Plan reflects our strong focus on our customers influencing and co-creating with us. Customer engagement is embedded as specific milestones of strategic projects which will directly impact the way we deliver services or the way they can be drawn down by customers.

5.2 The development of the measures and KPIs also reflects the importance of customer feedback driving how we measure the quality of a service and inform future service improvement.

6. Environmental and sustainability implications

6.1 A key project for 2023/24 is the implementation of our agreed strategic sustainability framework. As part of this a milestone included agreeing further measures will be developed for future incorporation into our PMF.

7. Digital transformation alignment

7.1 Our strategy is underpinned by digital transformation. The strategic projects for 2023/24 have been fully reviewed to ensure we have the appropriate technical and resource capacity alongside our Digital Programme.

8. Financial and value for money implications

8.1 There are no direct financial implications associated with this report, which are covered via the approved 2023/24 business plan.

9. Legal, regulatory and charitable implications

9.1 There and no specific legal or regulatory implications however we continue to collect all measures required for the Annual Return on the Charter.

10. Risk Appetite and assessment

10.1 We do not have a single risk appetite in respect of strategy. Our risk appetite seeks to take into account a range of factors which may impact the delivery of our strategy.

10.2 In considering our Delivery Plan and KPIs for 2023/24 we have considered the continued level of uncertainty associated with the current operating context of the Group.

10.3 Our strategy is highly ambitious and contains a high degree of interdependencies. The proposed approach seeks to mitigate the risk that the complexity associated with the level of interdependencies are not managed through a structured approach.

11. Equalities implications

11.1 Project monitoring and evaluations consider equalities information and Equalities Impact Assessments are undertaken at the outset of new programmes to ensure compliance with equality legislation, where applicable.

12. Key issues and conclusions

12.1 The 2023/24 Delivery Plan projects reflect the significant progress to date and narrow in on areas we know reflect key customer priorities, such as repairs and neighbourhoods, and providing us with greater customer insight to drive future service improvement and satisfaction.

12.2 Our measures and targets have been informed by wider sector analysis where appropriate. We will continue throughout the year to seek to improve our ability to measure and report performance in areas which drive customer satisfaction and reflect customer priorities.

13.   Recommendations

13.1 The Board is asked to:

1) Note the 2023/24 strategic projects and associated milestones attached at Appendix 1; and
2) Approve the proposed measures and corresponding targets for 2023/24 at Appendix 2.

LIST OF APPENDICES:

Appendix 1: Strategic projects 2023/24
Appendix 2: Strategic Results and KPIs with associated targets for year 3-5

Project	Key Milestones	Interdependencies
Repairs technical enhancement programme	▪ Programme of research and engagement with customers on online repairs service to further refine functionality and usability – 30/9/23 ▪ CBG IT integration – Boxi reporting system implementation – 31/10/23 ▪ CBG DRS upgrade – 31/10/23 ▪ Progress update to Board – 31/12/23	▪ External IT software providers
Implementation of Book It, Track It, Rate it	▪ Pilot finalised in with City Building delivered repairs - 30/05/23 ▪ Pilot evaluation, including customer feedback, and agreement to go live - City Building - 30/06/23 ▪ Progress update to the Board – 30/8/2023	▪ External IT software providers
[redacted]	[redacted]	[redacted]
My Voice – real time customer feedback reporting	▪ MY Voice CFC pilot concluded - 30/04/23 ▪ CFC customer insight operational framework implemented - 31/05/23 ▪ Implementation plan for key service pillars approved by ET - 31/05/23 ▪ On-board key service pillars to MYVoice customer insight platform - 30/11/23 ▪ Implement operational frameworks - 31/03/24	
Migration to new cloud telephony platform	▪ Group Board approval of proceeding to contract award – 30/4/23 ▪ Vendor Contract Award – 31/5/23 ▪ Full project delivery plan developed and commenced- 31/7/23 ▪ Phase 1 launch – 31/12/23 ▪ Phase 2 launch – 31/3/24	▪ External vendor
Develop a new, integrated Neighbourhood Planning Approach	▪ Deliver workshop with key people involved in Neighbourhood tools and scoring mechanisms to map out roles and remit - 31/05/23 ▪ Develop a technical guidance document around application of tools and the scoring mechanisms within the neighbourhood assessment - 30/06/23 ▪ Trial and test the neighbourhood assessment, including engagement with customers, in one neighbourhood within WHG - 31/07/23 ▪ Based on the neighbourhood assessment, propose an example neighbourhood plan - 30/09/23 ▪ Provide worked example to WHG Board to review and agree as a model going forward - 30/09/23	

Project	Key Milestones	Interdependencies
	▪ Draft Neighbourhood approach for wider group to RSL Boards - 28/02/24	
[redacted]	[redacted]	
Interest cover covenant revision	▪ Formal request to all lenders – 30/04/23 ▪ Negotiating phase complete - 01/06/23 ▪ Final agreed outcome & credit process at each lender - with update to June Board 30/06/23 ▪ Approval from bank and legals - 30/06/23 ▪ Group and subsidiary Board approvals - 31/08/23 ▪ Revision complete- 30/09/23	▪ Lenders' consent
Implement Group sustainability framework	▪ Sustainability delivery workshop, including exploring the use of technology to track, record and report data, with nominated group leads - 30/04/23 ▪ Refine sustainability performance monitoring framework - 31/05/23 ▪ Develop sustainability delivery plan - 30/06/23 ▪ Quarterly sustainability updates to ET - 30/06/23 ▪ Annual sustainability progress report via PNAG to Group Board -31/12/23	

Board Strategic Results and KPIs 2023 to 2026

Proposed Changes from 2023/24 detailed under 'Update' and relevant change shown in red text

1. Delivering Exceptional Customer Experience

Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Type of measure	Board Reporting Frequency
Overall customer satisfaction is above 90% (ARC)	Not applicable	New comprehensive customer satisfaction surveys (RSL tenants and RSL owners) will be undertaken and reported 2023/24	Updated baseline established	Target to be agreed following baseline	>90%	Strategic Result	Annually
Overall satisfaction among RSL households with children improved to 90%	Not applicable	This will be provided as a sub-set of the RSL tenants survey above. Households in question therefore now defined as RSL households for avoidance of doubt	Updated baseline established	Target to be agreed following baseline	90%	Strategic Result	Annually
RSL tenant satisfaction with value for money increased to 85% (ARC)	Not applicable	New comprehensive customer satisfaction surveys (RSL tenants) will be undertaken and reported 2023/24	Updated baseline established	Target to be agreed following baseline	85%	Strategic Result	Annually
90% of RSL customers feel they can participate in the landlord's decision making (ARC)	Not applicable	New comprehensive customer satisfaction surveys (RSL tenants) will be undertaken and reported 2023/24. Households in question therefore now defined as RSL households for avoidance of doubt	Updated baseline established	Target to be agreed following baseline	90%	Strategic Result	Annually
95% of customers actively engaged in shaping services feel they participate in decision making	Not applicable	To be targeted at Customer Voices	Baseline established	Target to be agreed following baseline	95%	Strategic Result	Annually
Implement "rate it" score from the book it, track it, rate it repairs approach and aim to improve performance by 10%	Not applicable	Pilot underway and launching across 2023	Baseline established	Target to be agreed following baseline	Baseline + 10% improvement	Strategic Result	Quarterly
Percentage of tenants who sustain their tenancies for more than 12 months (ARC)	89.13%	No change	90%	90%	90%	KPI Business value	Quarterly

Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Type of measure	Board Reporting Frequency
CFC % calls answered within 30 seconds	76.04%	This measure will no longer be targeted, instead contextual alongside the targeted satisfaction measure	~~30 seconds (80%)~~ Contextual	~~30 seconds (80%)~~ Contextual	~~30 seconds (80%)~~ Contextual	KPI Business Value	Quarterly
CFC CSAT Customer Satisfaction	Pilot at 4.1/5	NEW MEASURE 4/5 in Y3, increasing to 4.5/5 in Y4 and Y5	4/5	4.5/5	4.5/5	KPI Customer Value	Quarterly
CFC call abandonment rate	4.12%	Reduce target to 5%, as generally regarded as industry benchmark. Industry benchmark for 2022 published as 9% but retain at 5% for us	~~7%~~ 5%	~~7%~~ 5%	~~7%~~ 5%	KPI Business value	Quarterly
CFC average wait time	52.66s	Contextual	30s	30s	30s	KPI Business value	Quarterly
Percentage of calls to the CFC resolved at first contact	Group - 89.99%	No change	90%	90%	90%	KPI Business Value	Quarterly
CFC cases raised, passed to housing / commercial officers for resolution	Group – 6.15%	No change at this time; however, further consideration will be given to this during 2023, considering wider operating model	10%	10%	10%	KPI Business value	Quarterly
Satisfaction with complaints handling increased by 10%	Not applicable	Previously proposed as linked to MyVoice project implementation, scheduled during 2023	Baseline established	Target to be agreed following baseline	Baseline + 10% improvement	Strategic Result	Quarterly
Average number of working days to respond to stage 1 complaints (ARC)	4.24	No change to target	5	5	5	KPI Business value	Bi-annual
Average number of working days to respond to stage 2 complaints (ARC)	18.24	No change to target	20	20	20	KPI Business value	~~Quarterly~~ Bi-annual
Average number of working days to respond to all complaints – Stage 1 and 2 (ARC)	5.79	Change to contextual to reflect fluctuations in volume and performance for Stage 1 and Stage 2.	~~5~~ Contextual	~~5~~ Contextual	~~5~~ Contextual	KPI Business value	~~Quarterly~~ Bi-annual
Percentage of stage 1 complaints responded to within 5 working days (SPSO)	88.11%	Change to 95% to reflect additional focus on quality of response	~~100%~~ 95%	~~100%~~ 95%	~~100%~~ 95%	KPI Business value	Bi-annual

Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Type of measure	Board Reporting Frequency
Percentage of stage 2 complaints (direct to stage 2) responded to within 20 working days (SPSO)	90.63%	No change to target	100%	100%	100%	KPI Business value	Bi-annual
Percentage of escalated complaints (from stage 1 to stage 2) responded to within 20 working days (SPSO)	93.46%	No change to target	100%	100%	100%	KPI Business value	Bi-annual
Stage 2 repair complaints as a percentage of Stage 1 repair complaints	7.14%	NEW MEASURE linked to repairs customer insight gathering	Contextual	Contextual	Contextual	KPI Business Value	Bi-annual
Satisfaction with the process of getting my new home is improved by 10%	Not applicable	Previously proposed as linked to MyVoice project implementation, due during 2023	Baseline established	Target to be agreed following baseline	Baseline + 10% improvement	Strategic Result	Quarterly

2. Making the Most of Our Homes and Assets

Existing Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
Achieve 95% customer satisfaction with their new build home	Not applicable	Question(s) to be aligned to Scottish Affordable Housing Supply VFM continuous improvement programme requirements	Baseline established	Target to be agreed following baseline	95%	Strategic Result	Quarterly
Maintain existing tenant satisfaction with the quality of their home at over 90% (ARC)	Not applicable	New comprehensive customer satisfaction surveys will be undertaken and reported 2023/24	Updated baseline established	Target to be agreed following baseline	>90%	Strategic Result	Annually
Over 70% tenants in high-rise homes feel safe walking in their neighbourhood after dark	Not applicable	New comprehensive customer satisfaction surveys will be undertaken and reported 2023/24	Updated baseline established	Target to be agreed following baseline	>70%	Strategic Result	Annually
Develop 4,000 new homes across all tenures (Group)	119 Target 155	Change to targets Years 3 to 5 in line with approved business plan for new build.	WH Glasgow – 55	WH Glasgow - – 194	WH Glasgow – 326	Strategic Result	Quarterly
			Group – 338	Group – 1,050	Group – 1,248		
Group wide: Invest £500m of new public and private finance in new build housing	Y2 - £19,681,000	Change to targets Years 3 to 5 in line with approved business plan for new build.	~~£134,795,000~~ Group - £204,358,000 WH Glasgow - £46,400,000	~~£160,118,000~~ Group – 192,870,000 WH Glasgow £42,161,000	~~£108,749,000~~ Group – 193,158,000 WH Glasgow - £55,940,000	Strategic Result	Quarterly
Group wide: Invest £660 million in existing homes	Y2 - £97,223,000	Change to targets Years 3 to 5 in line with approved business plan for investment.	~~£74,744,000~~	~~£77,564,000~~	~~£77,880,000~~	Strategic Result	Quarterly

Existing Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
Achieve a 60:40 ratio of planned to reactive repair spending	**Actual** **Target** 48.4% (£39.3m) Planned 60:40 51.6% (£41.9m) Reactive	The currently agreed business plan assumes the following Group: 2023.24 2024.25 2025.26 Total 53% 47% 46% 49% 47% 53% 54% 51% WH Glasgow: <table><tr><td>2023/24</td><td>2024/25</td><td>2025/26</td><td>Total</td></tr><tr><td>50%</td><td>45%</td><td>44%</td><td>46%</td></tr><tr><td>50%</td><td>55%</td><td>56%</td><td>54%</td></tr></table> We will however continue to seek to achieve a 60/40 ratio	WH Glasgow £100,686,262 60:40	WH Glasgow £89,510,000 60:40	WH Glasgow £92,658,000 60:40	Strategic Result	Quarterly
Reduce the volume of emergency repairs by 10%	**Variance compared to 2021/22** WHG - +4.40% Group - +3.10% Target -2.5%	Repairs volumes, including emergencies, have increased during 2022/23 as demand increased post all pandemic restrictions being lifted. 10% reduction should be against this new baseline over the remaining three years of our strategy.	~~-2.5% (cumulative -5%)~~ 3%	~~-2.5% (cumulative -7.5%)~~ 3.5% (cumulative 6.5%)	~~2.5%~~ 3.5% (cumulative 10% fewer emergencies on Baseline year ~~2021/22~~ 2022/23)	Strategic Result	Quarterly
Group wide: Reduce the output of CO2 emissions from our homes by at least 4,000 tonnes per year	Anticipated -8,402 tonnes reduced in 2021/22 (Will be validated during 2022/23) Y2 target is -4,000 Baseline set: Group wide, Planet Mark estimate we produced 2,632.5 tCO2e (equivalent in CO2 terms of all greenhouse gases) between 1 April 2021 and 31 March 2022 ~~Target is 75% of baseline~~	Increase from Year 3 in reduction per annum to 6,000 tonnes as per sustainability framework.	~~-12,000~~ -14,000 cumulative	~~-16,000~~ -20,000 cumulative	~~-20,000~~ -26,000 cumulative	Strategic Result	Annually
Group wide: Reduce our corporate carbon footprint to carbon neutral by 2026		Adjustment to target years to acknowledge year lag in measurement and reporting. Final result will be known in 2026/27.	~~50% of baseline~~ 75% of baseline (c1980 tCO2e)	~~25% of baseline~~ 50% of baseline (c1320 tCO2e)	~~0~~ 25% of baseline (c660 tCO2e)	Strategic Result	Annually

Existing Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
Average new build CO2 output no greater than 1.8t	Target 1.8t	No change	1.8t	1.8t	1.8t	KPI Other	Annually
Increase the % of stock at EPC 'B' to 30%	Target 16%	No change	19%	24%	30%	KPI Other	Annually
Percentage of customers who have had repairs or maintenance carried out in last 12 months satisfied with the repairs and maintenance service (ARC)	89.90 Target 89%	Change to 90% to reflect current performance and alignment across all satisfaction indicators	~~91%~~ 90%	~~93%~~ 90%	~~95%~~ 90%	KPI Customer Value	Quarterly
Percentage of reactive repairs carried out in last year completed right first time (ARC)	91.47% Target 92%	Change to 90%. Scottish average for 2021/22 was 88.3%	~~WH Glasgow - 93%~~ 90%	~~WH Glasgow - 95%~~ 90%	~~WH Glasgow - 97%~~ 90%	KPI Business Value	Quarterly
Average length of time taken to complete emergency repairs (ARC)	3.36 Target 3.0	No change	3	3	3	KPI Business Value	Quarterly
Average length of time taken to complete non-emergency repairs (ARC)	8.88 Target 5.5	Change to 7 days. Housemark advise top quartile is up to 9 days.	~~5.5~~ 7	~~5.5~~ 7	~~5.5~~ 7	KPI Business Value	Quarterly
Percentage stock meeting the Scottish Housing Quality Standard (SHQS) (ARC)	99.29%	No change	100%	100%	100%	KPI Compliance	Annual

Existing Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
New - % of damp and mould cases attended within 48 hours	**New measure**	This is a new measure to track our damp and mould performance. The targets reflects that although the majority will, some customers will not wish to have an appointment within 48 hours due to a later appointment being more convenient.	48 hours	48 hours	48 hours	KPI Business Value	Quarterly
New - % of damp and mould cases resolved within 15 days	**New measure**	This is a new measure to track our damp and mould performance and reflect our agreed target timescales. The 90% reflects the likelihood that some may be impacted by customer availability of choice re appointments.	90%	90%	90%	KPI Business Value	Quarterly
Number of times during the reporting year we did not meet our statutory obligations to complete a gas safety check within 12 months of a gas appliance being fitted or its last check (ARC)	0	No change	0	0	0	KPI Compliance	Quarterly
The average time to complete medical adaptations (ARC)	23.06 Target 35	No change, progress to 25 days from Y3	25	25	25	KPI Compliance	Quarterly
Number of RIDDOR reported	0	No change	2	2	2	KPI Compliance	Quarterly
Number of Health and Safety Executive or local authority environmental team interventions	2	No change	0	0	0	KPI Compliance	Quarterly
Number of new employee liability claims received	5	No change	0	0	0	KPI Compliance	Quarterly
Number of open employee liability claims	13	No change	Contextual	Contextual	Contextual	KPI Compliance	Quarterly
Number of days lost due to work related accidents	464	No change	Contextual	Contextual	Contextual	KPI Compliance	Quarterly

Existing Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
Number of accidental fires in workplace.	0	No change	0	0	0	KPI Compliance	Quarterly

3. Changing Lives and Communities

Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
Percentage of lets to homeless applicants (ARC)	50.2%	No change	Contextual	Contextual	Contextual	Strategic Result	Quarterly
Percentage of relevant lets to homeless applicants	Actual: 51.9% Target: 60%	While this will continue to be monitored to support agreements with LAs, change to contextual to reaffirm the number of homeless applicants housed (i.e., the 10,000 target) as priority indicator.	~~WH Glasgow - 60%~~ Contextual	~~WH Glasgow - 60%~~ Contextual	~~WH Glasgow - 60%~~ Contextual	Strategic Result	Quarterly
Group wide: House an estimated 10,000 homeless people or households over 5 years	Group actual: 2,213 Group target: 2,000	No change	2,000 (total 6,000)	2,000 (total 8,000)	2,000 (total 10,000)	Strategic Result	Quarterly
Over 70% of our customers live in neighbourhoods categorised as peaceful	Group actual: 68.5% Group target: 68.5%	No change	69.0%	69.5%	>70%	Strategic Result	Quarterly
Reduce the number of accidental dwelling fires by 10%	Group actual: 147 Upper limit: 205	No change	6% reduction from baseline figure (Upper limit: 200)	8% reduction from baseline figure (Upper limit: 195)	10% reduction from baseline figure (Upper limit: 193)	Strategic Result	Quarterly
100% of applicable properties have a fire risk assessment	100%	No change	100%	100%	100%	Strategic Result	Quarterly
4,000 jobs and training and apprenticeship opportunities delivered	Group actual: 802 Target: 750	Revised Year 3-5 targets in line with current programmes. Remain on track to achieve 4,000 target over 5 years	~~850~~ 800 ~~WH Glasgow – 439~~ WH Glasgow - 396	~~850~~ 800 ~~WH Glasgow – 397~~ WH Glasgow -392	~~850~~ 800 ~~WH Glasgow – 414~~ WH Glasgow -391	Strategic Result	Quarterly
250 customers have been supported to attend higher education and university through Wheatley bursaries	Annual Target - 50	No change	50 (total 150)	50 (total 200)	50 (total 250)	Strategic Result	Annually

Indicators	Year 2	Update	Year 3 (2023/24)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
10,000 vulnerable children benefit from targeted Foundation programmes	Group actual: 5,255 Target 1,200	Revised Year 3-5 targets in line with current programmes. Remain on track to achieve 10,000 target over 5 years.	~~2,250~~ 1,200 ~~1450~~ 750	~~2,400~~ 1,200 ~~1520~~ 750	~~2,150~~ 1,200 ~~1383~~ 750	Strategic Result	Annually
15% of tenants with online accounts are using the My Savings rewards gateway	13.29% (Target 12%)		13%	14%	15%	Strategic Result	Annually
Achieve 85% satisfaction with Wheatley Environmental Services	Not applicable	Previously proposed as linked to MyVoice project implementation, due during 2023	Baseline established	Target to be agreed following baseline	85%	Strategic Result	Quarterly
Percentage of tenants satisfied with landlord's contribution to the management of the neighbourhood they live within (ARC)	Not applicable	New comprehensive customer satisfaction surveys (RSL tenants and RSL owners) will be undertaken and reported 2023/24	Updated baseline established	Target to be agreed following baseline	Target to be agreed following baseline	Strategic Result	Annually
% ASB cases resolved (ARC)	100% Target 98%	No change	98%	98%	98%	KPi Business Value	Quarterly

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4. Developing Our Shared Capacity

Indicators	Year 2	Update	Year 3 (2023/34)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
Staff absence maintained at 3%	2.74%	No change	3.0%	3.0%	3.0%	Strategic Result	Quarterly
Staff voluntary turnover (i.e. resignations) remains at less than 7%	Actual – 7% Target – 7%	No change	7%	7%	7%	Strategic Result	Annually
250 young people are provided with structured opportunities to build their skills within the business	Actual – 72 Target – 30	No change	55	55	55	Strategic Result	Annually
50 graduates are provided with opportunities to work and gain experience in our sectors	Actual – 14 ~~Target – 50~~ Target – 10 (50 was a cumulative target)	No change	~~51~~ This was cumulative target. Target should be 10	~~51~~ This was cumulative target. Target should be 10	~~51~~ This was cumulative target. Target should be 10	Strategic Result	Annually
40% of promoted posts are filled with internal candidates	Actual – 65.5% Target – 40%	No change	40%	40%	40%	Strategic Result	Annually
Our workforce's demographic makeup more closely resembles that of the communities in which we operate	Not applicable	Indicator development and staff and tenant surveys were undertaken to collect protected characteristics	Indicator and baseline introduced	Target to be set 2023/24 following baseline	Target to be set 2023/24 following baseline	Strategic Result	Annually
Over 90% of staff say they feel appreciated for the work they do			85.0%	88.0%	>90%	Strategic Result	Annually

5. Enabling Our Ambitions

Existing Indicators	Year 2	Update	Year 3 (2023/34)	Year 4 (2024/25)	Year 5 (2025/26)	Measure type	Board Reporting Frequency
Maintain a strong investment grade rating of A+ stable	A+ Stable	No change	A+ Stable	A+ Stable	A+ Stable	Strategic Result	Annually
Reduce gross rent arrears to 4.5% (previously 4%) (ARC)	5.84% Target 6.10%	Updated to take into account current performance and projections	~~5.43%~~ Group - 5.25% WH Glasgow – ~~5.81%~~ 5.63%	~~5.04%~~ Group - 4.99% WH Glasgow – ~~5.38%~~ 5.47%	Group - 4.5% WH Glasgow – 4.82%	Strategic Result	Quarterly
Average days to let a home maintained at ~~less than 14 days~~ 16 days (ARC)	20.61 days Target 16	Change to 16 days for RSLs reflect perceived optimal performance level, balancing demand on void repairs with allocating homes in a timely manner. Lowther homes target has been reset to reflect last year's performance and the different market type.	~~WH Glasgow - <14~~ 16	~~WH Glasgow - <14~~ 16	~~WH Glasgow - <14~~ 16	Strategic Result	Quarterly
Percentage of lettable homes that became vacant (turnover) (ARC)	6.92% Target 8%	No change	WH Glasgow - 8.0%	WH Glasgow - 8.0%	WH Glasgow - 8.0%	KPi Business Value	Quarterly
Over 50% of customers actively using their online account to make transactions with us		To reset baseline in Year 3	Reset baseline		>50%	Strategic Result	Quarterly

Report

To: **Wheatley Homes Glasgow Board**

By: **Aisling Mylrea, Wheatley Homes Glasgow Director**

Approved by: **Steven Henderson, Group Chief Executive**

Subject: **Complaints handling performance 2022/23**

Date of meeting: **19 May 2023**

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1. Purpose

1.1 This report sets out performance in dealing with and responding to complaints over the last year. It highlights actions taken to learn from these complaints and to improve our service to customers.

2. Authorising and strategic context

2.1 Under our Terms of Reference, the Board has the responsibility to address any specific regulatory requirements including complaints handling.

2.2 Our handling of complaints is of particular relevance to our Delivering Exceptional Customer strategic theme. We also have regulatory responsibilities to respond to complaints within certain timescales and in a certain manner. Where customers remain unhappy with our responses at stage 1 and 2 of the process, they can then complain directly to the Scottish Public Services Ombudsman who will investigate our response. Homeowners to whom we provide a factoring service can take their complaint to the First Tier Tribunal.

3. Background

3.1 Some of the data in this report must also be provided externally as part of the Annual Return on the Charter and our return to the Scottish Public Services Ombudsman. More detail on these can be found in the annual performance report which is also part of the agenda for this Board.

4. Discussion

Number of complaints

4.1 We have seen increased levels of demand for our services compared to previous years, in particular an increase in the number of repairs requested and completed. Reflecting this, the number of stage 1 complaints that we received this year was 45% (1764) higher than in 2019/20. The chart below shows the trend, including the dip in complaints in the first year of the pandemic. This includes complaints received from our customers and owners who receive a factoring service on behalf of Lowther.

1

WHG - Stage 1

Year	Value
2019/20	2080
2020/21	1158
2021/22	2699
2022/23	3844
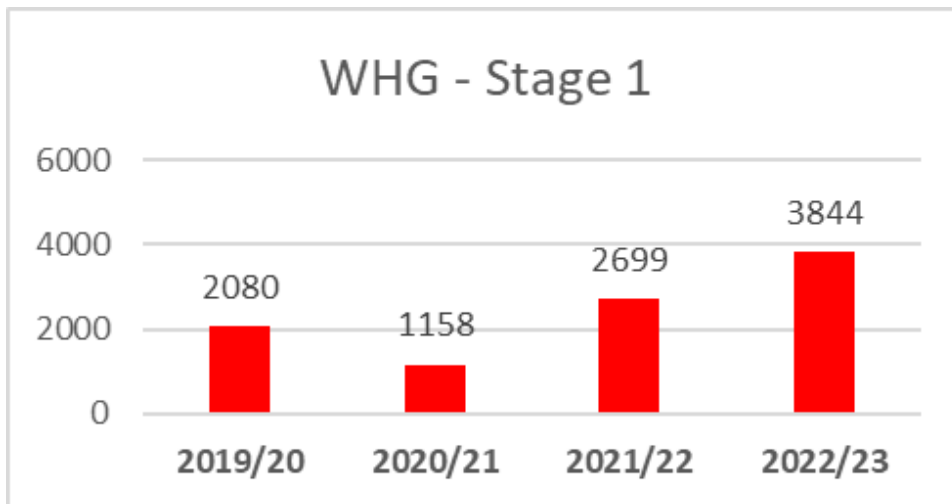
4.2   A similar trend can be seen in the increase in stage 2 complaints which have increased by over 22% from last year. This year, we received 428 Stage 2 complaints which were escalated from Stage 1 and so are also included in the stage 1 total of 3844. We received 33 (7%) Stage 2 complaints directly at Stage 2.

WHG - Stage 2

Year	Value
2019/20	235
2020/21	224
2021/22	357
2022/23	461
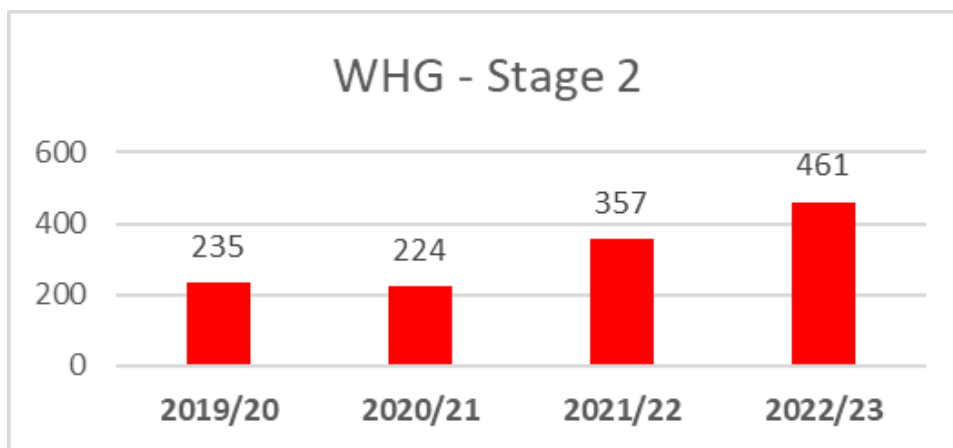
4.3   Our new operating model and increased training has helped to ensure that complaints are captured at all points in a customer journey. This will have been a significant factor in the increase in complaints although anecdotal evidence also suggests that increasing complaints levels are common post pandemic.

4.4   Despite the increasing number of complaints the proportion escalated to stage 2 remains consistent with other parts of the Group. This is the second consecutive year that the percentage of complaints escalating to stage 2 has decreased. Despite the overall increase in numbers, the speed of response has been maintained and this is covered in more detail later in the report.

Key themes

4.5   The graph below provides the main themes for the complaints we received (including owners) across both stage 1 and 2 complaints. In common with other Group RSLs, the highest number of complaints are received in relation to repairs. Given the volume of repairs we undertake (and this has increased by 28% since 2019/20) we would always expect this to be the highest category, but it does also emphasise that it is an area where focused improvement should have a significant impact on satisfaction. It should however be noted that the total number of complaints represents just 1% of the total repairs we completed.

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Top 6 Complaint Categories
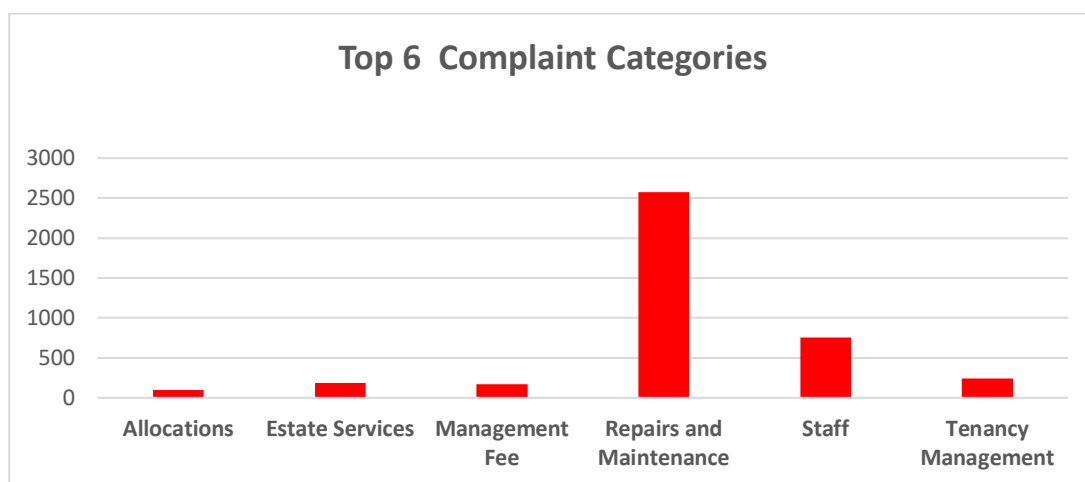
4.6 The analysis shows that the quality of service, timescales, missed/late appointments are key issues experienced by customers. This is consistent with feedback at various customer engagement events where repairs have been a key topic.

4.7 The new MyRepairs service will be fully operational during 2023/24. Customer feedback has already shown us that a number of stage 1 complaints arise because we fail to meet our commitments. The same is true for stage 2 complaints. The MyRepairs team are now closely tracking commitments, particularly those made in response to a complaint. We expect this to reduce the number of stage 2 repairs complaints as we move into 2023/24.

4.8 A number of our complaints relate to repairs where customers feel it has taken too many visits to diagnose or resolve. The Board will be aware that there has been an increased focus on mould and dampness. These issues have, in the past, sometimes taken longer to resolve because we have struggled to identify the root cause. Our new approach to resolving mould and damp issues provides a comprehensive process to resolve the issues in any affected home. The MyRepairs approach will be applied to all repairs services and will also help to improve quicker diagnosis and resolution.

4.9 Approximately half of our stage 2 complaints result from an actual or perceived failure to deliver a commitment at stage 1. This is broadly consistent with the other RSLs in Group. The majority of these relate to repairs but there are some other issues. Our staff are now much clearer about this issue and are tasked with ensuring stage 1 commitments go ahead and following up with customers immediately after the resolution to ensure that they are then satisfied.

4.10 Staffing issues are the second highest category for complaints, again this is consistent with the other RSLs in Group. Given the high number of service interactions our staff have with our customers eg over 1 million calls were made to the CFC this year, we would expect this to be a significant category. Many of the complaints relate to the fact that staff cannot provide what a tenant may want (eg a faster move to a different home) but some are also due to the failed commitments highlighted above. Sometimes this can be due to the need for communication between housing officers and City Building Glasgow. Performance review and team meetings with staff have focused on this issue. The MyRepairs approach is already providing improvements in communication.

4.11 In addition to the feedback from customers highlighted above, we also ensure that we pick up on a range of issues, small and larger, which can be resolved to help improve customer service. Some key themes are highlighted below.

4.12 **Repairs** complaints are significant across the Group, in line with the fact that this is the highest volume service provided. As outlined above, the new MyRepairs team has been introduced to produce better outcomes for our customers. The priority for the team is to ensure that complex repairs are dealt with systematically and that we establish the root cause of complex issues at the outset.

4.13 We have ensured that we are using the MyRepairs team across our communities. We have also enhanced our relationships with City Building Glasgow through increased meetings, including in- person meetings to discuss key themes and address issues raised in complaints.

4.14 We are working with the MyRepairs team to ensure improved investigation and diagnosis at the outset of a repair. This should reduce multiple visits, prevent delays in ordering materials and improve customer satisfaction.

4.15 The new book it, track it, rate it system being rolled out across Group will help to respond to issues raised by customers about the lack of information about appointments. This should ensure that customers get clear updates on the timing of their repair, including when the operative is coming close to their area. It will also provide the opportunity for instant feedback from the customer on how their repair went.

4.16 The new approach was piloted in March 2023 on a very small scale with some of our plumbers and will gradually be established across all appointments during the first quarter of the new financial year. It will provide a further easy opportunity for customers to raise complaints but also for us to resolve them rapidly and effectively.

4.17 A new workflow process has been created for no access repairs. This ensures that repair lines are kept open, and customers are contacted directly to rearrange an appointment time. In the past, where customers did not give access and did not contact us the repair line could be closed.

4.18 **New build defects** have sometimes been harder to resolve than our normal repairs. This is largely because the house builder is responsible for resolving defects in the first year. The builders have tended not to be as time or customer focused as we would like. We have now ensured that the housing officer is always the key point of contact for these repairs and that they have all the required contacts with the housebuilder. Our development team are finalising a new procedure for contractors which will ensure that they deal rapidly with defect issues and that we have the option to step in and resolve if this does not happen.

4.19 **Door measurement:** Some customers raised frustrations that we had gone back and measured doors more than once before being able to replace them. Our investigations have found that this was partly because the work order was closed once the door had been ordered. This meant if there were any subsequent issues the measurements were lost. A new process has been put in place which requires the work order to be kept open and ensures a clear location for measurements to be stored.

4.20 **Antisocial behaviour (ASB):** Some customers reported that they are unhappy with how we have handled antisocial behaviour incidents reported to us. Learning from some of our complaints showed that procedures could have been more clearly followed and some additional training has been carried out for staff by the Antisocial behaviour Intervention and Prevention team. We are reviewing our approach to responding to anti-social behaviour over the next 6 months and will incorporate lessons from complaints within this review.

Timescales

4.21 In addition to the number of complaints, timescales for responding to customers are the key performance indicators which we have to feedback to regulatory bodies. The Scottish Housing Regulator and the Scottish Public Services Ombudsman have different definitions for their measurement. These are covered in more detail in the annual performance report.

4.22 We are achieving an average response time of 4.2 days for stage 1 complaints and 18.24 days for stage 2 based on the Charter measure. As shown in the table below, stage 2 response times have improved by more than 2 days compared to the year before. We were also comfortably within the 6-day target for a full response to all complaints (stage 1 and 2 combined) at 5.79 days.

Charter – average time for a full response to complaints (working days)				
Subsidiary	2021/22		2022/23 – YTD Stage 1 – 5-day target, Stage 2 – 20-day target	
	Stage 1	Stage 2	Stage 1	Stage 2
WHS	4.74	21.95	3.84	17.96
WHE	3.92	18.92	3.89	18.27
WHG	3.98	20.78	4.23	18.24
Loretto	3.62	21.33	3.51	17.72
Lowther (ARC equivalent measure)	4.28	22.88	3.59	18.01

4.23 The table below shows the percentage of complaints responded to within the SPSO timescales for us (including owners receiving a factoring service from Lowther on behalf of WHG).

SPSO Indicator 2 - number and % of complaints at each stage that were fully closed within timescales of 5 and 20 working days			
Subsidiary	Stage 1 – responded to within 5 working days	Stage 2 – responded to within 20 working days	Escalated complaints* responded to within 20 working days
WHG	88.11%	90.63%	93.46%

Complaints received at stage 1 and later escalated to stage 2

4.24 Analysis of stage 1 complaints confirms there was an increase in the number received by 26% in quarter 3 and 4 compared to the first two quarters of 2022/23. Similarly, there was a 23% increase in the number of stage 2 complaints received across the same period. The increased complaint numbers corresponds with the roll out of additional training and with a period of inclement weather. However, it has also resulted in a decrease in timescale performance which is already being addressed.

Continuous improvement

4.25   The Business Improvement Team was formed on 8 November 2022. This team combines complaints and business improvement within one staff group. Key priorities from the improvement plan are:

- Reducing stage 2 repairs complaints as a proportion of stage 1 repairs complaints
- Improving the quality of our approach, particularly at stage 1
- Increasing awareness of the importance of good complaints handling
- Improving learning and analysis

4.26   The repairs transformation programme and the new MyRepairs specialist team are key to reducing the volume of stage 2 repairs. The Business Improvement Team is working closely with the specialist team and more widely with the Repairs, Investment and Compliance team to ensure that they have clear sight of the issues and themes arising from complaints. We have seen some early indications of reductions in stage 2 repairs complaints, but it is too early to be clear that we have established this trend.

4.27   One of the early priorities has been to train additional staff in complaints handling to assist with delivering high quality and timely responses to customers. All staff in the Business Improvement Team are now involved in our stage 2 responses. Our new approach, which ensures more ownership of stage 2 complaints at Locality Director level has been rolled out across the business. This includes directors being responsible for the direct contact with the customer and ensuring that the tone of our letter reflects the needs of the customer.

4.28   Additional training has been rolled out to Customer First Centre staff who are generally the first point of contact for complaints. Further training will be rolled out to Housing Officers and other relevant colleagues during Summer 2023. This will include training on communication and responses to complaints. The Business Improvement Team also provide one to one training and mentoring where required.

4.29   A new suite of Power BI reports has been developed to allow much clearer and quicker analysis of complaints themes and performance. This will be further developed during 2023/24 and will help the Locality Directors and Housing Officers understand our issues and at patch level. The Business Improvement Team and IT colleagues are also working to review what improvements can be made to the recording of complaints to help further improve responses and analysis.

4.30   The new MyVoice programme will provide a new route in for customers to make complaints. This may result in an increase in complaints initially but it should also allow us to resolve people's dissatisfaction more quickly.

SPSO review

4.31   Where customers remain dissatisfied with our responses after stage 1 and stage 2, they are entitled to take the issue to the SPSO. A total of 16 complaints were taken to the SPSO and a further 5 complaints taken to the First Tier Tribunal (FTT) in 2022/23, showing the effectiveness of our responses.

4.32   Following their investigations, no complaints were upheld by the SPSO. They did however provide feedback on two cases in relation to staff training on complaint handling, and the delay in processing a tenancy assignation. On both occasions they recommended further training for staff. Feedback was shared with senior managers to arrange further training for the individual staff and their wider teams.

4.33   [redacted]

5.   Customer Engagement

5.1   Customer engagement over the year has affirmed the analysis we have undertaken directly from complaints. The key themes raised have been around repairs and failed commitments. During 2023/24 we will continue our analysis of complaints, use of case studies and analysis of issues raised from our engagement programme. Group customer engagement this year will prioritise repairs, antisocial behaviour and neighbourhoods. These areas will all provide valuable information for improving our services and reducing complaints. We will also undertake specific engagement covering overall performance and other issues which tenants identify as important.

5.2   A customer update on our performance and lessons learned from complaints will be developed for our customers. This will be published on the website and will meet the SPSO requirements for feedback to customers.

6.   Environmental and sustainability implications

6.1   There are no environmental and sustainability implications arising from this report.

7.   Digital transformation alignment

7.1   Part of the continuous improvement programme this year will be to identify and improve aspects of how we record and process complaints. This has been included in resource plans for the year. As part of this process, we will be reviewing our long-term needs, and this may result in potential additional digital requirements in future years which will then be considered within the digital transformation plan.

8.   Financial and value for money implications

8.1   Understanding our complaints helps us to direct our services appropriately and improve our processes and procedures. This helps to ensure that we are providing the best value for money to our customers. There are no direct financial implications from this report.

9.   Legal, regulatory and charitable implications

9.1   All RSLs are required to comply with the Model Complaints Handling Procedures (MCHP) produced by the SPSO. These were last revised in 2020. This aims to provide a standardised and consistent process for customers across the sector. It covers all services delivered by the RSL, including any which are contracted or commissioned.

9.2 Factoring services are subject to the Code of Conduct for Property Factors, which provides slightly different requirements. Where factoring customers are dissatisfied with our responses at stage 1 and stage 2, their complaints would be directed to the First Tier Tribunal for Scotland (Housing).

9.3 There are no direct legal, regulatory or charitable implications as a result of this report. However, the implementation of our activities will be assessed to ensure that they fulfil and comply with any legislative, regulatory or charitable implications that apply.

10. Risk Appetite and assessment

10.1 End-to-end complaint handling, including monitoring and continuous learning and improvement processes are key to mitigating risks of:
- Decreasing customer satisfaction
- Reputational damage; and
- Failure to meet SPSO guidance.

10.2 The Strategic Risk Register sets out the following risk appetites for strategic outcome 'Progressing from Excellent to Outstanding':
- **Reputation/credibility** - *Minimal, Tolerance for risk taking limited to those events where there is no chance of significant repercussion.*
- **Laws and regulation** – *Cautious; Limited tolerance for "sticking our neck out". Want to be reasonably sure we would win any challenge.*

11. Equalities implications

11.1 There are no equalities implications arising from this report. Where any significant change to the customer aspects of the complaints process is considered, we would undertake an equalities impact assessment.

12. Key issues and conclusions

12.1 This report outlines performance and learning from complaints over 2022/23. The number of complaints has risen considerably this year when compared to last year, in part as a result of more effective recording and also reflecting significantly higher demand on our repairs service and volume of customer interactions. Despite this, performance on timescales has held up relatively well.

12.2 We have been able to undertake greater analysis on our complaints in the last year which correlates with feedback from other customer engagement. This has helped support a number of improvements and potential improvements at Group and local level. These include improved repairs processes and better links between Wheatley Homes Glasgow teams, City Building and Development Teams. There is an ongoing process to ensure that we continue to learn from complaints and improve our ability to respond to customers.

13. Recommendations

13.1 The Board is asked to note this report.

APPENDICES:
None

Report

To:	**Wheatley Homes Glasgow Board**
By:	**Laura Pluck, Group Director of Communities**
Approved by:	**Steven Henderson, Group Chief Executive**
Subject:	**Group Suicide Prevention Framework**
Date of Meeting:	**19 May 2023**

1.   Purpose

1.1   To provide an overview of the Group Suicide Prevention Framework ("The Framework") to the Board for comment.

2.   Authorising and strategic context

2.1   Under its Terms of Reference, the Board is responsible for overseeing the implementation of relevant group policies and frameworks.

2.2   The Framework closely aligns with the following strategic themes and outcomes:

- Delivering Exceptional Customer Experience; The Framework will continue to support our ambition of being sector-leading in the provision of customer services to the highest standard and support our agreed impact measures of **reducing poverty and improving wellbeing** and **strengthening our communities**.

- Changing Lives and Communities; The Framework will help support our customers and communities' resilience levels through early intervention and prevention activity based on increased awareness levels of suicide prevention.   This supports our outcome of **developing peaceful and connected communities**.

- Developing our Shared Capability; Having an informed workforce in suicide prevention will help support achievement of our strategic outcome of **strengthening the skills and agility of our staff**.   This will in turn provide better outcomes for our customers around suicide prevention activity and ensure they access the correct support to meet their needs and circumstances.

3.   Background

3.1   Suicide is a complex issue that is rarely caused by one factor and is considered a public health issue.   It affects all age groups and communities, however some individuals are more at risk of suicide as noted in Scotland's Suicide Prevention Strategy 2022-2032 'Creating Hope Together', where data from the Scottish Suicide Information Database (ScotSID) profiling suicide deaths between 2011 and 2019 notes:

- Just under three-quarters of all suicides in Scotland are male;
- Almost half (46%) were aged 35-54;

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- 88% of people that die by suicide are of working age, with two-thirds of these in employment at the time of their death.

3.2 Evidence tells us that suicide is three times higher in more deprived areas. As two-thirds of our communities are within the most deprived data zones as measured by the Scottish Index of Multiple Deprivation (SIMD), it is important that we have an awareness of this issue and have in place the correct measures to support those most at risk.

3.3 We have a long history of supporting the most vulnerable and marginalised groups within society through our work and the services we deliver. This includes our extensive range of wraparound support available for customers including Here for You, Welfare Benefits/Fuel Advice services, Home Comforts, Wheatley Foundation programmes, our Community Improvement Partnership and Wheatley Care.

3.4 We have developed a wide-ranging suite of policies that enable staff to best support vulnerable customers with any safeguarding issues through our Group Protecting People Policy Framework, however we do not currently have anything specifically relating to addressing suicide.

3.5 In Scotland there were 753 probable deaths by suicide in 2021. Just under three-quarters of these cases were males, and the highest prevalence of suicide was amongst the 45–54-year-old age group for both males and females. Suicide can affect anyone and does not discriminate.

3.6 The Group Protection Team, as part of Wheatley 360, assume strategic and operational responsibility for suicide prevention activity. They ensure our people are supported to deal with any cases of this nature, as our frontline staff deal directly with our customers and are the staff group who generally experience anyone who is either feeling suicidal, has suicidal ideation, attempts suicide or has died by suicide (e.g. Housing, NETs, Care, Customer First Centre and Debt Recovery staff).

3.7 Within the team, there is a Suicide Prevention and Mental Health Coordinator (SPMHCo). The SPMHCo deals with any suicide cases across the business, including threats, ideation, attempts and deaths, and ensures staff are supported to know what action to take and when. They collate intelligence and information about suicide and provide advice, support, and guidance to anyone requiring this. The SPMHCo and Group Protection Liaison Manager attend operational and strategic meetings concerning suicide prevention within the Glasgow and Dumfries & Galloway Local Authority Areas.

3.8 During the global pandemic, it was clear that people's mental health and resilience were challenged, and it is anticipated that now we have entered and are living through the economic cost of living crisis, that again these same customers and many others will have their resilience and mental health challenged.

3.9 During 2022/2023 the following figures were recorded by the Group Protection Team about suicide for Wheatley Homes Glasgow customers:

- 9 deaths by suicide;
- 14 suicide attempts;
- 21 suicidal ideations;
- 20 threats of suicide.

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3.10 With the recent launch of Scotland's Suicide Prevention Strategy 2022-2023, there was recognition of the importance being placed nationally on ensuring all sectors work in partnership to achieve the vision of reducing the number of deaths by suicide in Scotland. It was clear from this there was a need for the creation of The Framework for Group to help meet this vision and ensure that staff and leadership across our organisation were equipped to support with this.

4. Discussion

4.1 The Framework has been created to provide clear oversight of our commitment to supporting our customers impacted by suicide and of the activity we will take to meet the vision and priorities set out within. It is a tool to support any staff members who come into contact with anyone who expresses thoughts or threats of suicide, as well as those who attempt suicide. It also provides details of support for family members and communities who are bereaved by suicide.

4.2 The vision for The Framework is for ***Wheatley communities to be supported; conversations about suicide normalised; and for the rate of suicides to decrease.*** We will achieve this vision through our five priority areas for activity, which are described in detail below.

4.3 Suicide is preventable and avoidable; therefore, we aspire to be proactive in supporting our customers to access any support or assistance they require, as early as possible. The existence of The Framework to guide and enhance staff awareness around suicide prevention is a crucial part of our overall approach to ensuring our staff are informed and confident in dealing with this important issue.

4.4 The Framework was written in synergy with the Scottish Government and Convention of Scottish Local Authorities (COSLA) new suicide prevention ten-year strategy – Creating Hope Together – which runs from 2022–2032 and its supporting action plan. It also took cognisance of the Samaritans five-year suicide prevention strategy – Tackling Suicide Together: providing a safe space in uncertain times, which runs from 2022-2027 - and the Scottish Association for Mental Health (SAMH) strategy, 'We won't wait'.

4.5 It was important to devise The Framework in line with the national policy context, to ensure that we were mirroring the current agreed approach and identified guidelines. It was also crucial to incorporate other essential information within The Framework to provide context for its development, such as the prevalence of suicide within Scotland and within our communities, as well as the purpose of The Framework and our vision for it. The Framework also contains a section on definitions to help staff identify the language and terminology used within suicide, as well as an introductory section with sources of support in recognition that reading the document could be triggering for some people.

4.6 Within the Framework we created five priority areas to achieve our vision and set out the intended outcomes for each as follows:

	Priority Area	Outcomes
1.	Reduce suicide risk in our communities through awareness raising and an early intervention preventative approach.	Reduce the risk of customers being affected by suicide and raise awareness of the support services available.
2.	Provision of appropriate services to tackle inequalities and address the needs of individuals identified as at risk of suicide.	A range of support services are available for individuals to access to help address the ongoing issues they face.
3.	Suicide prevention training is available to all staff and tailored to their job role.	Our staff are confident and well trained in responding to customers affected by suicide/mental health and know how to tailor their approach to support them
4.	Establish effective strategic partnerships in relation to suicide prevention.	Continue to develop strategic partnerships with relevant partners and key organisations to ensure we deliver an innovative response to suicide prevention.
5.	Develop effective data collection and analysis measures and work to develop information-sharing pathways for suicide related activity.	Develop effective data collection and analysis measures and work to develop information-sharing pathways for suicide related activity.

4.7 The Framework was developed to outline the key priority areas we believe are essential to support suicide prevention and the activity we will undertake to achieve our vision of normalising conversations around suicide to better support those at risk and ultimately reduce the number of deaths by suicide within our communities. Under each priority area within The Framework there is a clear detailed outline of either work currently underway to achieve the outcomes set for each priority area, or future planned work to achieve the outcome.

4.8 The Framework highlights the need to utilise data that identifies those customer groups most at risk of suicide. The Framework identifies specific customer segments of note, to help raise awareness among staff around the need to be mindful of this when supporting and working with our customers. We want our people to confidently have conversations around suicide and be in the position to offer appropriate wraparound support and signposting options as necessary.

4.9 Crucially the document outlines steps staff members should take if they are presented with a situation involving suicide, including specifying which agencies require to be contacted and what steps require to be taken. It also identifies the services and support group has in place to offer customers, including details of our wraparound support services available.

4.10　Dealing with someone who is suicidal, or the aftermath of a suicide is not an easy task, therefore it is equally as important that staff are aware of the support available to them. This includes our employee assistance programme, W.E Benefits, and bespoke vicarious trauma training. The Group Protection team are specially trained in this area, with all team members being ASIST trained (Applied Suicide Intervention Skills Training) and several of the team also being Mental Health First Aid trained.

4.11　A key element identified as a priority area within the Framework is ensuring that staff receive bespoke suicide prevention training suited to their job role. This has been covered within the document, and working collaboratively with the Academy, we have already commenced work to identify the training that will best suit the needs of all relevant staff groups across the business (eg Care, Housing, NETs).

4.12　As with most areas across our business, this vision cannot be achieved by working in isolation, and establishing and maintaining key strategic partnerships is crucial for the success of the Framework. These partnerships will allow the sharing of best practice, information, data, and training to support achievement of our outcomes and enhance our position in supporting our customers effectively.

4.13　The intention is for a full launch of the Framework, once approved, to all key staff dealing with and supporting customers on a regular basis. This will include colleagues within the Customer First Centre, Housing, Care, NETs, Group Debt Recovery, Wheatley 360, Wheatley Foundation, and all relevant Wheatley Solutions Teams. Awareness will be raised around The Framework by utilising our WE Connect forum, and a clear communications strategy will be designed to ensure maximum reach of the document across the business to all staff.

4.14　The document will sit alongside, but not within, the Group Protecting People Framework. This is because suicide is prevalent across all areas of public protection including Domestic Abuse, Adult Support and Protection, Child Protection and the Multi-Agency Public Protection Arrangements (MAPPA).

4.15　The formulation of a suicide prevention action plan will complement The Framework, which mirrors the approach taken in the Scottish Government and COSLA strategy. This document will provide the detail around the activity that will be taken to deliver the vision and achieve the outcomes identified within the five priority areas.

5.　Customer Engagement

5.1　There has been no direct customer engagement as part of this work, due to the nature of the content and associated sensitivity involved.

5.2　The Framework is to support staff in dealing with any customers who present as suicidal, are at risk of suicide or have a relative/friend/neighbour who has died by suicide, to ensure they have the correct information and tools to support them.

6. Environmental and sustainability implications

6.1 The Framework is fundamentally around identifying and supporting customers to access appropriate support and services to meet their needs and helping to build resilience and wellbeing with them and within our communities. This meets the objectives of 3 of the UN sustainable goals, including:

Goal 3:   Good Health and wellbeing;
Goal 10:   Reduced inequalities;
Goal 11:   Sustainable cities and communities.

7. Digital transformation alignment

7.1 The launch of the Framework, once approved, will comprise of a hybrid approach to educating staff of its existence and content. This will take the form of briefing sessions for managers across group via Microsoft Teams and in person sessions, with the ambition of utilising the same hybrid model for taking The Framework out to their respective teams.

7.2 The Framework will be available on the Protecting People WE Connect page, alongside other supporting information around suicide prevention and bereavement by suicide. WE Connect is routinely used by the Group Protection Team to highlight information of importance in relation to suicide prevention, including suicide prevention awareness week and suicide prevention campaigns from partners including the Samaritans.

8. Financial and value for money implications

8.1 There are no financial implications associated with implementation of The Framework.

9. Legal, regulatory, and charitable implications

9.1 There is no specific legislation in relation to suicide and/or suicide prevention. In the event of a suicide attempt, this invariably invokes a required response to submit an Adult Support and Protection referral to the relevant Local Authority, to help safeguard the individual and get the appropriate level of support in place. This is set out in the Adult Support and Protection (Scotland) Act 2007. This can also be the case for reported incidents of suicidal ideation and/or threats of suicide.

10. Risk Appetite and assessment

10.1 The Framework supports our ambitions across a number of our strategic themes, in particular: Delivering Exceptional Customer Experience, Changing Lives and Communities and Developing our Shared Capability. Our risk appetite in relation to operational delivery for these themes ranges from open to hungry.

10.2 This means we encourage innovation and in some cases have a desire to 'break the mould' and challenge current working practices. The development of The Framework is consistent with these risk appetites.

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10.3 The risk to the organisation for non-development of The Framework could be:

- Increased suicides within our communities, where staff are unable to implement an early intervention approach to offering support and signposting to vulnerable customers at risk;

- Uneducated workforce who are unable to respond to the needs of our customers;

- Reputationally it puts us behind other similar organisations who are actively involved in raising awareness of suicide prevention and educating their staff in this area;

- Less awareness of how much of an issue suicide is for us, without proactively seeking to establish partnerships to gather this vital data and our staff remaining unaware they require to feed this into the Group Protection Team.

11. Equalities implications

11.1 There is a well-known link between suicide and deprivation. The suicide rate is three times higher in the most deprived areas of the country compared to the least deprived areas. The reasons are varied and complex, however we do know that they centre on socio-economic issues such as disempowerment, social exclusion, poverty, poor mental health, trauma, adverse childhood experiences and more.

11.2 The rates of suicides in males have been consistently higher than females, a finding that goes back as far as 1994. We also know that those in the middle age bracket constitute the highest numbers of those who die by probable suicide.

11.3 The Framework identifies both as being key areas of focus for prevention activity, alongside some other groups including those who have experienced homelessness, those with addictions and those with mental health difficulties, and works to try and improve awareness of this risk for these groups and access to services and support for all.

11.4 An Equalities Impact Assessment has been undertaken on The Framework to ensure that it is inclusive and fair and designed to meet the needs of all customers across Group.

12. Key issues and conclusions

12.1 Suicide is an issue affecting all communities across Scotland. A link has been established between suicide and deprivation, therefore given that two thirds of Group communities are within the most deprived data zones as measured by the Scottish Index of Multiple Deprivation (SIMD), the establishment of The Framework is a practical step.

12.2 The global pandemic and cost of living crisis are external factors which have challenged the mental health and resilience of many of our customers and can have a detrimental effect on suicide within our communities as a result.

12.3 The Framework has been established to outline the priority areas for group to support our vision of *Wheatley communities to be supported; conversations about suicide normalised; and for the rate of suicides to decrease.* Five priority areas have been identified which includes:

1.	Reduce suicide risk in our communities through awareness raising and an early intervention preventative approach.
2.	Provision of appropriate services to address the needs of individuals identified as at risk of suicide.
3.	Suicide prevention training is available to all staff and tailored to their job role.
4.	Establish effective strategic partnerships in relation to suicide prevention.
5.	Develop effective data collection and analysis measures and work to develop information sharing pathways on suicide related activity.

12.4 It has been developed alongside the recently launched Scottish Government and COSLA ten-year strategy – Creating Hope Together - at the same time as taking cognisance of other important suicide prevention strategies in operation by the Samaritans and SAMH.

12.5 The document will help staff to understand customer segments who are more at risk of suicide and ensure they are confident in dealing with cases, taking the correct course of action and invoking the appropriate wraparound support and signposting the customer or person we work for requires.

12.6 An action plan will complement The Framework and will set out clearly the activity that will be taken to achieve the stated vision across each of the five priority areas.

13. Recommendations

13.1 The Board are asked to note the Group Suicide Prevention Framework and its designation as a Group wide framework and provide comment as necessary.

LIST OF APPENDICES:
Appendix 1: [redacted] Available here

Report

To: **Wheatley Homes Glasgow Board**

By: **Frank McCafferty, Group Director of Assets and Repairs**

Approved by: **Steven Henderson, Group Chief Executive**

Subject: **Fire Prevention and Mitigation Framework**

Date of Meeting: **19 May 2023**

_____

1. Purpose

1.1 The purpose of this report is to provide the Board with an update on the implementation and performance of our Fire Prevention and Mitigation Framework (FPMF) in 2022/23 and, more specifically:

- The current rate of Home Fire Safety Visits (PCRAs),
- The current rate of Accidental Dwelling Fires (ADFs),
- Progress with Fire Risk Assessment (FRA) Programmes to include, MSF and Living Well premises,
- Update on Fire Safety Legislation and Best Practice.

1.2 This report also provides an opportunity to review the revised Group Fire Prevention and Mitigation Framework following its annual review and as approved by Wheatley Housing Group Board on 26 April 2023.

2. Authorising and strategic context

2.1 Under the Group Standing Orders the Group Board is responsible for approving and designating Group frameworks and policies.

2.2 Under our Terms of Reference, we are responsible for monitoring our performance and corporate risks. This report supports us with those responsibilities.

2.3 Developing peaceful and connected neighbourhoods is one of our strategic outcomes under the theme, _Changing lives and communities_. Within this outcome we have a minimal risk appetite to legal compliance and a commitment to ensuring the best fire safety precautions throughout our homes.

2.4 This report seeks to demonstrate our commitment and the commitment outlined in the Group Fire Prevention and Mitigation Framework (FPMF) to achieve legal compliance with current fire safety legislation and best practice guidance, namely:

- Fire (Scotland) Act 2005.
- Fire Safety (Scotland) Regulations 2006.
- Practical Fire Safety Guidance for Existing High Rise Domestic Premises.
- Practical Fire Safety Guidance for Specialised Housing.

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3. **Background**

3.1 In the context of fire safety our commitment to delivering excellence has been endorsed by the Scottish Government's Building Safer Communities, and Unintentional Harm Hub who highlighted our Fire Safety Operating Model as a fire prevention exemplar.

3.2 Keeping our customers and communities as safe as they can be, will always be of paramount importance to us and this is recognised within our 2021-2026 Strategy: Your Home, Your Community, Your Future, in which we clearly state that fire safety will remain a priority.

3.3 As a key strategy for us, the FPMF 2021-2026 was developed and approved by the Board in April 2021. This evidences to all partners and stakeholders the importance we place on fire safety and how we ensure fire safety in our homes and communities is maintained in accordance with legislation and best practice. The Framework is reviewed annually to consider legislative, performance and good practice changes, as well as any business / organisational changes.

3.4 This report also provides an update on the positive progress being made in our rate of Home Fire Safety Visits (PCRAs) and Accidental Dwelling Fires (ADFs) and outlines our compliance in the completion and implementation of fire risk assessments required under current fire safety legislation and best practice fire safety guides, issued by the Scottish Government.

4. **Discussion**

Person Centred Fire Risk Assessments (PCRAs)

4.1 The Fire Safety Team set an ambitious target in the last year to complete 455 PCRAs between April 2022 and March 2023, that would see an increase of approximately 10% from the previous year's performance of 412 in 2021/22.
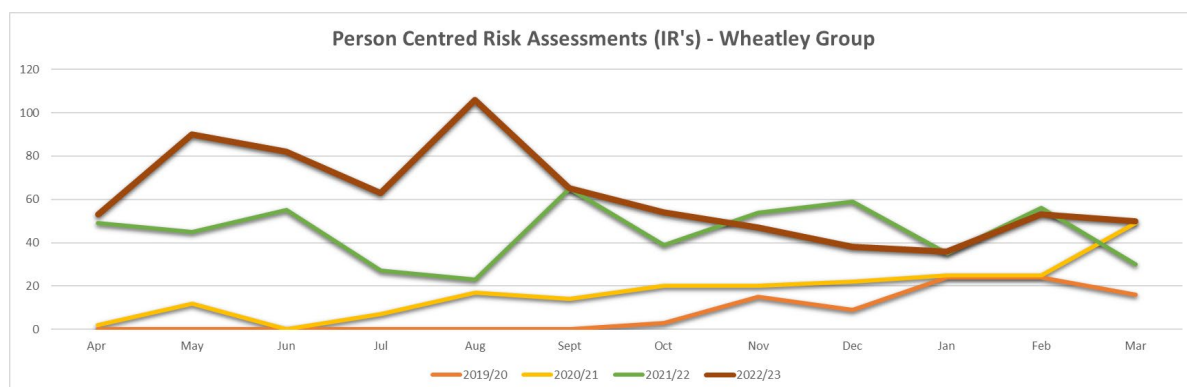
4.2 In the last 12 months between April 2022 – March 2023, the Fire Safety Team have exceeded those targets and increased the number of PCRAs conducted in Wheatley Homes Glasgow from the previous year by 30%, resulting in approximately 532 PCRAs being undertaken.

4.3 In addition to the Fire Safety Team conducting PCRAs, there has been a further 868 Home Fire Safety Visits undertaken in our customers' homes by Scottish Fire and Rescue between April 2022 – March 2023.

4.4 In our efforts to reduce the fire risk for our most vulnerable customers, the fire safety team provide fire safety advice, guidance and fire safety products to help reduce the risk of accidental dwelling fires. As a result of the 532 PCRAs carried out this year, the fire safety team have arranged for:

- 276 customers being gifted with fire safety products e.g. air fryers etc
- 125 stove guards being recommended for customers' electric cookers
- 73 customers receiving an upgrade to their LD2 home fire detection
- 41 housing first customers receiving a visit and fire safety starter pack
- 202 fire safety repairs being raised (e.g. replacement of letter boxes, self-closing devices on flat entrance doors, re-alignment of internal doors etc.)

PCRAs - Fire Safe Actions

Category	Wheatley Homes Glasgow	Group
Fire Safety Repair	202	262
Housing First Pack	41	47
Detection Upgrades	73	114
Stove Guards	125	182
Fire Safe Products	276	390
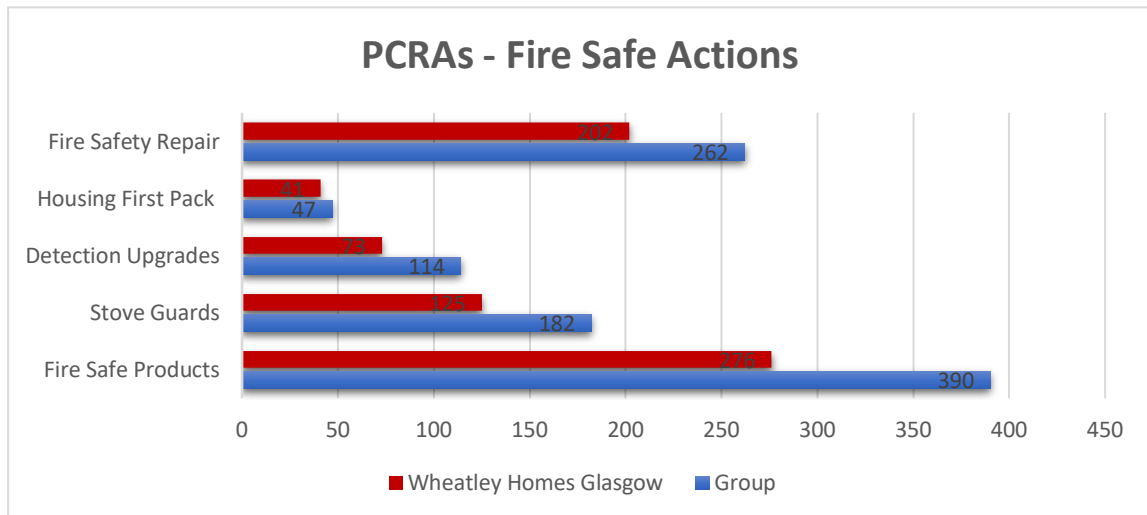
4.5 As part of the PCRA process in the last year, the fire safety team have also incorporated a holistic approach that looks beyond the immediate fire safety issues that include aspects of health, safety and wellbeing.

4.6 This approach is consistent with Scottish Fire and Rescue proposals to transition their home fire safety visits to safe and well visits. This has resulted in our fire safety team incorporating referrals to our Home-comforts Team, Handyperson Service and other wrap around services like Tenancy Support and the Eat Well team in addition to, the fire safety advice and fire safety products that they issue.

Accidental Dwelling Fires (ADFs)

4.7 The impact of PCRAs undertaken in the last 12 months by the Fire Safety Team, is a significant factor that cannot be underestimated in our efforts to reduce ADFs in customers' homes.

4.8 The number of ADFs experienced across Group in 2020/21 was 217. We previously set a target to reduce the number of ADFs by a further 10% between 2021 and 2026. Between April 2022 and March 2023, there were 112 x ADFs experienced in Wheatley Homes Glasgow, in comparison to 121 x ADFs the previous year, that provides for a reduction of approximately 8% ADFs in the last year.

Accidental Dwelling Fires - Wheatley Group
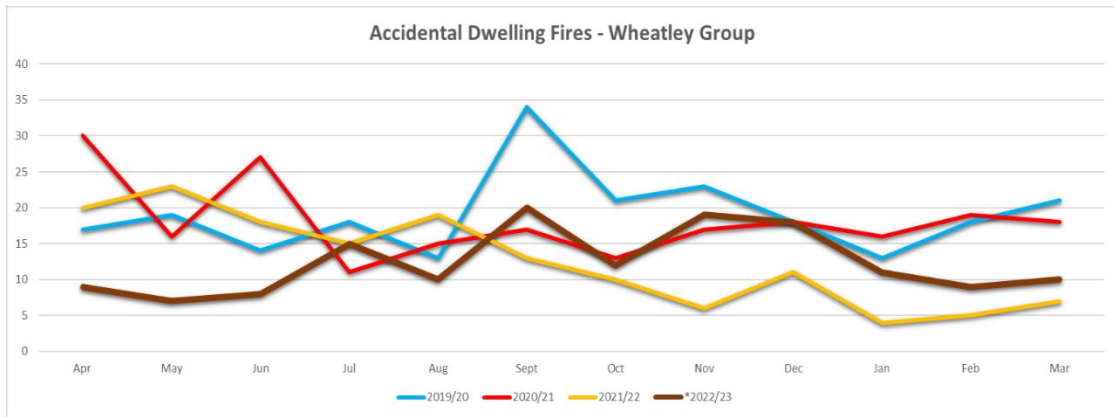
4.10 It is therefore evident that the efforts of the Fire Safety Team through customer engagement and PCRAs are having a positive impact on the reduction of ADFs

Fire Risk Assessment

Relevant Premises (HMOs, Care Premise, Offices, Depots etc.)

4.11 The completion of FRAs in Group relevant premise extends currently to the Corporate Estate that includes, HMOs, Care Premises, Offices Workshops and Depots.

4.12 In 2022/23, there were 2 FRAs undertaken in Wheatley Homes Glasgow to ensure their recommended frequency of review had been met and thereby ensuring ongoing legal compliance.

4.13 Currently, all our relevant premises in Wheatley Homes Glasgow have a valid FRA to satisfy the requirements and legal obligations set out in the Fire Safety Scotland Act 2005 and Fire Safety Scotland Regulations 2006.

4.14 No significant issues were identified for Wheatley Homes Glasgow during the course of the FRA programme as there are well established, mature fire safety arrangements in place overseen by competent staff and management teams.

Non-Relevant Premises (MSFs and Living Well)

4.15 The completion of fire risk assessments in non-relevant premises is not a legal requirement but one, that is considered best practice in guidance issued by the Scottish Government.

4.16 In recognition of Practical Fire Safety Guidance for a) Existing High Rise Domestic Premise (MSF) and b) Specialised Housing (Living Well), the Board have previously agreed a 3-year recurring cycle of fire risk assessments, in line with the recommendations outlined in said guidance.

4.17 However, where any significant change to our MSF or Living Well premises is identified by our repairs team, environmental teams or locality housing directors, such as refurbishment or increase in fire incidents, our fire risk assessments will be reviewed more frequently to ensure fire safety arrangements continue to be robust and effective.

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4.18   The first programme of fire risk assessments in MSFs and Living Well premises was accelerated and completed 12 months ahead of schedule in March 2022. The cycle of fire risk assessments in MSFs and Living Well premises recommenced in July 2022 and will follow a three-year recurring cycle.

4.19   Across Wheatley Homes Glasgow there were 39 FRAs undertaken in Multi-Storey Flats and 14 x FRAs in Living Well Premises between April 2022 and March 2023.

<u>Actions Arising from FRAs</u>

4.20   During the period 2022/23, there were 55 Fire Risk Assessments completed for both relevant and non-relevant premises in Wheatley Homes Glasgow.

4.21   The composition of fire safety actions that were raised can be broken down into Management (Procedural, Training, Housekeeping Checks etc), Physical (Repairs, Signage, Door Upgrades etc) and Maintenance (Fire Alarms, Extinguishers, Lighting etc) actions that can be associated with various fire safety measures and / or procedural arrangements.

4.22   The majority of actions can be categorised as Priority 3 or lower (P3 – 88%), Priority 2 (11%) or Priority 1 (1%).

    Note: no fire safety improvements, categorised as a Priority 1 were considered a high fire risk and / or threat to life risk during our FRA programme.

4.23   The Fire Risk Assessments undertaken across Wheatley Homes Glasgow for both Relevant and Non-Relevant Premises generated the following number of actions between April 2022 and March 2023:

    ▪ All Actions –   930 (100%)
    ▪ Closed Actions –   895   (96%)
    ▪ Open / Ongoing –   28   (3%)
    ▪ Ongoing 3rd Party –   07   (1%)
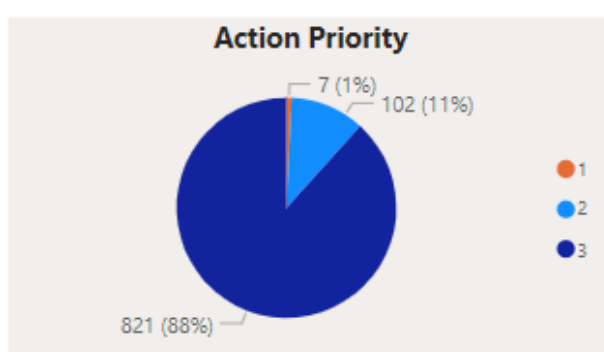
Priority Ratings P4 & P5 no longer in use and recorded as P3

4.24   Open and Ongoing actions that remain to be completed across Wheatley Homes Glasgow, account for 3% of all actions generated in the FRA Programme for 2022/23 of which, none are considered an immediate fire risk.

4.25   On reflection of the recommended actions raised between April 2022 and March 2023, there is clear evidence from the previous year that findings are now reducing in priority with there being fewer P1 and P2 from the previous year.

Fire Safety Update

Fire Prevention and Mitigation Framework

4.26 There are no significant changes in our updated FPMF. The key changes relate to either progress to date, updating elements to reflect our current working practices and to reflect changes in terminology.

4.27 For example Home Fire Safety visits are now referred to as Person Centred Risk Assessments (PCRAs) and allows the Fire Safety Team to incorporate Scottish Fire and Rescue Services Safe and Well concept into our assessment that keeps the customers safety and wellbeing front and centre of our engagement.

4.28 Our targets to reduce Accidental Dwelling Fires by 10% over the period of our Group Strategy 2021 – 2026 have not changed and we currently remain on track to achieve this.

4.29 These changes are highlighted in track changes in the updated Framework document included at Appendix 1.

Scottish Government Technical Advice Note: Dec 2022 v2.0

4.30 Scottish Government have updated their Technical Advice Note: Determining Fire Risk posed by External Wall Systems in relation to Grenfell Phase 01 recommendations and changes to the Fire Safety Order in England and Wales.

4.31 The Technical Advice Note is not a legal requirement but one of best practice for us to consider and presents a requirement to review and / or appraise external wall systems (cladding) on buildings of 2 or more storeys.

4.32 The Technical Advice Note progresses beyond the initial data gathering exercise on cladding that was provided by us to the Scottish Government following Grenfell.

4.33 The Technical Advice Note now recommends a further review and appraisal of external wall systems that considers the fire risk posed by the as built system and materials.

4.34 As a result, the Scottish Government have established a pilot scheme to assess external wall systems (Single Building Assessment) to further inform their cladding and remediation strategy. There are currently 105 buildings being assessed as part of the pilot that consists mainly of private registered landlords and 'orphaned' buildings.

4.35 We are currently in discussion with the Scottish Government cladding and remediation team to establish a working partnership and access to government funding that supports the review and appraisal of our stock profile.

4.36 Notwithstanding, we have commenced and commissioned a review of fire risk appraisals to 4 x multi storey blocks that were clad pre-stock transfer.

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4.37 **It should be noted that none of our multi storey blocks have Grenfell Style cladding**. We will continue to liaise with the Scottish Govt in relation to the actions required to comply with the guidance issued and update the Board with the detailed action plan when this has been agreed.

Fire Safety England Regulations 2022

4.38 The Fire Safety (England) Regulations 2022 introduce new duties under the Fire Safety Order for building owners or managers (responsible persons) in England only and do not currently apply in Scotland.

4.39 These regulations made it a requirement in law for responsible persons of high-rise blocks of flats to provide information to Fire and Rescue Services to assist them to plan and, if needed, in providing an effective operational response.

4.40 Also, the regulations require responsible persons in multi-occupied residential buildings which are high-rise buildings, as well as those above 11 metres in height, to provide additional safety measures such as, providing residents with fire safety instructions and information on the importance of fire doors.

4.41 The Environmental Teams (NETS) currently undertake many of the inspections and checks in our Fire Precautions Logbook at our Multi Storey Flats, which have been implemented by the updated Regulations in England. This is a best practice approach in Scotland that includes housekeeping checks, fire doors in common areas, checks of dry risers, sprinkler systems in bin rooms and emergency lighting systems etc.

5. Customer Engagement

5.1 Although the annual review of our FPMF has not required customer engagement, it has a very clear focus on customer engagement.

5.2 The Fire Safety Team works with our housing and care colleagues to conduct PCRAs for customers who are particularly vulnerable to fire, due to physical, cognitive, mental impairments, substance misuse issues or the condition in which they are maintaining their home. At the time of the visit, an assessment of the property and the customer's needs is carried out to determine suitable fire prevention control measures.

5.3 Customer Information Leaflets (My Safety) are also distributed to customers by our Housing Officers and made available online providing safety information in relation to fire and how customers can arrange a home fire safety visit.

5.4 Our FRA programme is communicated and discussed with Directors and Senior Management across all subsidiaries on a regular basis at our Fire Working Group and Executive Fire Liaison Meeting.

6. Environmental and sustainability implications

6.1 The environmental impact of a house fire and building fires presents a negative outcome to the environmental commitment in our efforts to reduce our carbon footprint and promote sustainability.

6.2 The immediate short-term effects of house fires and building fires are the obvious risk and displacement to customers, release of toxic gas, smoke and other by products that contaminate the local environment, which can also impact air quality because of the release greenhouse gases like carbon monoxide and carbon dioxide.

6.3 Negative consequences of a building fire on the environment can also endanger the health and well-being of our customers' their neighbours and our communities.

6.4 Targeting PCRAs for vulnerable customers and ensuring our fire safety arrangements remain effective in the implementation and review of a robust fire risk assessment programme, shall contribute to our overall commitment to positively impact our environmental and sustainability responsibilities.

7. Digital transformation alignment

7.1 In support of our Digital Transformation, we have developed a Fire Risk Assessment Dashboard with our colleagues in Asset Intelligence.

7.2 The Power BI Dashboard interfaces with our PIMSS Asset Management System to provide real time data on the current progress and status of our Fire Risk Assessment Programme, Accidental Dwelling Fires, Person-Centred Risk Assessments and Fire Investigation Notes.

7.3 Access to Power BI Dashboard and PIMSS is shared with Duty Holders and Relevant Persons for access, visibility and updating progress.

7.4 Virtual drop-in sessions were held by the Group Fire Safety Manager via MS Teams throughout the year to assist Duty Holders with their fire risk assessment, person-centred risk assessment, fire investigation and operation assurance visit actions.

8. Financial and value for money implications

8.1 The implementation and completion of PCRAs and FRA programme has significantly increased the number of fire safety repairs since it commenced.

8.2 In driving a positive fire safety culture, which impacts the number of ADFs in our homes and workplace, there are significant cost savings associated with the cost of fires, which are not immediately visible.

8.3 The reduction in ADFs for the second consecutive year demonstrates a positive commitment and investment on our part to reduce the costs associated with house fires and the subsequent impact that this can have on customers and their neighbouring tenants / properties.

9. Legal, regulatory and charitable implications

9.1 The approach to fire risk assessment in a legal context is one of a statutory nature for relevant premises and best practice for non-relevant premises.

9.2 The Fire Safety Scotland Act 2005 and Fire Safety Scotland Regulations 2006 place legal obligations on Duty holders' to conduct Fire Risk Assessments in Relevant Premises (Non Domestic Premises).

9.3 Relevant Premises are those premises that are covered by fire safety legislation and enforced under current legislation by Scottish Fire and Rescue. Premises such as HMOs, Care Premises, Offices, Workshops and Depots are legally required to have a current fire risk assessment in place.

9.4 Multi Storey Flats (Practical Fire Safety Guide for Existing High Rise Domestic Premise) and Living Well Premises (Practical Fire Safety Guide for Specialised Housing) are recognised as a domestic premises and the recommendation to conduct fire risk assessments is one of best practice and not a legal requirement.

9.5 The current changes in Fire Safety Legislation have been introduced to recognise and implement the recommendations from the Grenfell Phase 01 Inquiry. These regulations and statutory obligations do not currently apply in Scotland due to differences in legislation and best practice that are currently in place.

9.6 There is currently a review of the Scottish Government's Technical Advice Note and English Fire Legislation being undertaken by Group Health and Safety and Compliance, Repairs, Investment and Compliance and the Group Director for Repairs and Assets to evaluate their impact for implementation.

10. Risk Appetite and assessment

10.1 This report most closely aligns with our ambition to develop peaceful and connected communities. Within this, our risk appetite for legal/regulatory compliance is minimal and we have a commitment to ensuring the best fire safety precautions throughout our homes.

10.2 The Fire Scotland Act 2005 and Fire Safety Scotland Regulations 2006, allows for a route of enforcement action and prosecution in the event of deviation from statutory requirements and specifically for Relevant Premises (Non-Domestic) therefore, strong regulatory compliance in this area must be maintained.

11. Equalities implications

11.1 Our FPMF does not require an equality impact assessment however, equalities have been considered within its development and operation. For example, as outlined in the Framework particular attention is given to identify and support customers who are more vulnerable to fire, for example due to age, a disability or a physical, cognitive, or mental condition. We apply a person-centred approach meaning that as well as an assessment of the property, we also assess our customer's needs during fire safety visits to determine suitable fire prevention control measures.

11.2 We also work closely with our care colleagues who provide support for those in specialist accommodation or through our Living well sites for older customers, to ensure we have an effective programme of FRAs for these properties.

11.3 Our FPMF is available on request at no extra cost translated or in large print, in Braille, on tape on in another non-written format.

12. Key issues and conclusions

12.1 The Fire Safety Team have exceeded their target for PCRAs between April 2022 – March 2023. This resulted in 532 PCRAs being completed across Wheatley Homes Glasgow that is an increase on the previous year of approximately 30%.

12.2 The impact of PCRAs on accidental dwelling fires has for the second consecutive year seen a reduction in the number of accidental dwelling fires experienced in customers' homes and in particular, for Wheatley Homes Glasgow, has resulted in a further reduction of ADFs by 8% between Apr 2022 and March 2023.

12.3 Fire risk assessments in both our relevant and non-relevant premises in accordance with Scottish Government guidelines and best practice maintains our position of strong legal compliance for fire safety.

12.4 It is evident that our approach to customer safety in our Fire Prevention and Mitigation Framework is having a positive impact on accidental dwelling fires and by the completion of PCRA and FRAs in our customers' homes and premises, there continues to be a strong fire safety arrangements and performance across our Group.

12.5 The Group Fire Safety and Compliance Team will continue to monitor any new legislative changes and best practice guidance and provide advice on changes required to ensure we maintain in our sector leading position.

13. Recommendations

13.1 The Board is asked to:

1) Note the contents of this report and the progress with our Fire Prevention and Mitigation Framework and receive a future update on compliance with the Scottish Govt Technical Advice (Dec 2022 v02); and
2) Note the revised Group FPMF (2023) at Appendix 1.

LIST OF APPENCIES:
Appendix 1: [redacted] Available here

Report

To:	**Wheatley Homes Glasgow Board**
By:	**Anthony Allison, Group Director of Governance and Business Solutions**
Approved by:	**Steven Henderson, Group Chief Executive**
Subject:	**Governance update**
Date of Meeting:	**19 May 2023**

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1.   Purpose

1.1   This report provides an update to the Board, seeking approval as applicable, on the following governance-related matters:

- Tenant Board Member Pathway Programme;
- Disposals and acquisition policy; and
- Our membership of Scotcash and its governance arrangements.

2.   Authorising and strategic context

2.1   Under our Terms of Reference, the Board are responsible for overseeing our succession planning arrangements. This includes ensuring that we have arrangements to allow us to plan for the future recruitment of Board members, particularly those who are tenants.

3.   Background

3.1   Following approval of the criteria/core requirements for the Board member pathway programme and process at our last meeting, this report provides an update on progress with the agreed next steps.

3.2   At our meeting on 12 August 2022, the Board approved our disposals and acquisitions policy (based on the agreed Group policy framework). The policy confers a requirement to report to the Board annually all disposals and acquisitions undertaken in the prior 12 months. This allows the Board to understand the scale of activity being undertaken under delegated authority and provides a mechanism for the Board to understand if there is an unexpectedly high level of activity in any given year.

4.   Discussion

Tenant Board Member Pathway Programme

4.1   At our previous meeting the Board was updated on progress with our tenant board member pathway programme, developed to ensure a sustainable pipeline of future Board members who are tenants. Following initial engagement with our Customer Voices, we received 17 notes of interest.

4.2   As per the agreed next steps, we asked those who had expressed a desire to join the programme to submit a formal Expression of Interest. We received 9 formal Expressions of Interest which were then considered by the current and future Chair ("the Panel"). Prospective candidates were invited to meet with the Panel to discuss their Expression of Interest and the programme more widely, and to be interviewed using a set questions designed to explore their suitability and potential relative to the agreed criteria/core requirements.

4.3   The interviews took place in early May and following this we have identified four individuals who we have invited to join the pathway programme. They will join the pathway with immediate effect and our immediate focus will be working with the individual to quickly put in place a bespoke support programme.

4.4   The support programme is focused on helping each individual build the types of skills and experience which would allow them to become a Board member in the future. As part of this all members of the programme will come to a Board meeting over the course of the next 12 months as an observer. This will allow them to understand how an effective Board operates, how the meetings are conducted and the types of questions and issues the Board focuses on.

Disposals and acquisitions update

4.5   Our individual Disposals and Acquisitions Policy is drawn from our Group-wide disposals and acquisitions policy, approved by Group Board in June 2022. Under the policy:

- A disposal includes any scenario in which we grant or transfer an interest in land or property such that it is may no longer available for us to use either temporarily or permanently;

- An acquisition includes development sites or turnkey developments as part of our new build strategy or one-off or ad-hoc purchase of residential property; and

- Our disposal and acquisition approval limits are: (*up to £120k or over £120k with Board approval or delegation*).

4.6   To ensure the Board retain oversight of our disposal and acquisition activity, the policy included a requirement to provide an annual update to the Board. The disposals and acquisitions register for Wheatley Homes Glasgow from 01 April 2022 – to date attached at Appendix 1. During the period, we have recorded 22 disposals and 5 acquisitions.

4.7   10 disposals were Notifiable Events to the Scottish Housing Regulator as these were '*Disposals by way of lease of residential property to an RSL, group subsidiary or any other body for Market or Mid Market Rent (MMR) or other non-social housing purposes.*' MMR leases to Lowther Homes was our largest type of disposal throughout the year. The sales relate to our wider disposals strategy for our stock at the wingets, which was previously agreed by the Board. In addition, we completed the transfer of nine properties back to Glasgow City Council following a Board approval in November 2021. Title to these properties had erroneously been included with the stock transfer of c.81,000 units in 2003.

4.8   There are no identified issues of non-compliance with the policy to report to the Board. As part of our annual review across Group, we identified some areas where it was considered appropriate to update the Group framework and a track changed copy of is attached at Appendix 2. Following agreement from our Board, approval will be sought from the Group Board.

Scotcash

4.9   Scotcash was launched in 2006 with start-up funding provided by Wheatley Homes Glasgow (then GHA) and Glasgow City Council as founding members. Its aim was to broaden financial inclusion for those who experience difficulties in accessing mainstream financial services.

4.10   In delivering its core objectives around the provision of affordable and accessible financial products to its customers, Scotcash has been reliant on accessing grants and subsidies. There have been challenges in developing the size and scale of the business in order for it to reach a position where it can sustain itself financially. This is a key challenge facing similar businesses in the UK. Over the last five years the availability of grant funding and subsidies has decreased and the organisation has been loss making.

4.11   The most recent business plan showed a need to grow the loan book from just above 2,000 loans up to over 6,000 loans in order to move into a surplus position and achieve a sustainable financial position. Loan volumes have varied in recent years peaking at around 4,500, a level which was supported by a significant grant funded marketing campaign. Following the completion of the campaign, loan volumes have reduced to the previous level of just over 2,000.

4.12   Following an unsuccessful bid for funding to the Robertson Trust and recent turnover in staffing, management have undertaken a strategic review of the operations of Scotcash and as part of this have also taken advice from Burness on regulatory considerations.

4.13   The outcome of the review has been a recommendation to the Board of Scotcash for an orderly wind down of the business given the challenges in the sector and the ability to achieve the growth required to break even. It is expected that a wind down would take up to six months to conclude. At this point a special resolution will be presented to the Board of Scotcash for the winding up of the company for approval. Thereafter a General Meeting of the members would be required to approve a resolution to wind up the company.

4.14   A delegation of authority is sought for the Group Director of Finance who is an appointed director representing Wheatley Homes Glasgow on the Scotcash Board to approve the resolution in due course on our behalf as a member of the Company.

4.15   Any remaining cash balance that remains after the settling of all liabilities and the collection or write off of loan balances will be distributed to a charitable body or bodies operating in the City of Glasgow with similar financial inclusion objectives as set out in the Scotcash articles of association.

5. Customer engagement

5.1 We want tenants to be shaping and influencing decision making at all levels including the Board. Our Customer Voices has provided us with an excellent pool to target to develop a sustainable pipeline of future Board members.

6. Environmental and sustainability implications

6.1 There are no environmental or sustainability implications arising from this report.

7. Digital transformation alignment

7.1 There are no digital transformation implications associated with this report.

8. Financial and value for money implications

8.1 There are no financial implications arising from the recommendations contained within this report.

9. Legal, regulatory and charitable implications

9.1 Standard 6 of the SHR Standards of Governance and Financial Management requires the governing body of all RSLs to 'have the skills and knowledge they need to be effective'.

9.2 Within Standard 7 of the SHR Regulatory Framework, it is required that '*The governing body ensures that disposals, acquisitions and investments fit with the RSL's objectives and business plan, and that its strategy is sustainable. It considers these taking account of appropriate professional advice and a consideration of value for money - whether as part of a broader strategy or on a case by case basis.*'

10. Risk appetite and assessment

10.1 Our agreed risk appetite for governance is "cautious". This level of risk tolerance is defined as a "preference for safe delivery options that have a low degree of inherent risk and have only limited potential for reward". This reflects our risk appetite in relation to laws and regulation, which is "averse", with the avoidance of risk and uncertainty being a key organisational objective and a priority for tight management controls and oversight.

10.2 Our strategic risk register contains the risk that, "*The governance structure is not clearly defined, is overly complex and lacks appropriate skills at Board and Committee levels to govern the Group effectively. Failure of corporate governance arrangements could lead to serious service and financial failures.*"

10.3 We mitigate this risk by having clearly defined roles and responsibilities across our governance framework. Our defined policy for acquisitions and disposals, including the requirement to report annually to the Board, provides us with a clearly defined approach in this area.

11. Equalities implications

11.1 We have a strong commitment to equality, diversity and inclusion and recognise the benefit of having people with different experiences on our Board. Our commitment is emphasised through our tenant board member pathway programme. This includes our commitment to making reasonable adjustments to support candidates who may have additional requirements.

12. Key issues and conclusions

12.1 The pathway programme will play an important role in supporting our succession planning for Board members who are tenants. The approach also allows future members to have undertaken relevant development prior to joining the Board and accelerate their contribution.

13. Recommendations

13.1 The Board is asked to note this report and:
   1) Note the outcome of the tenant Board member pathway programme interviews;
   2) recommend the changes to the disposal and acquisitions policy framework and agree that these be reflected in our own policy (subject to Group Board approval);and
   3) delegate authority to the Group Director of Finance to approve a special resolution and any other actions required on our behalf as a member of the company to wind up Scotcash C.I.C.

LIST OF APPENDICES

Appendix 1: Wheatley Homes Glasgow annual disposal and acquisition update
Appendix 2: [redacted] can be found here

Appendix 1: Annual disposal and acquisition update May 2023

	Land/property	Nature of disposal	Value (£p/a)	Date of disposal
1	10 units: 55 – 69 (inclusive, odd numbers) Carlibar Avenue and 60 and 62 Dunwan Avenue (Hurlford)	MMR Lease to Lowther Homes	£72,840	14 April 2022
2	4 units: 1 and 3 Carlibar Avenue and 71 and 73 Hurlford Avenue (Hurlford)	MMR Lease to Lowther Homes	£28,920	26 April 2022
3	4 units: 17 and 19 Garscadden Green and 64, 66 Dunwan Avenue (Hurlford)	MMR Lease to Lowther Homes	£28,920	28 April 2022
4	9 units: 2nd floor, 12 Ellangowan St, 3/1 11 Meadowpark St, 3 flats at 23 Oakfield Av, 0/1 46 Melville St, 0/2 29 Park Road, 4/2 64 Woodlands Rd, 4/2 Baliol St	Conveyance to GCC (Board report November 2021)		8 April 2022
5	9 units: 5 and 7 Hurlford Avenue and 1,3,5,7,9,11,15 Garscadden Green, Hurlford	MMR Lease to Lowther Homes	£66,600	12 May 2022
6	1 unit: 9 Crombie Gardens, Baillieston	Corrective Conveyancing of garden ground		8 July 2022
7	1 unit: 52 Lyoncross Road, Glasgow	Commercial Lease to Lowther Homes		25 July 2022
8	15 Units: 8A and 8B Watson Street, 13 units at 10 Watson Street, Glasgow	MMR lease to Lowther Homes	£118,229.40	13 Sept 2022
9	31 units: at 6 Watson Street, Glasgow	MMR lease to Lowther Homes	£99,100.80	29 Sept 2022
10	Damshot Road, Glasgow	Servitudes		1 Aug 2022
11	3 units: at 8, 9 and 10 Cuddies Walk, Glasgow - Sighthill	MMR lease to Lowther Homes	£15,450	8 Dec 2022
12	1 unit: 7 Cuddies Walk, Glasgow - Sighthill	MMR lease to Lowther Homes	£7,440	14 Dec 2022
13	1 unit: 43 Haymarket Street, Glasgow	Sale	£60,500	16 Dec 2022
14	1 unit: 21 Dalmahoy Street, Glasgow	Sale	£51,125	16 Dec 2022
15	1 unit: 45 Glencorse Street, Glasgow	Sale	£44,500	16 Dec 2022
16	1 unit: 185 Abbeyhill Street	Sale	£35,000	16 Dec 2022
17	1 unit: 45 Haymarket Street, Glasgow	Sale	£60,500	19 Dec 2022
18	1 unit: 36/65 Liddlesdale Sq, Glasgow	Commercial Lease to Lowther		24 Jan 2023
19	1 unit: 428 Carntynehall Road, Glasgow	Commercial Lease to Lowther		3 Feb 2023

20	8 units at 11 Cuddies Walk, Glasgow – Sighthill	MMR Lease to Lowther Homes	£40,800	21 Mar 2023
21	8 units at 6 Cuddies Walk, Glasgow - Sighthill	MMR Lease to Lowther Homes	£40,800	28 Mar 2023
22	Tontine Lane	Deed of Servitudes and Real Burdens between WHG and Lowther		4 April 2023

	Land/property	Nature of acquisition	Value	Date of acquisition
1	19 Greenrig Street, Glasgow	Mortgage to Rent	£72,000	25 May 2022
2	Unit 4, Southpoint, Dixon Blazes IE	Lease		5 Sept 2022
3	14 Causewayside, Glasgow	Lease		9 Dec 2022
4	Site at Westerhouse Road/Shandwick St, Glasgow	Purchase from Glasgow City Council.	£22,000 for main site and NIL for retained areas	31 Mar 2023
5	Shawbridge Arcade, Glasgow	Purchase from Glasgow City Council.	£210,000	3 Apr 2023

Report

To:	**Wheatley Homes Glasgow Board**
By:	**Pauline Turnock, Group Director of Finance**
Approved by:	**Steven Henderson, Group Chief Executive**
Subject:	**Financial performance to 31 March 2023**
Date of Meeting:	**19 May 2023**

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1. Purpose

1.1 The purpose of this paper is:

- to provide the Board with an overview of the financial results for the year to 31 March 2023; and
- to seek the Board's approval to submit the Five Year Financial Projection and Loan Portfolio returns to the Scottish Housing Regulator.

2. Authorising and strategic context

2.1 Under the terms of the Intra-Group Agreement between Wheatley Homes Glasgow and the Wheatley Group and this Board's Terms of Reference, the WH Glasgow Board is responsible for the on-going monitoring of performance against agreed targets. This includes the on-going performance of its finances.

3. Background

3.1 **Financial performance**

The results for the year to 31 March are summarised below.

£000	Year to Date (Period 12)		
	Actual	**Budget**	**Variance**
Turnover	227,197	218,279	8,917
Operating expenditure	207,005	199,999	(7,007)
Operating surplus	**20,191**	**18,281**	**1,911**
Operating margin	*8.9%*	*8.4%*	*0.5%*
Net interest payable	(45,411)	(46,446)	1,035
Deficit	**(25,220)**	**(28,165)**	**2,944**
Net Capital Expenditure	**66,360**	**69,417**	**3,056**

4. Discussion

4.1 _Year to 31 March 2023_

A statutory deficit of £25,220k has been reported for the year to 31 March 2023, which is £2,944k favourable to budget. Higher grant income recognised from delayed new build completions, additional Scottish Housing Net Zero ("SHNZ") and adaptations grant funding is offset by costs in delivering the increasing demand for repairs and maintenance as we addressed the post-Covid backlog.

Key points to note:

- Net rental income of £201,165k is £807k higher than budget at 31 March 2023, due to better than budget void performance with a year to date void rate of 1.02% compared to the budgeted rate of 1.5%.

- Grant income of £11,499k mainly relates to grant recognised on completion of 119 new build units at Damshot, Hurlford, Sighthill and Watson, noting that Damshot and Hurlford were both delayed from last year.

- Other income includes Scottish Housing Net Zero Heat funding for energy efficiency projects of £1.9m and £1.6m for medical adaptations, the costs of which are reported within the investment programme.

- In operating expenditure, total costs are £7,007k unfavourable to budget driven by higher spend in revenue repairs and maintenance.

  - Total staff costs are £1,203k higher than budget as result of the cost of living payment processed in March to all staff and additional public holiday pay to cover the Queen's funeral. Lower ERVR spend has provided financial capacity for the one off payment to staff.
  - Revenue repairs and maintenance spend is £5,002k higher than budget. The variance primarily relates to a higher than budgeted spend across responsive repairs. There is a higher demand for repairs with increasing number of new jobs coming through the Customer First Centre Higher with a 28% increase in job numbers compared to the same period in 2019/20.

- Interest payable of £45,411k is £1,035k favourable to budget driven by lower loan balances drawn than assumed in the budget.

- Net capital expenditure is £3,056k lower than budget. Net investment in our existing homes after taking account of fully funded SHNZ, energy efficiency and adaptations work was £48,413k which was £4,126k higher than budget. The variance mainly relates to higher demand for adaptations and capitalised voids and repairs, which are customer led. Higher spend in the WH Glasgow core programme is managed within the parameters of the overall Group investment budgets with total investment in existing properties remaining broadly within the Group capital budget allocation for the financial year.

- New build spend is lower than budget by £6.1m and is mainly linked to the timing of works at Calton Village Phase A and Shawbridge Arcade.

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4.2 An underlying deficit of £8,737k is reported for the year after adjusting for accounting adjustments for grant recognised on new build developments, depreciation, one off payments not related to underlying operations but including our capital investment spend. This is £4,590k adverse to budget. This position is in line with the updated financial forecasts prepared during the year and reflected in the updated financial projections presented in August 2022 and action taken to reflect in the revised 2023/24 financial projections approved in February 2023 which included additional provision being made for future repairs costs.

4.3 *Repairs costs for 2023/24*

On repairs costs for 2023/24, we have now agreed a 7.5% increase in repairs schedules of rates with Glasgow City Council and City Building (Glasgow), which provides strong value for money in the context of the current economic and inflationary climate. Total repairs spend in 2022/23 was £45.3m and included a number of non-recurring items shown in more detail in the table below. After allowing for these items the table below shows that the 2023/24 repairs budget of £45.4m includes adequate provision for the agreed increase on the CBG schedule of rates and the updated allocation of overheads to members.

	£m
2022/23 Total Repairs	**45.3**
Non recurring items:	
Electrical installation testing	(0.3)
Damp & Mould	(1.1)
Q1 catch up repairs	(1.8)
2022/23 Core Repairs	**42.1**
2023/24 uplift/ addn overhead	3.1
2023/24 Repairs	**45.2**
2023/24 Repairs Budget allocation	**45.4**

4.4 *Five Year Financial Projections*

The Five Year Financial Projections is a web based return designed by the Scottish Housing Regulator to collect the financial projections and related information of all RSLs in Scotland in a standard format. The information provided is used to calculate several of financial ratios and is used by the SHR as part of its annual review of the financial viability of RSLs and in making decisions on the level of engagement. It is also used to allow developing trends, patterns, and emerging issues to be identified and considered across the sector.

The return incorporates the draft results for 2022/23 and the financial projections for the next five years. At other points in the year we submit our long term financial projections i.e. our 30 year business plan which was presented to the February Board and the annual accounts which will be presented to the August Board meeting.

The return includes outturn and forecast Statements of Comprehensive Income, Financial Position and Cashflow together with other key assumptions such as movements in stock numbers and pension costs.

The five year forward financial projections reported within the return are based on the 2023/24 Financial Projections previously approved by the WH Glasgow Board in February. The 2022/23 figures in the projections have been updated to reflect the 2022/23 year end management accounts.

The five year forward projections also include estimates for non-cash year-end accounting adjustments not included in the management accounts. The reconciling items between the management accounts in appendix 1 and the SHR return are shown below.

	£000	Note
WH Glasgow P12 Draft Statutory Deficit	**(25,220)**	
Investment property valuation movement	35,184	Business plan estimated pending final JLL valuations
Social housing property valuation movement	71,298	
Gain on business combination (Camphill)	441	Transfer of assets and liabilities from Camphill on 16th Jan 2022
Surplus before tax per SHR return	**81,703**	

The summary sheet and accompanying financial data and 5 year projections to be submitted to the regulator are attached at Appendix 2. The Board are requested to consider and approve these financial projections. Once approved, these will be submitted to the Scottish Housing Regulator.

4.5 *Scottish Housing Regulator ("SHR") Loan Portfolio Submission*

We are required to submit its loan facilities and borrowing position, as at 31 March 2023, to the Scottish Housing Regulator via the regulators' online portal. The submission report appended contains the details which will be transferred to the portal, showing both the information and the layout.

The submission report contains the information relating to the intragroup funding from Wheatley Funding No. 1 Limited and intragroup lending to Lowther Homes Limited, on the debt position of the RSL as at the financial year end.

The key information contained within the report is that, as at 31 March 2023:

- WH Glasgow had total borrowings of £985m.

- The loan was on a fixed rate, with an average rate for the year of 4.15%.

- The value of the 41,370 units secured against the loan is £1,559m (31 March 2022 valuation).

- 2,228 units remain unencumbered and available to support further debt

- WH Glasgow had total intragroup lending of £45m, with £30m drawn and £15m available to be drawn to a non-RSL group company, Lowther Homes Limited.

As part of the submission to the Scottish Housing Regulator, the Chair of the Board and Director/Chief Executive are required to confirm the following:

"I hereby certify for and on behalf of the RSL that the information provided in this return is, to the best of my knowledge and belief, an accurate and fair representation of the affairs of the RSL."

5. Customer Engagement

5.1 This report relates to our financial reporting and therefore there are no direct customer implications arising from this report.

6. Environmental and sustainability implications

6.1 There are no environmental and sustainability implications arising from this report.

7. Digital transformation alignment

7.1 There are no digital transformation alignment implications arising from this report.

8. Financial and value for money implications

8.1 The statutory deficit for the year to 31 March 2023 is £2,944k favourable to budget. Our cost efficiency targets are built into the budget and delivery of these is a key element of continuing to demonstrate value for money. After adjusting the net operating surplus for new build grant income, depreciation, one off payments not related to underlying surplus and including capital expenditure in our properties, an underlying deficit of £8,737k is reported which is £4,590k unfavourable to budget.

8.2 While an underlying deficit is reported for WH Glasgow, within the context of the RSL Borrower Group, an overall underlying surplus is reported for the financial year with financial performance managed within the overall budget parameters and covenants for the RSL Borrowers.

9. Legal, regulatory and charitable implications

9.1 There are no direct legal, regulatory and charitable implications arising from the management accounts.

10. Risk Appetite and assessment

10.1 The Board's agreed risk appetite for business planning and budgeting assumptions is "open". This level of risk tolerance is defined as "prepared to invest for reward and minimise the possibility of financial loss by managing the risks to a tolerable level". Delivery of financial results within approved budgetary limits is a key element in delivering our strategy and maintaining the confidence of investors.

11.   Equalities implications

11.1   There are no equalities implications arising from this report.

12.   Key issues and conclusions

12.1   This paper presents the financial performance position for the year to 31 March 2023.

13.   Recommendations

13.1   The Board is requested to:

1) Note the management accounts for the year ended 31 March 2023 at Appendix 1.

2) Approve the summary sheet and accompanying financial data and projections at Appendix 2 and authorise these to be submitted to the Scottish Housing Regulator and delegate authority to the Group Director of Finance to undertake any factual data updates required to the data in advance of the submission.

3) Approve the loan portfolio submission in Appendix 3 and authorise this to be submitted to the Scottish Housing Regulator and delegate to the Group Director of Finance authority to approve any factual data updates required to the data in advance of the submission.

LIST OF APPENDICES:

Appendix 1: Period 12 – 31 March 2023 Finance Report
Appendix 2: Five Year Financial Projections Submission
Appendix 3: [redacted]

Year to 31 March 2023
Finance Report

Better homes, better lives

1. Operating statement (1) – Year to 31 March 2023

	Year To March 2023		
	Actual £ks	Budget £ks	Variance £ks
INCOME			
Rental Income	203,240	203,455	(215)
Void Losses	(2,075)	(3,097)	1,022
Net Rental Income	201,165	200,358	807
Grant Income	11,499	7,269	4,231
Other Income	14,533	10,653	3,880
Total Income	227,197	218,279	8,917
EXPENDITURE			
Employee Costs - Direct	36,183	35,196	(987)
Employee Costs - Group Services	15,612	15,397	(216)
ER / VR	2,892	4,408	1,517
Direct Running Costs	18,593	13,994	(4,599)
Running Costs - Group Services	9,387	9,745	358
Revenue Repairs and Maintenance	45,296	40,294	(5,002)
Bad debts	2,599	4,114	1,515
Depreciation	75,334	75,334	0
Demolition	1,109	1,517	408
TOTAL EXPENDITURE	207,005	199,999	(7,007)
NET OPERATING SURPLUS / (DEFICIT)	20,191	18,281	1,911
Net operating margin	*8.9%*	*8.4%*	*0.5%*
Interest payable & similar charges	(45,411)	(46,446)	1,035
STATUTORY SURPLUS / (DEFICIT)	(25,220)	(28,165)	2,944

Key highlights year to date:

Net operating surplus of £20,191k is £1,911k favourable to budget. Statutory deficit for the period to 31 March is £25,220k, which is £2,944k favourable to budget. The main drivers of the variance are the favourable position on void rent losses, higher grant income from new build completions, higher other income linked to SHNZ and adaptations and lower interest payable.

- Net rental income is £807k favourable to budget. Gross rental income is £215k unfavourable to budget linked to the timing of the clearance of the Wyndford blocks, a reduction in income relating to the clearance and change of tenure for several Livingwell sites and fewer acquisitions. Void losses are £1,022k lower than budget and represent a 1.02% void loss rate compared to the budgeted rate of 1.5%.

- Grant income recognised relates to 119 units completed by March: 26 SR units at Damshot, 27 MMR units at Hurlford (both delayed from last year), 46 MMR units at Watson and 20 MMR units at Sighthill (56 units budgeted). The unfavourable variance linked to Sighthill is offset by the grant released for Damshot and Hurlford.

- Other income is £3,880k favourable to budget due Social Housing Net Zero (SHNZ) grant of £1,885k, Adaptation grant of £1,628k and higher miscellaneous income including L&A damages relating to Sighthill.

- Total employee costs (direct and group services) are £1,203k unfavourable to budget. The overspend to budget in relates to the decision to provide a cost of living payment to all staff and in direct staff costs additional public holiday pay. ERVR spend has been lower which has provided financial capacity for the one off payment to staff.

- Total running costs (direct and group services) are £4,241k unfavourable to budget. The higher spend in direct running costs is linked to an additional donations to the Foundation to provide support for our tenants through this financially challenging period. Group recharges are £358k favourable to budget due to several departments reporting lower costs across Wheatley Solutions, leading to the underspend against budget.

- Revenue repairs and maintenance spend is £5,002k unfavourable to budget with higher than budgeted spend across responsive repairs which is £8,431k higher than budget, with cyclical and compliance spend £3,429k lower than budget. The overspend on reactive repairs is linked to the clearance of the repairs backlog and higher demand for repairs (28% ytd increase in job numbers vs ytd 2021/22) with increasing number of new jobs coming through the Customer First Centre.

Gross interest payable of £45,411k represents interest due on the loans due to Wheatley Funding No.1 Ltd. Costs are £1,035k lower than budget linked to a lower loan balance than the budget assumed.

1. Operating statement (2) – Year to 31 March 2023

CAPITAL INVESTMENT	Year To March 2023		
	Actual £ks	Budget £ks	Variance £ks
CORE PROGRAMME			
Grant Income	3,514	0	3,514
Core Investment Programme - grant funded	1,885	0	1,885
Adpatations - grant funded	1,629	0	1,629
Total Grant Funded Core Investment	**3,514**	**0**	**3,514**
Core Investment Programme	30,586	30,643	57
Adaptations	1,079	1,537	458
Voids	10,026	8,243	(1,783)
Capitalised Repairs	6,722	3,864	(2,858)
Total Core Investment	**48,413**	**44,287**	**(4,126)**
NET INVESTMENT SPEND	**48,413**	**44,287**	**(4,126)**
NEW BUILD			
New Build Grant Income Received	10,081	10,711	(630)
New Build Investment	19,681	25,748	6,067
NET NEW BUILD INVESTMENT SPEND	**9,600**	**15,037**	**5,437**
OTHER FIXED ASSET INVESTMENT SPEND	**8,348**	**10,093**	**1,745**
TOTAL NET CAPITAL INVESTMENT SPEND	**66,360**	**69,417**	**3,056**

Key highlights year to date:

Net capital expenditure of £66,360k is £3,056k lower than budget.

- Net investment programme spend after taking account of grant funding for adaptation and Scottish Housing Net Zero ("SHNZ") works is £4,126k unfavourable to budget, linked to higher capitalised voids and repairs. A total of £3,514k of core investment spend on SHNZ projects and adaptations was offset by receipt of unbudgeted grant income from Scottish Government and GCC.

- Net new build spend is £5,437k lower than budget following delays on the Calton Village and Shawbridge Arcade sites.

- Other capital expenditure of £8,348k is £1,745k lower than budget and includes work on local touchdown hubs and IT capital.

1b. Underlying surplus – P12 March 2023

- The Operating Statement (Income and Expenditure Account) on page 3 is prepared in accordance with the requirements of accounting standards (Financial Reporting Standard 102 and the social housing Statement of Recommended Practice 2014).

- However, the inclusion of grant income on new build developments creates volatility in the results and does not reflect the underlying cash surplus/deficit on our letting activity.

- The chart below therefore shows a measure of underlying surplus which adjusts our net operating surplus by excluding the accounting adjustments for the recognition of grant income, depreciation and one off payments not associated with underlying surplus but including capital expenditure on our existing properties.

- At March, an underlying deficit of £8,737k has been generated using this measure which is £4,590k unfavourable to budget. The variance is driven by higher customer demand for adaptations, capitalised repairs and voids, in the investment programme, partially offset by lower levels of interest payable.

- Across the RSL Borrower Group, the higher core investment spend has been managed within the overall budget for capital investment in existing homes with an overall underlying surplus position reported. This year end position was anticipated and reflected in the financial projections updates discussed in August 2022 and the approved 2023/24 financial projections approved in February 2023.

Underlying Surplus - YTD 2023			
	YTD Actual £ks	YTD Budget £ks	YTD Variance £ks
Net operating surplus	20,191	18,281	1,910
add back:			
Depreciation	75,334	75,334	0
One off items not related to underlying surplus*	4,575	0	4,575
less:			
Grant income	(11,499)	(7,029)	(4,470)
Net interest payable	(45,411)	(46,446)	1,035
Total expenditure on Core Programme	(51,927)	(44,287)	(7,640)
Underlying surplus	(8,737)	(4,147)	(4,590)

* Foundation endowment and staff cost of living payments

2a. Repairs & Investment Programme

Repairs & maintenance:

Repairs	YTD P12		
	Actual £ks	Budget £ks	Variance £ks
Responsive Repairs	22,479	14,048	(8,431)
Cyclical (local)	348	1,850	1,502
JV Share of profits	(3,265)	(3,265)	0
Compliance/Overhead	25,734	27,661	1,927
Total Repairs	**45,296**	**40,294**	**(5,002)**

- Repairs and maintenance costs are £5,002k higher than budget at the end of P12.

- Responsive repairs are £8,431k higher than budget, with this mainly relating to programmed repairs - linked to clearance of the post- Covid repairs backlog and an on-going increase in customer demand, with a 28% increase in completed jobs compared to 2019/20.

- Cyclical repairs is £1,502k favourable to budget at the end of March, mainly due to £1.4m of projects being deferred this year to manage the increase spend in responsive repairs.

- Overall compliance and overhead expenditure is £1,927k favourable to budget driven by lower communal utilities costs and the timing of the programme vs budget.

Investment programme:

Investment Programme Grant Income	YTD P12		
	Actual £ks	Budget £ks	Variance £ks
Medical adaptations	1,629	0	1,629
SHNZ	1,885	0	1,885
Total Income	**3,514**	**0**	**3,514**
Expenditure	£ks	£ks	£ks
Core programme (excl SHNZ)	20,227	20,491	263
SHNZ	1,885	0	(1,885)
Capitalised Voids	10,026	8,243	(1,782)
Adaptations	2,708	1,537	(1,171)
Capitalised staff	4,009	3,800	(208)
City Building ovh allocated	6,351	6,351	0
Capitalised Repairs	6,722	3,864	(2,858)
Total Expenditrue	**51,927**	**44,287**	**(7,640)**
Net Expenditure	**48,413**	**44,287**	**(4,126)**

- Net investment in our existing homes after taking account of fully funded SHNZ, energy efficiency and adaptations work was £48,413k which was £4,126k higher than budget. The variance mainly relates to higher demand for adaptations and capitalised voids and repairs, which are customer led.

- Core programme expenditure of £20,227k is £263k favourable to budget. Higher spend is reported on central heating and windows and doors projects due to an acceleration of replacements in both programmes. For central heating, this is linked to the timing of the servicing programme and breakdowns. This additional spend is offset by the deferral of an environmental project and lower KBR spend, following a standardisation of our approach across the Group to rewiring.

- Following a successful bid to the Scottish Government's SHNZ grant funding, spend of £1,885k on SHNZ projects is reported fully funded by grant income.

- Void costs, which include the cost of the Nets void squad, are capitalised in line with Group policy.

- The average spend per job increased by 17% for capitalised void and 20% for capitalised repairs in comparison to the same period last year. The number of void repairs has decreased slightly compared to the same period last year.

- Adaptations spend of £2,708k has been reported at the end of March, against a budget of £1,537k, with grant income of £1,629k received in 2022/23 from GCC.

2b. New Build Programme Spend

	*Status	Contractor	YTD P12 Actual	Budget	Variance
BELLROCK/CRANHILL	Complete	ENGIE	10	100	90
CARNWADRIC	Complete	CCG	65	59	(6)
DAMSHOT	Complete	CCG	133	70	(63)
KENNISHEADNB	Complete	ENGIE	3	95	92
SHANDWICK ST	Feasibility	CCG	343	0	(343)
Kelvin Wynd NB	TBC	TBC	454	500	46
Total Social rent			**1,008**	**824**	**(183)**
Development fund	-	-	0	450	450
Acquisitions	-	-	95	300	205
Capitalised Interest	-	-	546	546	0
Capitalised staff	-	-	3,136	3,187	51
Total New Build Investment			**19,681**	**25,748**	**6,067**
Grant Income			10,081	10,711	(630)
Net new Build cost			**9,600**	**15,037**	**5,436**
Grant Income completions (recognised in OPS)			11,499	7,029	4,470
Other Income – Sighthill reimbursement from Keepmoat			347	0	347

Net spend on new build properties of £9.6m has been incurred by end of March. This is £5.4m lower than budget.

Social Rent:
- Damshot (SR/26): The project completed on programme and budget in April 2022.
- Shandwick St (SR/47): Land acquisition from GCC completed 31 March 2023. Acquisition offer of grant received and £723k grant drawn down. Site start July/August, subject to Board and funding approval.
- Kelvin Wynd NB: Works are programmed to commence in early Summer 2023, with a two year duration. Survey work is ongoing.

- [redacted]

Better homes, better lives

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3. Balance Sheet

	31 March 2023 £ks	31 March 2022 £ks
Fixed Assets		
Social Housing Properties	1,513,232	1,517,418
Other tangible fixed assets	61,809	54,235
Investment properties	61,171	61,171
Investments - other	12,073	12,073
Fixed Assets	**1,648,285**	**1,644,897**
Debtors Due More Than One Year		
Inter Company Loan	18,163	18,163
Pension Asset	58,165	58,166
Current Assets		
Trade debtors	1,272	1,230
Rent & Service charge arrears	12,860	18,769
less: Provision for rent arrears	(7,796)	(6,771)
Prepayments and accrued income	1,820	2,328
Intercompany debtors	8,215	5,750
Other debtors	11,470	8,130
	27,842	29,436
Bank & Cash	3,359	0
Current Assets	**31,201**	**29,436**
Current Liabilities		
Bank overdraft	0	(2,286)
Trade liabilities	(3,546)	(1,589)
Accruals	(28,979)	(36,016)
Deferred income	(18,751)	(21,612)
Rents & service charges in advance	(11,120)	(10,591)
Intercompany creditors	(33,909)	(30,361)
Other creditors	(10,972)	(11,073)
	(107,277)	(113,528)
Net Current Assets	**(76,076)**	**(84,092)**
Long Term Liabilities		
Contingent efficiencies grant	(46,764)	(46,764)
Bank finance	(972,703)	(935,788)
Provisions	(1,858)	(2,149)
Deferred income	(7,696)	(7,696)
Long Term Liabilities	**(1,029,021)**	**(992,397)**
Net Assets	**619,517**	**644,737**
Capital & Reserves		
Retained Income b/fwd	279,874	279,874
Income & Expenditure	(25,220)	0
Revaluation Reserves	364,863	364,863
Funding Employed	**619,517**	**644,737**

Key Commentary:

The balance sheet at 31 March 2022 year end reflects the audited statutory accounts position. This includes the revaluation of both housing and investment properties, actuarial valuation of the defined benefit pension scheme and the fair value of the Scottish Government loan.

- **Fixed assets:** movements from the year end reflects investment in existing properties, the new build programme, and any other fixed asset additions, less depreciation to date.

- **Current Assets (excluding cash)** are £1.6m lower than the March 2022 position, due to the timing of housing benefit receipts.

- **Debtors due after more than one year:** The intercompany loan debtor relates to the convertible debt with Lowther Homes Limited and is revalued on an annual basis as part of the statutory accounts.

- **Short-Term Creditors:** Amounts due within one year are £6.3m lower than the March 2022 position mainly due to reduction in accruals and release of deferred new build grant income.

- **Long term bank finance loans** net of amortised fees are £972.7m and relate to funding drawn down from WFL1.

Financial Projections & Assumptions — 2023
Wheatley Homes Glasgow Limited — 317

PLEASE USE "0" FOR NIL VALUES THROUGHOUT T		2022/23 Year 0 £'000	2023/24 Year 1 £'000	2024/25 Year 2 £'000	2025/26 Year 3 £'000	2026/27 Year 4 £'000	2027/28 Year 5 £'000
Number of units lost during year to:							

STATEMENT OF COMPREHENSIVE INCOME

		2022/23	2023/24	2024/25	2025/26	2026/27	2027/28
Gross rents	10	201,311.0	208,706.2	215,100.3	222,893.4	229,841.9	236,990.8
Service charges	11	1,929.0	1,783.4	1,599.5	1,687.4	1,890.1	2,103.3
Gross rents & service charges	12	203,240.0	210,489.6	216,699.8	224,580.8	231,732.0	239,094.1
Rent loss from voids	13	2,075.0	4,024.6	3,064.8	3,612.8	4,861.0	5,096.1
Net rent & service charges	14	201,165.0	206,465.0	213,635.0	220,968.0	226,871.0	233,998.0
Developments for sale income	15	0.0	0.0	0.0	0.0	0.0	
Grants released from deferred income	16	11,499.0	4,109.0	16,373.8	24,776.1	25,786.9	32,526.7
Grants from Scottish Ministers	17	0.0	0.0	0.0	0.0	0.0	0.0
Other grants	18	3,862.0	4,657.0	40.0	0.0	0.0	0.0
Other income	19	10,671.0	10,317.9	11,188.7	12,344.9	13,228.3	14,323.0
TURNOVER	20	**227,197.0**	**225,548.9**	**241,237.5**	**258,089.0**	**265,886.2**	**280,847.7**
Less:							
Housing depreciation	22	75,334.0	65,898.6	68,818.9	72,033.2	75,796.3	80,363.8
Impairment written off / (back)	23	0.0	0.0	0.0	0.0	0.0	0.0
Management costs	25	48,361.9	49,265.9	49,153.5	49,360.7	48,609.0	49,401.6
Service costs	26	5,045.0	6,463.1	6,004.7	5,713.9	5,626.8	5,771.7
Planned maintenance - direct costs	27	21,815.3	23,698.6	24,135.1	24,841.6	27,501.0	26,608.9
Re-active & voids maintenance - direc	28	34,160.5	32,116.8	37,392.3	38,241.1	38,372.0	39,360.5
Maintenance overhead costs	29	0.0	0.0	0.0	0.0	0.0	0.0
Bad debts written off / (back)	30	2,599.0	4,270.6	4,416.8	4,529.1	4,619.9	4,773.9
Developments for sale costs	31	0.0	0.0	0.0	0.0	0.0	0.0
Other activity costs	32	10,424.4	4,924.8	4,313.6	4,411.0	4,509.5	4,610.2
Other costs	33	9,265.9	15,494.3	12,120.6	9,840.4	10,448.2	13,067.0
	34	131,672.0	136,234.1	137,536.6	136,937.8	139,686.4	143,593.8
Operating Costs	36	**207,006.0**	**202,132.7**	**206,355.5**	**208,971.0**	**215,482.7**	**223,957.6**
Gain/(Loss) on disposal of PPE	37	0.0	0.0	0.0	0.0	0.0	0.0
Exceptional Items - (Income) / Expens	38	(35,625.0)	(20,529.0)	4,021.0	(4,448.0)	(22,464.0)	(10,200.0)
OPERATING SURPLUS/(DEFICIT)	39	**55,816.0**	**43,945.2**	**30,861.0**	**53,566.0**	**72,867.5**	**67,090.1**
Interest receivable and other income	41	4.4	35.0	70.5	105.3	140.0	140.0
Interest payable and similar charges	42	45,415.4	49,920.2	53,786.5	55,637.3	58,409.5	60,499.1
Increase / (Decrease) in Negative Goodwill	43	0.0	0.0	0.0	0.0	0.0	0.0
Other Gains / (Losses)	44	71,298.0	14,448.0	32,153.0	18,755.0	(4,116.0)	(13,959.0)
SURPLUS/(DEFICIT) ON ORDINARY ACTIV	46	**81,703.0**	**8,508.0**	**9,298.0**	**16,789.0**	**10,482.0**	**(7,228.0)**
Tax on surplus on ordinary activities	48	0.0	0.0	0.0	0.0	0.0	0.0

SURPLUS/(DEFICIT) FOR THE YEAR AFTE	50 :	81,703.0	8,508.0	9,298.0	16,789.0	10,482.0	(7,228.0)
Actuarial (loss) / gain in respect of pension sc	52 :	0.0	0.0	0.0	0.0	0.0	0.0
Change in Fair Value of hedged financial inst	53 :	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL COMPREHENSIVE INCOME FOR T	55 :	81,703.0	8,508.0	9,298.0	16,789.0	10,482.0	(7,228.0)

STATEMENT OF FINANCIAL POSITION

Non-Current Assets							
Intangible Assets & Goodwill	60 :	0.0	0.0	0.0	0.0	0.0	0.0
Housing properties - Gross cost or valuati	63 :	1,584,530.0	1,626,636.3	1,675,456.1	1,724,920.1	1,773,057.3	1,815,065.8
Less							
Housing Depreciation	65 :	0.0	0.0	0.0	0.0	0.0	0.0
Negative Goodwill	66 :						
NET HOUSING ASSETS	67 :	1,584,530.0	1,626,636.3	1,675,456.1	1,724,920.1	1,773,057.3	1,815,065.8
Non-Current Investments	69 :	108,427.9	128,956.9	124,935.9	129,383.9	151,847.9	162,047.9
Other Non Current Assets	70 :	61,809.0	62,025.9	62,917.2	66,715.3	67,212.9	66,546.3
TOTAL NON-CURRENT ASSETS	71 :	1,754,766.9	1,817,619.1	1,863,309.2	1,921,019.3	1,992,118.1	2,043,660.0
Current Assets							
Net rental receivables	74 :	5,065.0	13,836.2	13,640.2	13,109.6	13,018.3	12,923.9
Other receivables, stock & WIP	75 :	40,940.0	38,722.3	43,512.6	47,529.8	47,533.9	47,537.9
Investments (non-cash)	76 :	0.0	0.0	0.0	0.0	0.0	0.0
Cash at bank and in hand	77 :	3,359.0	7,000.0	7,000.0	7,000.0	7,000.0	7,000.0
TOTAL CURRENT ASSETS	78 :	49,364.0	59,558.5	64,152.8	67,639.4	67,552.2	67,461.8
Payables : Amounts falling due within One Year							
Loans due within one year	81 :	0.0	0.0	0.0	0.0	0.0	0.0
Overdrafts due within one year	82 :	0.0	0.0	0.0	0.0	0.0	0.0
Other short-term payables	83 :	106,835.9	96,538.7	100,949.0	108,556.7	114,671.5	125,617.8
TOTAL CURRENT LIABILITIES	84 :	106,835.9	96,538.7	100,949.0	108,556.7	114,671.5	125,617.8
NET CURRENT ASSETS/(LIABILITIES)	86 :	(57,471.9)	(36,980.2)	(36,796.2)	(40,917.3)	(47,119.3)	(58,156.0)
TOTAL ASSETS LESS CURRENT LIABILIT	88 :	1,697,295.0	1,780,638.9	1,826,513.0	1,880,102.0	1,944,998.8	1,985,504.0
Payables : Amounts falling due After One Year							
Loans due after one year	91 :	1,019,467.0	1,085,121.4	1,127,605.6	1,164,106.4	1,215,117.6	1,267,290.1
Other long-term payables	92 :	0.0	0.0	0.0	0.0	0.0	0.0
Grants to be released	93 :	7,696.0	16,586.5	10,678.4	10,977.6	14,381.2	9,941.9
TOTAL LONG TERM LIABILITIES	94 :	1,027,163.0	1,101,707.9	1,138,284.0	1,175,084.0	1,229,498.8	1,277,232.0
Provisions for liabilities & charges	96 :	1,858.0	2,149.0	2,149.0	2,149.0	2,149.0	2,149.0
Pension asset / (liability)	97 :	(58,166.0)	(58,166.0)	(58,166.0)	(58,166.0)	(58,166.0)	(58,166.0)
NET ASSETS	98 :	726,440.0	734,948.0	744,246.0	761,035.0	771,517.0	764,289.0

Capital & Reserves

Share capital	101 :	0.0	0.0	0.0	0.0	0.0	0.0
Revaluation reserve	102 :	471,345.0	506,322.0	534,454.0	557,657.0	576,005.0	572,246.0
Restricted reserves	103 :	0.0	0.0	0.0	0.0	0.0	0.0
Revenue reserves	104 :	255,095.0	228,626.0	209,792.0	203,378.0	195,512.0	192,043.0
TOTAL CAPITAL & RESERVES	105 :	**726,440.0**	**734,948.0**	**744,246.0**	**761,035.0**	**771,517.0**	**764,289.0**
Intra Group Receivables - as included above	107 :	8,215.0	4,100.0	4,100.0	4,100.0	4,100.0	4,100.0
Intra Group Payables - as included above	108 :	1,004,595.2	1,068,145.8	1,108,435.2	1,142,646.7	1,191,270.0	1,240,951.3

STATEMENT OF CASHFLOWS

Net Cash from Operating Activities

Operating Surplus/(Deficit)	113 :	55,816.0	43,945.2	30,861.0	53,566.0	72,867.5	67,090.1
Depreciation & Amortisation	114 :	81,386.0	76,569.3	80,079.6	78,998.6	83,859.3	89,891.3
Impairments / (Revaluation Enhancement	115 :	0.0	0.0	0.0	0.0	0.0	0.0
Increase / (Decrease) in Payables	116 :	(15,984.7)	(10,232.8)	(16,613.2)	(24,775.0)	(26,926.9)	(32,528.2)
(Increase) / Decrease in Receivables	117 :	1,594.0	(352.6)	191.5	526.7	87.2	90.4
(Increase) / Decrease in Stock & WIP	118 :	0.0	0.0	0.0	0.0	0.0	0.0
Gain / (Loss) on sale of non-current asset	119 :	0.0	0.0	0.0	0.0	0.0	0.0
Other non-cash adjustments	120 :	(34,115.0)	(21,640.0)	4,021.0	(4,448.0)	(22,464.0)	(10,200.0)
NET CASH FROM OPERATING ACTIVITIES	121 :	**88,696.3**	**88,289.1**	**98,539.9**	**103,868.3**	**107,423.1**	**114,343.6**
Tax (Paid) / Refunded	123 :	0.0	0.0	0.0	0.0	0.0	0.0

Return on Investment and Servicing of Finance

Interest Received	126 :	4.4	35.0	70.5	105.3	140.0	140.0
Interest (Paid)	127 :	(45,415.4)	(45,636.1)	(48,915.2)	(50,567.2)	(53,521.9)	(55,810.2)
RETURNS ON INVESTMENT AND SERVIC	128 :	**(45,411.0)**	**(45,601.1)**	**(48,844.7)**	**(50,461.9)**	**(53,381.9)**	**(55,670.2)**

Capital Expenditure & Financial Investment

Construction or acquisition of Housing pro	131 :	(16,839.0)	(48,427.2)	(46,221.9)	(60,116.4)	(78,189.4)	(85,646.6)
Improvement of Housing	132 :	(51,927.0)	(48,098.4)	(43,147.2)	(46,006.0)	(50,652.4)	(51,699.6)
Construction or acquisition of other Land	133 :	0.0	(6,200.9)	(4,785.8)	(4,013.3)	0.0	0.0
Construction or acquisition of other Non-C	134 :	(11,519.1)	(9,879.0)	(7,439.3)	(6,631.0)	(6,655.8)	(6,347.9)
Sale of Social Housing Properties	135 :	0.0	0.0	0.0	0.0	0.0	0.0
Sale of Other Land & Buildings	136 :	0.0	0.0	0.0	0.0	0.0	0.0
Sale of Other Non-Current Assets	137 :	0.0	0.0	0.0	0.0	0.0	0.0
Grants (Repaid) / Received	138 :	8,638.0	10,900.1	12,501.6	30,041.0	33,725.3	36,231.3
CAPITAL EXPENDITURE AND FINANCIAL	139 :	**(71,647.1)**	**(101,705.4)**	**(89,092.6)**	**(86,725.7)**	**(101,772.3)**	**(107,462.8)**
NET CASH BEFORE FINANCING	141 :	**(28,361.8)**	**(59,017.4)**	**(39,397.4)**	**(33,319.3)**	**(47,731.1)**	**(48,789.4)**

Financing

Equity drawdown	144 :	0.0	0.0	0.0	0.0	0.0	0.0
Debt drawdown	145 :	0.0	0.0	0.0	0.0	0.0	0.0
Debt repayment	146 :	0.0	0.0	0.0	0.0	0.0	0.0
Working Capital (Cash) - Drawn / (Repaid	147 :	34,006.2	62,658.4	39,397.4	33,319.3	47,731.1	48,789.4
NET CASH FROM FINANCING	148 :	**34,006.2**	**62,658.4**	**39,397.4**	**33,319.3**	**47,731.1**	**48,789.4**

INCREASE / (DECREASE) IN NET CASH	150 :	**5,644.4**	**3,641.0**	**0.0**	**0.0**	**0.0**	**0.0**
Cash Balance							
Balance Brought Forward	153 :	(2,285.4)	3,359.0	7,000.0	7,000.0	7,000.0	7,000.0
Increase / (Decrease) in Net Cash	154 :	5,644.4	3,641.0	0.0	0.0	0.0	0.0
CLOSING BALANCE	155 :	**3,359.0**	**7,000.0**	**7,000.0**	**7,000.0**	**7,000.0**	**7,000.0**

ADDITIONAL INFORMATION

Number of units added during year to:							
New Social Rent Properties added	160 :	41	100	0	200	219	270
New MMR Properties added	161 :	93	71	194	126	100	122
New Low Costs Home Ownership Proper	162 :	0	0	0	0	0	0
New Properties - Other Tenures added	163 :	0	0	0	0	0	0
Total number of new affordable housing u	164 :	**134**	**171**	**194**	**326**	**319**	**392**
Units developed for sale:							
Number of units developed for sale to RS	167 :	0	0	0	0	0	0
Number of units developed for sale to nor	168 :	0	0	0	0	0	0

Please select "No" if these projections do not include all developments identified for this RSL in Local Authorities' Strategic Housing Investment Plans and add a comment. If you have no development plans, please

Development Assumption	171 :	No
Development Assumption Comment	172 :	Business Plan is based on developments included within the SHIP aswell as schemes identified
	173 :	for development but not in the SHIP as of yet.

Number of units lost during year from:							
Sales including right to buy	176 :	0	0	0	0	0	0
Demolition	177 :	0	300	300	68	96	364
Other	178 :	0	0	0	0	0	0
Units owned:							
Social Rent Properties	181 :	42,756	42,556	42,256	42,388	42,511	42,417
MMR Properties	182 :	813	884	1,078	1,204	1,304	1,426
Low Costs Home Ownership Properties	183 :	11	11	11	11	11	11
Properties - Other Tenures	184 :	0	0	0	0	0	0
Number of units owned at end of period	185 :	**43580**	**43451**	**43345**	**43603**	**43826**	**43854**
Number of units managed at end of period (ε	187 :	0	0	0	0	0	0
Financed by:							
Scottish Housing Grants	190 :	0.0	0.0	0.0	0.0	0.0	0.0
Other public subsidy	191 :	10,273.9	5,901.5	16,373.8	24,776.1	25,786.9	32,526.7
Private finance	192 :	14,489.3	13,427.0	24,029.8	30,404.5	29,380.4	36,979.6
Sales	193 :	0.0	0.0	0.0	0.0	0.0	0.0

Cash reserves	194 :	0.0	0.0	0.0	0.0	0.0	0.0
Other	195 :	0.0	0.0	0.0	0.0	0.0	0.0
Total cost of new units	196 :	**24,763.2**	**19,328.5**	**40,403.6**	**55,180.6**	**55,167.3**	**69,506.3**

Assumptions:

General Inflation (%)	199 :	3.0	5.0	3.0	2.5	2.5	2.5
Rent increase - Margin above / below Ge	200 :	(1.1)	(1.1)	0.7	1.0	0.4	0.4
Operating cost increase - Margin above /	201 :	0.0	0.0	0.0	0.0	0.0	0.0
Direct maintenance cost increase - Margi	202 :	0.0	2.0	0.0	0.0	0.0	0.0
Actual / Assumed average salary increase	203 :	3.5	7.0	3.0	2.0	2.0	2.0
Average cost of borrowing (%)	204 :	4.1	4.5	4.6	4.6	4.7	4.7
Employers Contributions for pensions (%)	205 :	19.3	19.3	19.3	19.3	19.3	19.3
Employers Contributions for pensions (£'0	206 :	8,602.7	9,204.9	9,104.5	9,253.6	9,321.0	9,507.4
SHAPS Pensions deficit contributions (£'0	207 :	0.0	0.0	0.0	0.0	0.0	0.0
Minimum headroom cover on tightest inte	208 :	0.0	0.0	0.0	0.0	0.0	0.0
Minimum headroom cover on tightest gea	209 :	0.0	0.0	0.0	0.0	0.0	0.0
Minimum headroom cover on tightest ass	210 :	0.0	0.0	0.0	0.0	0.0	0.0
Total staff costs (including NI & pension c	212 :	64,163.7	68,655.1	68,146.9	69,285.0	69,868.1	71,265.4
Full time equivalent staff	213 :	1,708.0	1,708.0	1,661.6	1,657.6	1,643.6	1,643.6
EESSH Revenue Expenditure included ab	215 :	0.0	0.0	0.0	0.0	0.0	0.0
EESSH Capital Expenditure included abo	216 :	4,666.0	6,889.0	531.0	2,180.0	3,460.0	2,783.0
Total capital and revenue expenditure on	217 :	434.0	1,232.8	776.2	849.1	870.7	871.5
Total capital and revenue expenditure on	218 :	107,468.8	103,113.8	104,375.4	108,728.7	116,165.4	117,309.0

		Values	Comment
Have you included any decarbonisation c	221 :	Yes	
If so, please add an estimate of what the	222 :	38,751.0	includes year 0 - year 5 costs

Report

To:	**Wheatley Homes Glasgow Board**
By:	**Ranald Brown, Director of Assurance**
Subject:	**Group Assurance Update**
Date of Meeting:	**19 May 2023**

1. Purpose

1.1 This report provides the Board with an update for noting of the following matters:

- internal audit work reported to the February and May Group Audit Committee meetings; and
- the rolling Internal Audit Plan.

2. Authorising and strategic context

2.1 Under our Terms of Reference, the Board is responsible for managing and monitoring its compliance arrangements and operational performance. The activities undertaken by the Assurance Team provide the Board with independent assurance to support the Board in this role.

2.2 The Group Audit Committee is responsible for monitoring the Group's assurance activities. The Group Audit Committee has responsibility for instructing and keeping under review the rolling internal audit plan for the Group, and monitor results as presented in quarterly Assurance Updates. The current schedule of work within the rolling Internal Audit Plan 2022/23 was approved by the Group Audit Committee at its meeting on 3 May 2023.

3. Background

3.1 In November 2022, the Group Audit Committee approved delivery of the following reviews, as part of the rolling Internal Audit Plan. The reviews highlighted in **blue font** are those relevant to this Board:

Scottish Government Net Zero grant requirements	**HR Self-Service Preparedness**	Care Medication Handling Protocols
Lone working arrangements	**RSL Records Management**	**Damp and Mould review**

Digital Maturity Assessment	Digital Strategy Delivery	[redacted]
Legislative Compliance Mapping: **Development, Repairs,** Foundation, **W360, Health and Safety**	**Data Analytics**	
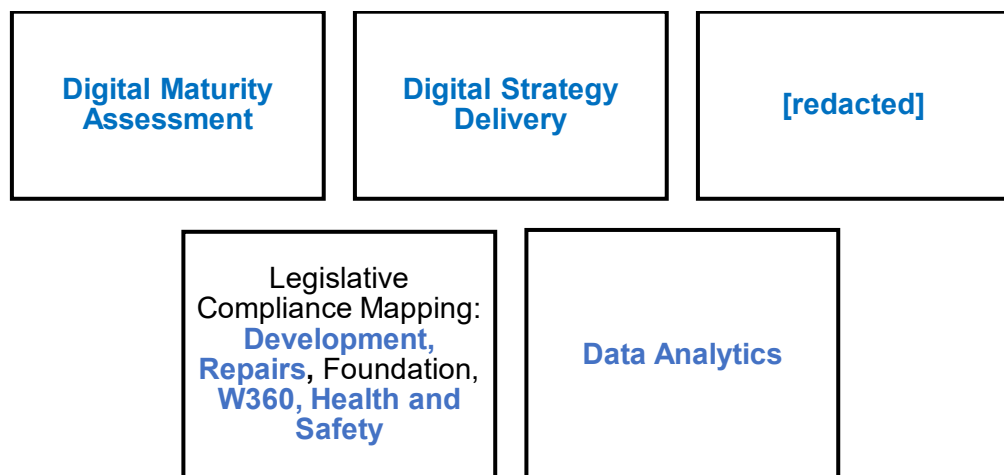
3.2 The Internal Audit team has now completed these reviews, and details of the findings are set out in the Group Assurance Update report at **Appendix 1**.

4. Discussion

Summary of work in Q3 and Q4 of 2022/23

4.1 The table below summarises the results of internal audit work completed in the period since our last report. The table highlights relevant to this Board. The coloured pie-charts represent our assessment of the extent to which the control objectives we audited were achieved.

• Wheatley Care	• Loretto Housing • WH-East • WH-Glasgow • WH-South • Wheatley Solutions	• Loretto Housing • Lowther • Wheatley Care • Wheatley Development Scotland • Wheatley Foundation • WH-East • WH-Glasgow • WH-South • Wheatley Solutions
Medication Handling Protocols	Scottish Government Net Zero Grant Requirements	Digital Strategy Delivery
• Loretto Housing • Lowther • Wheatley Care • Wheatley Development Scotland • Wheatley Foundation • WH-East • WH-Glasgow • WH-South • Wheatley Solutions	• Loretto Housing • Lowther • Wheatley Care • Wheatley Development Scotland • Wheatley Foundation • WH-East • WH-Glasgow • WH-South • Wheatley Solutions	• Loretto Housing • WH-East • WH-Glasgow • WH-South
Digital Maturity Assessment	Lone Working	RSL Records Management

4.2	The control objective ratings are defined below:

Red	Amber	Yellow	Green
• Control objective not achieved. • Control weaknesses identified could have a significant and immediate impact on the risks to achievement of the organisation's objectives.	• Control objective not achieved. • Control weaknesses identified could have a moderate impact on the risks to achievement of the organisation's objectives.	• Control objective achieved. • Control weaknesses identified could have some impact on the risks to the achievement of the organisation's objectives.	• Control objective achieved. • Any control weaknesses identified could have limited impact on the risks to the achievement of the organisation's objectives.

4.3	In addition, the following reviews have also been completed. We can confirm there were no significant issues arising in these reports that we would need to highlight to the Board:

HR Self-Service Preparedness	Damp and Mould	CBG Working Group support	Legislative compliance mapping	Data Analytics
Loretto Housing Lowther Wheatley Care Wheatley Foundation WH-East WH-South WH-Glasgow Wheatley Solutions	Loretto Housing Lowther WH-East WH-Glasgow WH-South Wheatley Solutions	Loretto Housing Lowther WH-South WH-Glasgow Wheatley Solutions	Wheatley Foundation Loretto Housing Lowther Wheatley Care Wheatley Development Scotland WH-East WH-Glasgow WH-South Wheatley Solutions	Wheatley Care – SSSC staff registration Wheatley Solutions – payroll & purchase cards Wheatley Foundation – HFY fund

4.4	More detail on the key findings for each review are set out in the Group Assurance Update at **Appendix 1**. Full reports are available to all Board members upon request.

Rolling Internal Audit Plan to August 2023

4.5	The Group Audit Committee reviews the rolling Internal Audit Plan at each of its meetings, approving the work scheduled for the coming quarter. In May 2023, the Group Audit Committee approved the programme of work set out in **Appendix 1**.

## 5.	Customer Engagement

5.1	No customer engagement implications arise directly from this report although action owners may engage with customers to inform decision-making arising in the course of completing assigned actions.

6.   Environmental and sustainability implications

6.1   No environmental or sustainability implications arise directly from this report.

7.   Digital transformation alignment

7.1   The reports on Digital Strategy Delivery and Digital Maturity Assessment provide assurance on the way digital transformation is delivered across the Group.

8.   Financial and value for money implications

8.1   No financial or value for money implications arise directly from this report.

9.   Legal, regulatory and charitable implications

9.1   No legal, regulatory or charitable implications arise directly from this report.

10.   Risk Appetite and assessment

10.1   This report is designed to inform the Board members of specific risks arising from internal audit reviews, in order that members can make informed governance decisions. The relevant risk appetite statements are dependent on the nature of each specific risk arising from those internal audit reviews.

11.   Equalities implications

11.1   This report does not require an equalities impact assessment.

12.   Key issues and conclusions

12.1   The Internal Audit team has completed the listed reviews. No significant matters were noted to bring to the attention of the Board members and management have agreed actions to address the improvement actions identified during each review. The Internal Audit team will monitor completion of these actions and report progress to future meetings of the Group Audit Committee and this Board.

12.2   The Group Audit Committee has approved the Internal Audit team's current programme of work and will continue to oversee and approve the work programme on a quarterly basis.

13.   Recommendations

13.1   The Board is asked to note the contents of this report.

LIST OF APPENDICES:

Appendix 1 – Group Assurance Update May 2023

1. Internal Audit Plan Status

This report summarises the findings of the following Internal Audit activity, which was completed during this period. In addition, the team has followed up the implementation of previously agreed management actions (section 13).

• Wheatley Care	• Loretto Housing • WH-East • WH-Glasgow • WH-South • Wheatley Solutions	• Loretto Housing • Lowther • Wheatley Care • Wheatley Development Scotland • Wheatley Foundation • WH-East • WH-Glasgow • WH-South • Wheatley Solutions
Medication Handling Protocols – 2	**Scottish Government Net Zero Grant Requirements - 3**	**Digital Strategy Delivery - 4**

• Loretto Housing • Lowther • Wheatley Care • Wheatley Development Scotland • Wheatley Foundation • WH-East • WH-Glasgow • WH-South • Wheatley Solutions	• Loretto Housing • Lowther • Wheatley Care • Wheatley Development Scotland • Wheatley Foundation • WH-East • WH-Glasgow • WH-South • Wheatley Solutions	• Loretto Housing • WH-East • WH-Glasgow • WH-South
Digital Maturity Assessment - 5	**Lone Working - 6**	**RSL Records Management - 7**

HR Self-Service Preparedness – 8

Loretto Housing

Lowther

Wheatley Care

Wheatley Foundation

WH-East

WH-South

WH-Glasgow

Wheatley Solutions

Damp and Mould – 9

Loretto Housing

Lowther

WH-East

WH-Glasgow

WH-South

Wheatley Solutions

CBG Working Group support – 10

Loretto Housing

Lowther

WH-South

WH-Glasgow

Wheatley Solutions

Legislative compliance mapping Phase 4 – 11

Wheatley Foundation

Loretto Housing

Lowther

Wheatley Care

Wheatley Development Scotland

WH-East

WH-Glasgow

WH-South

Wheatley Solutions

Data Analytics - 12

Wheatley Care – SSSC staff registration

Wheatley Solutions – payroll & purchase cards

Wheatley Foundation – HFY fund

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2

Wheatley Group

Control Objective Classification:

The audit approach involves assessing the risks to the achievement of the control objectives. Controls to mitigate these risks are then identified and tested in terms design, adequacy and operating effectiveness. Where those controls are considered insufficient to mitigate the risks to the achievement of the control objective, the classification will be "red" or "amber". Where the controls are adequate to mitigate the risks, the classification will be "yellow" or "green". The classification allocated is based on audit findings and the Director of Assurance's professional judgement, which will consider the strategic importance of the area under review.

Red	Amber	Yellow	Green
§ Control objective not achieved. § Control weaknesses identified could have a significant and immediate impact on the risks to achievement of the organisation's objectives.	§ Control objective not achieved. § Control weaknesses identified could have a moderate impact on the risks to achievement of the organisation's objectives.	§ Control objective achieved. § Control weaknesses identified could have a minor impact on the risks to the achievement of the organisation's objectives.	§ Control objective achieved. § Any control weaknesses identified could have very little impact on the risks to the achievement of the organisation's objectives.

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Report Conclusion

During 2022, Wheatley Group was awarded 3 net zero grants (totalling £18 million) from the Scottish Government to support improvement of existing properties through installation of different energy efficiency schemes. The projects are: Project 1 – Net Zero Houses (retrofit project for Wheatley Homes South); Project 2 – Pre1919 Tenements (retrofit project for Wheatley Homes East); and Project 3 – Accelerated Connected Response (project for Wheatley Homes Glasgow). The grants are awarded through grant letters that include requirements the Group must meet in order to be eligible to claim the awarded funding.

This was an advisory review to assist management in developing the processes and controls required to demonstrate how grant terms will be met. Our findings should be read in the context that, at the time of our fieldwork, management were designing the procedures required to demonstrate compliance with grant conditions and only 1 of the 3 projects (project 3) had started work. We reviewed available documentation and contributed to discussions on the design of processes to manage these projects. This report summarises our findings as at mid-December 2022, when work to develop processes was still ongoing. All matters raised within the report have been discussed with management who have agreed they will be incorporated into the finalised design of procedures and controls, to be agreed at the fortnightly Net Zero review meetings. As part of follow-up for quarter 4 for 2023/24 plan, we will ask management to confirm how each of the points raised have been addressed.

The following slide describes our review of the processes in place to submit claims with supporting documentation for each project. If applied as described, these processes should be adequate for management of the grant funding claimed. Work is in progress to design a process that will allow monitoring and reporting of expenditure available for use as match-funding by each project. Further work is required to agree procedures and responsibilities in respect of non-financial reporting required by the Scottish Government, including EPC certificates, and tenant engagement work; and to confirm longer-term requirements in respect of ongoing reporting following the completion of the grant-funded works.

3. Scottish Government Net Zero grant requirements

The three projects that have been awarded grant from the Scottish Government's Net Zero scheme are set out below, along with a summary of the extent to which we were able to review proposed procedures during our review.

Project 1 – Net Zero Houses	Project 2 – Pre1919 tenements	Project 3 – Accelerated Connected Response
• A retrofit project for Wheatley Homes South. • This project had not started at the time of our review. • We reviewed the process used for claiming grant funding and reporting match funding for a previous Net Zero grant as management advised a similar approach would be used for Project 1. • We were able to trace a sample of 5 amounts claimed from the grant claim to supporting documentation, including evidence of payment. • The amount claimed was 50% of the total invoice value, with the other 50% being match funding. • The size and terms of the Project 1 grant award, mean that 100% of local expenditure will be allocated to the grant funding claim, with match funding coming from alternative energy efficiency works across Group. This is different to the terms of the existing project we reviewed and means the process for tracking and reporting match funding will need to be revised for Project 1. • We suggest two tabs are used within the planned spreadsheet – one for grant funding and the other for matched spend.	• A retrofit project primarily for Wheatley Homes East. • This project relies on identification and assessment of void properties. At the time of our review, 4 properties had been identified for a pilot but work had not commenced. • Consequently, it was not possible to assess the proposed process for submission of grant claims and match funding information. • Management advised that the project expenditure would be tracked and reported in a similar manner to the processes used for Projects 1 and 3.	• A project to improve electric storage heating within homes in Wheatley Homes Glasgow • One grant claim had been submitted at the time of our review, covering expenditure in the period September – October 2022. • We reviewed the claim and the supporting documentation submitted to the Scottish Government for both the grant funding claimed and the match funding reported. • We traced a sample of 5 items from the grant claim to supporting documentation, including evidence of payment. • We were also able to trace a sample of 5 items from the match funding return to supporting documentation. • We noted that CBG invoices listed in the match funding summary included VAT at 20%, while CBG invoices listed in the grant funding claim were zero-rated. Finance advised that the zero-rated VAT approach was the correct treatment for the CBG work on this project. The Investment team and Finance should confirm all of the invoices have been treated correctly and adjust the amounts included in funding returns to the Scottish Government, if required.

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Control Objective Classification

The control objective ratings shown below reflect the extent to which controls were in place and operating at the time of our review. We acknowledge that the three projects were at an early stage and the control framework in development, with only one of the three projects having started. The purpose of this review was to assist management in developing the control environment; so these ratings were expected.

Rating	Control Objective
Yellow	There is a process in place to confirm the Scottish Government has been provided with all expected updates and reports required by the grant conditions, including monthly returns;
Green	There is a process to identify invoices and other transactional documentation that demonstrates the eligibility of expenditure claimed against grant funding;
Yellow	There is a process to identify invoices and other transactional documentation that demonstrates the value and nature of expenditure spent in match funding;
Yellow	Project management arrangements are in place to confirm work is progressing in line with the timetable included in the grant confirmation letter, including update of the Energy Performance Certificate (EPC) register with the new EPC for each property following all property upgrades;
Yellow	There is a process in place to demonstrate tenant and customer engagement throughout the life of the project; in line with grant requirements;
Yellow	There is a process in place to confirm that any contractors used to deliver this project are required to adopt Fair Work First principles; and
Yellow	Project performance and compliance is monitored and reported to the Executive Team, the Wheatley Group Board, and other relevant partner Boards.

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Areas of good practice

ü A Teams site has been set up to allow those involved in the three projects to collaborate and share information about the respective projects.

ü Fortnightly meetings have been scheduled between key personnel in the management of these projects (across Investment, Asset, and Finance teams). Initial meetings have focused on agreement of shared processes and confirmation that controls are in place to confirm compliance with the grant requirements.

ü The teams involved have been proactive in contacting the Scottish Government representative for clarification of points within the grant agreement where these have not been clear, for example, around eligible staffing costs, EPC certification and tenant engagement.

ü An initial grant claim has been submitted to the Scottish Government for the Connected Response project. The Scottish Government representative confirmed that the grant and supporting documentation provided were in an acceptable format.

Opportunities to Develop

Due to the early timing of this review, particularly in relation to Projects 1 and 2, which had not started when fieldwork was completed, there are a number of areas in which arrangements for the management of these projects have still to be finalised:

- Arrangements for identification of eligible expenditure available for use as matched spend, and for allocation of that expenditure to each of the three projects should be finalised;

- Agreement of what constitutes eligible expenditure for matched spend should be agreed, along with confirmation of the supporting documentation required where this expenditure includes staff costs;

- Management should develop a monthly progress report template for submission to the Scottish Government, in line with grant requirements;

- Arrangements for reporting on the status of EPC certificate assessments should be finalised;

- Management should confirm that all contracted EPC assessors are committed to adopting Fair Work First;

- Requirements for tenant engagement reporting should be clarified and implemented;

- The draft grant agreement for Project 2 should be finalised as soon as possible;

- Internal performance reporting for these projects should be reviewed and updated; and

- Arrangements for complying with the additional grant conditions (such as document retention and post-project reporting) should be agreed.

Management have established fortnightly meetings of the Net Zero Funding group, providing an existing mechanism to address each of these matters.

3. Scottish Government Net Zero grant requirements

Management comments and timescales

All points for development were discussed at a meeting of the Net Zero Funding Group on 17 January 2023, where they were agreed with Group members.

All actions are due for completion by 28 February 2023, which aligns with the pre-existing timescales for delivery of the work funded by each of the three projects. Completion of the actions will be monitored by the Net Zero Funding Group.

Responsible Officer: Group Director of Assets and Repairs

Report Conclusion

Management has recognised the importance of robust and consistent processes for the delivery of digital initiatives. Work has been undertaken in the past 12 months to create enhanced internal processes to provide oversight of project approval and delivery. This includes the creation of Strategic Programme Boards, each of which has an Executive lead.

We also acknowledge that a revised approach to the development of the delivery plan and strategic objectives was agreed in mid-December 2022. This identified the need to improve change management plans (particularly for digital related ones), to agree success criteria for each project milestone performance measures and / or quantifiable impact expected they are expected to achieve will be established for each strategic project. As these new approaches were in the course of being implemented during our review, our conclusions on the control objectives are based on the current processes. If the proposed approach is implemented as described, this will result in an improved control environment in the future.

A key area of focus for maturing processes relates to the project approval and benefits management processes. The current processes would benefit from having consistency in business case related documentation to ensure that costs, milestones and benefits are clearly set out. Related to this, business cases (or equivalent) should also be reviewed to ensure that any potential requirements for business changes are appropriately considered and documented. Considering this consistently at the outset of a project will support optimal outcomes.

Control Objective Classification

Classification	Description
Yellow	There are linkages between the Group's strategy and delivery plan priorities to ensure successful delivery of the planned digital outcomes.
Amber	There are adequate internal governance processes which ensure effective prioritisation and oversight of the planned digital outcomes.
Yellow	There is effective stakeholder engagement to support business change as digital strategic outcomes are delivered.
Yellow	There are adequate internal processes for project and programme delivery.
Yellow	There are effective resource management processes to support project and programme delivery.
Amber	There are adequate benefits management and realisation processes.

The control objective classifications have been agreed taking into account the strategic importance associated with achievement of the digital projects within the Group's Strategy.

4. Digital Strategy Delivery

Areas of Good Practice

ü The corporate strategy reflects the role of digital in many aspects of engagement and service delivery.

ü As is identified in the digital maturity assessment, the organisation has taken steps to improve internal engagement and cross-organisational working.

ü Work has been undertaken to enhance internal governance arrangements over digital projects. This has included the creation of Strategic Programme Boards which have responsibility for specific thematic projects. This provides a better link between projects and the Executive Team.

ü There is regular reporting on digital project delivery to internal governance groups to highlight progress, including reporting to the Wheatley Solutions Board and Group Audit Committee.

ü The DigiTech has good oversight and involvement in digital initiatives and approved projects.

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Opportunities to Improve

Priority actions

- Develop formal processes and criteria to determine what level of documentation is needed when initiating a digital initiative, recognising they will be different in nature and scale. The level of documentation should reflect the risk, complexity and cost associated with the proposal.

- Ensure all business cases (or equivalent) include sufficient detail that allow success to be assessed and benefits to be monitored. Business cases should also be reviewed to confirm that they include change management plans, such as new target operating models and/or ways of working, arising from the project. This will reduce budget, timescale and benefit realisation delivery risk.

- Implement formal benefits realisation and management processes for digital projects which includes review and assessment of benefits prior to project approval through to their realisation. There should also be regular reporting of financial position and benefits to relevant internal governance groups.

Continuous Improvement Opportunities

- Develop a digital roadmap or principles from the corporate strategy as a point of reference when considering the merits and alignment of proposed digital projects.

- Enhance the formality of reporting to Strategic Programme Boards to include updates on delivery, risks and issues as well as benefits.

- Clarify the role of the Leadership Business Meeting in relation to oversight and prioritisation of digital initiatives.

- Establish criteria to determine which elements of project management documentation are required for individual digital projects.

4. Digital Strategy Delivery

Management comments and timescale

Management has advised that they will formalise the criteria around documentation requirements for digital projects and agree that the level of documentation will vary with the nature of the project.

A formal assessment and review of project benefits will be implemented for digital projects which meet the same criteria such as projects that are assessed as being complex in nature, those having a material change to the business operating model or those that require a material financial investment. Digital projects meeting these criteria will be assessed as part of the Group's annual delivery planning process, and by their nature be small in number. Management note that there may be digital projects that meet the criteria that are initiated outwith the annual planning cycle in response to a change in business priorities.

Management has agreed all continuous improvement actions identified and confirmed that these, along with the steps noted above to address priority actions, will be completed by 30 April 2023.

Responsible Officer: Group Director of Governance and Business Solutions

5. Digital Maturity Assessment

Report Conclusion

Wheatley Housing Group engaged Azets, as part of an IT audit review, in 2019 to assist in assessing their digital maturity. Since this date, the Group has undertaken several actions to improve their maturity in line with targets, albeit delaying these targets by one year as a result of the response to Covid-19.

Our review found that there has been positive progress in the Group's digital maturity. We observed several areas of good practice relating to digital maturity assessment controls, most notably in relation to the use of digital competencies, establishment of the DigiTech Connect forum and the creation of Digital Innovation and Data teams to continue to drive digital maturity across the whole group. In addition, it was positive to see that the Group has undertaken an activity to re-assess their maturity in May 2022.

As this is the end of first year in which the Group has undertaken activities to meet target maturity levels, process improvement opportunities were expected. Our review found that there is scope to improve upon current reporting structures including accuracy, frequency and quality of reporting.

Further improvement areas, which if addressed, would support the Group to better manage its overarching approach to enhancing digital maturity and the assessment process. This would clearly demonstrate how projects in the Group's annual delivery plan will meet the Group's desired progress in digital maturity ratings.

Control Objective Classification

Yellow	There is a formal plan through which improvements in digital maturity will be achieved.
Yellow	The processes through which digital maturity is being assessed internally can be appropriately evidenced.
Amber	Using a targeted approach, the assessment of digital maturity presented to Wheatley Solutions Board can be validated as being an accurate reflection of progress.

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5. Digital Maturity Assessment

Areas of Good Practice

- A digital maturity assessment was completed in May 2022 and presented through the "Digital Maturity Internal Review", which defines the outcomes for the work done for each of the seven digital maturity competencies.

- A Data Team has been created to support advanced analytics and reporting in addition to a Digital Team to enhance digital change and adoption approaches across the Group.

- A Digital User Group (DigiTech Connect) has been created, providing staff access to new technology and allows a forum for feedback on digital transformation to improve adoption and identify training requirements.

- Monthly RAG (red, amber and green) statuses are given to each project's key areas including status, time, cost, resources, quality, and benefits.

- Learning opportunities and success stories are shared monthly with people via DigiTech monthly newsletter and W.E Connect site (Staff engagement evidence).

- The introduction of user feedback across a variety of projects places the customer at the centre of design thinking and made valuable progress towards strategic goals of co-design of services. Feedback has been obtained using customer engagement surveys.

Opportunities to Improve

Priority Actions

Ø Create a contextualised framework to set out what each maturity level looks like for the Group. Use context such as good practice for the sector and Group-wide objectives.

Ø Include an assessment, as part of the Group's annual delivery plan, of digital and other projects and their contribution towards achieving the target digital maturity for each competency, the actions required to meet that target and the means by which that action will be achieved (i.e. by project or business-as-usual activity). Use the contextualised framework to inform which actions are required to meet the target maturity level.

Ø Create a digital maturity assessment framework to ensure that assessments are consistent and to minimise subjectivity from the process. Use methods such as surveys and interview to engage wider stakeholders in the assessment process. Use the contextualised framework and yearly delivery plan to identify if targets for the year have been met.

Ø Improving accuracy and clarity of reports by consistently providing definitions for maturity levels and providing the assessment report as an appendix to update reports in order to increase value of reporting.

Continuous improvement opportunities

Ø Complete resource analysis yearly to ensure that project and BAU operational teams involved in achieving digital maturity objectives have the appropriate capacity to achieve those goals, including the Digital innovation and the Data teams.

5. Digital Maturity Assessment

Management comments and timescales

Management has advised that the Group's annual delivery planning cycle will consider the contribution digital projects will make towards achieving our digital maturity targets and reviewed as part of the annual review of delivery plan outcomes. Additional action will be taken to implement the identified continuous improvement actions.

These steps will be completed by 31 March 2023.

Responsible Officer: Group Director of Governance and Business Solutions

6. Lone working

Report Conclusion

The Group Health and Safety (H&S) team has put in place a Health and Safety Management Arrangement (HSMA) for lone working, supported by template risk assessments and tailored procedures within Operating Safety Manuals (OSMs) for 5 business areas across the Group (Housing, Care, Trades, NETS, Corporate).

The H&S team has recently introduced procedures for assessing the operation of the processes outlined in the guidance, including rolling reviews of OSMs, and training sessions for staff on the Orbis lone working protection system. A "H&S for Managers" course, which includes information on lone working, has been designed and delivery sessions are due to start in April 2023.

There is room for further development of existing processes in relation to the consistency with which lone working management processes are implemented across the Group. There was a lack of clarity among some managers about their responsibilities and a wide variety of local arrangements were in place, some of which were more robust than others. The Group should agree a smaller number of "approved" measures which can be tailored to reflect local needs.

Finally, use of the Orbis lone working protection system remains low. The Health & Safety team has taken steps to improve usage, including rolling out face-to-face training to supplement e-learning modules. The Lone Working Group should review which teams still require access to Orbis and, for those teams facing higher risk lone working situations, the system should be treated as required safety equipment. Further training aimed at Administrators would also help to promote additional use of the system.

Control Objective Classification

Yellow	There is clear guidance setting out which staff are required to follow the Lone Working policy, including use of the Lone Working application where appropriate, and when they must do so;
Green	Staff have received clear guidance and training in how to follow the arrangements set in the Lone Working policy, including how to use the Lone Working application where required;
Yellow	The Lone Working application and devices are routinely reviewed to ensure the solution is working as expected including management of any known issues with the Lone Working application or devices;
Yellow	Staff adherence to the Lone Working arrangements and use of the Lone Working application and/or device are monitored to ensure staff are using these appropriately, identify any potential issues and recognise any additional training or support needs; and
Yellow	Actions taken in response to any alerts or potential staff safety concerns identified via the Lone Working application have been reviewed to confirm the process worked as expected and identify any learning.

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6. Lone working

Areas of good practice

ü The Group Health and Safety team has run 16 face to face lone working training sessions for frontline staff, with a further 17 scheduled. There are also training sessions aimed at promoting the use of the Orbis lone working protection system to managers.

ü The Group Health and Safety team has set up a Lone Working Group to promote use of lone working procedures across the Group, in particular focusing on increased use of Orbis.

ü The Group Health and Safety team have developed a rolling programme of OSM assurance checks across the Group which includes Lone Working compliance checks.

ü Quarterly monitoring of Lone Working training completion, incidents and accidents and Orbis usage and alerts by the Lone Working Group.

ü Review of Lone Working usage and alerts is part of the monthly performance monitoring by Wheatley Care's Senior Management, which includes Lone Working Power Bi reports, broken down by Service.

ü Quarterly Power Bi Orbis usage and alerts reports are included within the performance management paper in the Group's Health and Safety Strategy meeting.

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Opportunities to Improve – all actions agreed with management

Continuous improvement actions

Ø The Health and Safety Management Arrangement (HSMA) should be reviewed and updated, as planned. The updates should include clarification of the processes to apply to lone working at the front line or at home; and of the circumstances in which managers are required to complete local risk assessments for lone working. Once updated, the HSMA should be issued as a mandatory read on W.E.Connect. *(due 30/06/23)*

Ø The Health & Safety Strategy Group should continue to monitor completion of the mandatory lone working e-learning modules. Where completion rates fall below 90% for a particular team (Group wide completion rate is 66%), this should be escalated to the appropriate Group Director. *(due 30/06/23)*

Ø The review of the HSMA should include examples of good practice lone working controls to raise awareness among managers of the different levels of assurance that different methods provide and the need to confirm that staff moving between teams are made aware of any differences in approach. *(due 30/06/23)*

Ø The Lone Working Group should coordinate a review of Orbis users to confirm that they still require access and identify those teams who require to use Orbis as safety equipment for lone working. *(due 31/07/23)*

Ø The review outlined above should include review of those with administrator access to Orbis to confirm such access is granted to appropriate individuals. Training for administrators should be delivered, along with information sessions for managers, so that local teams can make use of the live reporting functionality within the system to enhance staff safety. *(due 31/07/23)*

Ø The Business Owner for the Orbis contract should review the contract management arrangements to confirm that the Supplier provides expected assurances in relation to system and data security requirements (e.g. backups and retention periods etc). *(due 30/06/23)*

Ø The Lone Working Group should review the extent to which the completion of planned actions deliver the expected outcomes, such as increased use of Orbis by relevant Group staff, to determine whether additional action is required. *(due 31/12/23)*

7. RSL Records Management

Report Conclusion

Arrangements in place across the Group RSLs to ensure that all required documents are held on tenant files require improvement. In November 2021, the New Business Model Steering Group received a summary of work required to archive existing RSL paper records and digitalise new tenant records. The group agreed next steps, which were approved by the Executive Team, including the cleansing of records held in local offices to ensure only required information was held in tenancy files. Once reviewed, the paper files were to be moved to the document management company Restore in the West and East prior to office closures; with local storage being used in the South. The November 2021 update stated that this exercise had commenced and would be reviewed by the appropriate Managing Director.

Work to complete these actions has progressed, however each RSL is at different stages in fully delivering the actions agreed at the New Business Model Steering Group. Additional controls are required to give assurance that all required documents are held on tenant files, and that all tenancy files are held in the expected locations (either paper or electronic) for the correct length of time. Clear guidance should be developed for staff on the content of a tenancy file and where these documents should be held, retention labels should be applied to all former tenancy files, and quality checks should be completed to confirm these arrangements are followed and the Group is compliant with housing and data protection legislation.

Control Objective Classification

Amber	There is clear guidance for RSL staff on what documents should be retained in tenancy files, what format these documents should be in and where they should be saved, including amendments to existing tenancies;
Not graded - this was dependent on guidance at first Control Objective	The location of all current and former tenant files is known, and all documents within these files can be accessed by authorised staff as and when required;
Not graded - this was dependent on guidance at first Control Objective	Expected documentation is held within each tenancy file, with a focus on tenancy agreements and Abands; and
Amber	Deletion dates have been applied to all former tenancy files to ensure these are only held in line for agreed retention periods after each tenancy end date.

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7. RSL Records Management

Existing RSL arrangements for storage of tenancy files

Heads of Housing and Locality Directors provided the following information during the review. We have included this to provide context to the findings and management next steps outlined within this report.

WH - Glasgow

WH-G tenancy files are primarily stored at Restore, however some offices still hold paper files.

Staff worked overtime to cleanse files prior to office closures, but once these office closure dates passed, any remaining files were moved as they were to Restore.

A decision has not yet been made about where electronic documents would be stored if they are created for new tenant files.

WH – East (DC)

Older tenancy agreements relating to former Dunedin Canmore(DC) tenancies are held on the legacy system Contract Manager, with newer hard copy tenancy agreements held in New Mart Road.

Existing DC paper tenancy files were moved to Restore at the point New Mart Road was refurbished.

Any new electronic documents are held in the system the file originated from (ASTRA) or saved in SharePoint.

WH – East (WLHP)

Former WLHP and inherited Barony tenancy files are stored in the Bathgate office. Access to these files was restricted during COVID and while the office was closed for major repairs.

Some files have been cleansed, but a large volume have still to be cleansed and moved to Restore.

Some electronic tenancy documents are still held on the S-drive. New electronic documents are saved to SharePoint.

WH - South

WH-S does not use Restore, so has created its own Electronic filing cabinet on Teams.

Documents created since April 2022 are held within these electronic tenancy files, with full tenancy agreements and existing paper tenancy files held in hard-copy within two offices.

Some of these paper files still need to be cleansed.

Loretto

Loretto tenancy files are stored within locked cabinets in Lipton House.

As the office is now closed to Loretto, these files need to be cleansed and moved to Restore.

The Head of Housing is coordinating this activity.

New electronic documents are held on a Sharepoint folder since February 2023.

7. RSL Records Management

Areas of good practice

ü The Group's Records Management Community of Excellence (COE) includes housing representatives and has received feedback from Restore on how staff are using services, providing an opportunity to share good practice and identify actions for improvement;

ü The Restore system guidance is easy to follow and the Scan on Demand functionality has now been rolled out to all users. Requested files are scanned within one working day of request and made available for the authorised user to view online on the Restore app;

ü WH-South has created its own electronic 'Housing Filing Cabinet' on Microsoft Teams. The documents are held within a SharePoint site for the team and can be accessed by all Housing staff. Documents created since April 2022 are held within these electronic tenancy files, and full copy tenancy agreements and existing paper tenancy files are held in hard-copy within two offices;

ü The Group's Housing retention schedule is available for all staff to view on W.E.Connect and states that Former Tenancy files should be held for 7 years after the termination of tenancy date unless there is a legitimate business need to retain these, such as an ongoing legal dispute.

ü WH-South implemented quality assurance checks of locally held files to provide management with assurance that its tenancy files contain expected documentation in appropriate formats and share good practice and opportunities for improvement. Although the checks were suspended following recent staffing changes, we were informed that management intends to reintroduce them as soon as possible.

Making homes and lives better

7. RSL Records Management

Opportunities to Improve – all actions agreed with management

Priority actions

Ø RSL guidance should be developed to clarify what documents should be in a tenancy file and the expected format and location of each of these documents. This should include guidance on standard naming conventions and file structures and how any documents should be added or removed from the existing files (if required). *(guidance due 30/06/23 and roll-out to all teams due 31/07/23)*

Ø Arrangements should be made to cleanse and move remaining paper tenancy files stored in offices for Loretto, WH-Glasgow and WH-East, as well as any electronic tenancy documents held on the S-drive. RSL leads should review the Restore inventory report for their locality groupings and arrange for any boxes with unknown contents to be returned to a Group premise and cleansed. *(due 31/12/23)*

Continuous improvement actions

Ø RSL leads should issue guidance to staff on the RSL's use of Restore. This should include guidance on when the Scan and Demand functionality should be used, and when it would be better value for money to return physical files to Group premises. It should also include guidance on what RSL staff are expected to do with the Scan on Demand records they receive. For example, if they should only view these in the Restore portal or save local copies in a specific location for future access. *(guidance due 30/06/23 and roll-out to all teams due 31/07/23)*

Ø Each RSL should have a formal procedure to manage the retention of Former Tenancy files held in electronic or hard copy and ensure these files are destroyed in line with the RSL retention schedule. These procedures should include checks to confirm if any of the files should be retained after their retention date for any legitimate business need. *(guidance due 30/06/23, file cleansing due 31/03/24)*

Ø Each RSL MD should determine the level of management assurance they require over the quality and completeness of their tenancy files and work with the Business Improvement team to develop local checks that will give them this ongoing assurance. This could include analytics or sample checks on the content of full tenancy files, confirming specific documents are held on tenant files (such as copies of letters sent in relation to ASB actions), or routine review of Restore inventory reports to confirm destroy dates have been actioned. *(guidance due 30/06/23 and roll-out to all teams due 31/07/23)*

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8. HR Self-Service Preparedness

Background

In September 2019, the then Group Director of Resources approved the proposed investment of self-service technology within the Payroll system (known as Selima at the time and now changed name to Access Group). The initial plans for roll out of the new system were delayed due to COVID19. The proposal highlighted that a substantial proportion of our staff capacity within Group payroll services is taken up by resource intensive and paper-based processes. A number of manual interventions were also highlighted relating to multiple sign offs with forms printed, signed, scanned and emailed by multiple officers for areas such as expenses and overtime.

The initially planned roll-out was delayed due to COVID. During 2022/23, the Employee Relations team has run a pilot of a self-service tool for expense and overtime claims. The pilot was completed with the Group IT and CFC teams, and initially involved dual-running the existing manual expenses process alongside the new self-service tool to confirm that the outputs matched. Following a period of dual running, the teams in the pilot moved to using only the self-service tool.

The 2019 proposal recommended to increase the annual contract cost by £34k per annum (for a 3-year period) along with one off upgrade and implementation costs of £24k.

8. HR Self-Service Preparedness

Current Position

Internal Audit assessed the adequacy of the described design of proposed controls within the piloted self-service approach for expenses and overtime in Q4 2021/22 and highlighted additional good practice controls for management to consider as the tool was embedded and rolled out to staff. The current review was initially intended to assess the extent to which the additional controls had been implemented and whether further controls were required before the expenses and overtime pilot was extended to additional staff groups.

During the scoping of this review, the Employee Relations team confirmed that while planning a further roll-out of the Access self-service approach, they identified that the supplier's mobile application is not compatible with the Group's android mobile devices. This limitation of use, combined with other issues identified by the team during the pilot exercise, has resulted in management concluding that the Access self-service tool does not meet the needs of the Group.

The review has therefore focused on steps taken by the Employee Relations team to learn lessons from the current pilot; to identify and record system functionality and controls that should be incorporated into any future self-service tool; and to develop an action plan to set out how the current situation will be progressed, with the IA team providing advice to the ER team on how these activities should be approached.

The following slide captures the advice provided to the Employee Relations team.

8. HR Self-Service Preparedness

Recommended next steps

1) A lessons learned exercise should be completed by the Employee Relations team to reflect on the outcomes of the pilot exercise and identify what did and do not go well.

2) The learning from this exercise should be used to determine which of the following suggested options the Group should take:

    i. Stop all use of the Access self-service tool and revert the pilot teams (CFC and IT) back to the manual process;
    ii. Continue to roll out the Access self-service tool to desktop users who can use it and determine an alternative process for mobile teams who cannot currently access the tool on their android device (including mobile NETs staff);
    iii. Procure an alternative self-service solution;
    iv. Maintain the current use of Access self service but stop any further roll out and include the Group's self-service requirements in the re-procurement of a Group Payroll or HR system when the current contracts end.

3) An options paper should be prepared by the Employee Relations team for the Executive Team to advise on the next stage of the pilot and propose which of the above options should be taken. Any future work should be aligned to the strategic projects prioritised within the Group's Delivery Plan.

Management comments and timescales

The recommended steps will be completed and the results reported to the ET by 31 March 2023.

Responsible Officer: Director of People Services

Making homes and lives better

9. Damp and Mould

Report Conclusion

In December 2022 the Group's approach to damp and mould was strengthened further with the introduction of a series of additional actions including: a new target to complete repairs within 15 days (instead of the previous 30 day target), enhanced monitoring and reporting arrangements; increased resource and access to specialist resource; additional staff training and communications to customers about support available to them. The Group committed to visit a customer's home within 48 hours of a report of mould and to treat significant mould issues as an emergency, with specialist trades staff attending within 3 hours. A new forced access approach has been agreed by all subsidiary RSL boards, whereby in certain circumstances, if a customer has reported mould but has not permitted access to treat it, we may force access to the property to inspect on health and safety grounds. Work to embed this updated approach was being taken forward by a group tasked with defining and implementing a damp and mould "to be" process.

This review looked at the current arrangements in place to confirm whether the identified changes were applied across the Group. We also assessed the extent to which planned development of the "to be" process addresses the expected control objectives. As the work of the group was ongoing throughout our fieldwork period, the findings in the report represent a "snapshot" of the status of the actions outlined above. We have confirmed that the management next steps identified in this report are also included in the working group's action list, with the working group planning to have the "to be" process embedded for the next damp and mould season, starting in Autumn 2023.

There are different interim processes in place across the Group. Weekly reporting on the number of live damp and mould cases is in place. However, there is no current reporting of performance against the 48 hour target. The "to be" process is in progress, with workshops / discussions held to cover all main areas of the repair process. In order to facilitate efficient decision-making and effective change management of the required IT updates, we recommend a more formal project management approach is applied to the group's remaining work.

Making homes and lives better

9. Damp and Mould

Current position:

A "to be" Working Group has been created to scope out a "to be" process for damp and mould in the West, with the aim of harmonising this across Group as far as possible whilst accounting for differences in the operating systems and structures across all 3 areas.

West	South	East
• A revised "to be" process map is being prepared following a series of workshops / discussions with My Repairs, CFC, IT and City Building. • A number of areas are still to be considered and solutions agreed to address pain points identified in the current process. These are captured in an Action Plan on Teams with owners assigned to address. • Internal Audit has provided areas for consideration when developing and moving into the implementation stage of these agreed process changes.	• The South have reviewed their damp and mould process which was implemented in January 2023. This is an interim measure and learnings will be taken from the "to be" Working Group and implemented where possible by the South. • Due to the South using Servitor, there are a number of differences that cannot be fully aligned. In these instances, operational processes may differ but overall reporting outputs/aims of the process will be aligned.	• The East are planning to move on to Servitor systems from their current Genero system in late Summer 2023. • As this work is planned, we have assumed that any issues raised in this review for the current system will be addressed during this change, rather than requiring specific actions immediately.

9. Damp and Mould

Areas of good practice

ü The Group has been proactive to its response to damp and mould and several workshops have been held to understand the existing damp and mould processes, with mapping of "pain points" and opportunities for improvement within the "to be" process.

ü A MSTeams site has been set up for the "to be" process working group where all workshop discussion documentation is saved, alongside an action tracker for outcomes of these meetings.

ü The Director of Group Repairs, Investment and Compliance has facilitated a self-assessment of the Group's damp and mould approach against the good practice measures included in the English Housing Ombudsman's guidance 'Spotlight on damp and mould' published in February 2023. The results were reported to the Group Board in March 2023.

ü Internal Audit reviewed good practice damp and mould guidance, jointly published by the Scottish Housing Regulator, the Chartered Institute of Housing, the Scottish Federation of Housing Associations and the Association of Local Authority Chief Housing Officers and found the Group's procedures follow the majority of the good practice outlined, with the small number of remaining good practice being included in the "to be" process working group's action plan.

ü Executive Team and Boards receive regular updates from the working group on damp and mould about progress in developing the revised process and current case numbers.

9. Damp and Mould

Opportunities to Improve – all actions agreed with management

Priority Actions

Ø The damp and mould working group should introduce a formal project management approach, for the design and implementation stages of the "to be" process. *(due 31/05/23)*

Ø Current damp and mould performance reporting is reliant on manual review of damp and mould cases, based on job works descriptions. This manual process increases the risk of error. Work to automate reporting should be prioritised. *(due 31/10/23)*

Ø Detailed decisions about how a repair moves from one stage of the process to the next should continue in order to allow a standardised approach to be developed for the Group. This includes factors such as agreeing how performance against the 48-hour target for an initial visit will be measured, the point at which work arising from initial treatment is complete and when a follow-on work order should be used. *(project plan to be developed by 30/06/23 to address these matters)*

Ø A mechanism for flagging damp and mould repairs that have had two "no access" appointments, prompting use of the forced access procedure, should be developed. *(due 31/10/23)*

Continuous Improvement Actions

Ø Relevant staff should be reminded of the importance of completing the damp and mould eLearning module released in February 2023. *(due 31/05/23)*

Ø Work to develop automated routine damp and mould reporting should be progressed, with consideration of operational reporting, performance management information and more strategic reporting. *(due 31/10/23)*

Ø An equalities impact assessment should be completed to inform the design of the "to be" process. *(due 31/10/23)*

Ø Damp and mould complaints reporting should be expanded to include feedback from other sources and to facilitate lessons learned exercises. *(due 31/10/23)*

Ø The working group should review the remaining continuous improvement actions identified in this report to confirm that they are included in the group's action plan. *(inclusion in project plan 30/06/23, actions completed by 31/10/23)*

Report Conclusion

Prior to April 2020, management completed a series of local checks to confirm compliance with key procedures. The introduction of home-working across the Group as a result of COVID-19, resulted in some of the compliance checks being suspended. As the Group moved back to a full service-delivery model, the way in which services are now delivered has changed significantly for many teams across the Group. As a result, the compliance checks previously completed may no longer be the most effective way to assess compliance with current or planned procedures.

The Internal Audit team was asked to review the status of legislative compliance ("compliance") checking across the Group. The team has developed a staged approach, to be rolled out in phases across the Group. There are 3 stages: 1) Internal Audit review of compliance areas; 2) Management review and identification of additional compliance checking; 3) Design and roll-out of updated compliance checking.

During the most recent phases, the Internal Audit team worked with Development, Repairs, Wheatley Foundation, W360, Health and Safety, and Assurance management to complete Stage 1. This involved mapping areas in which the Group is required to comply with legislation or regulation; assessing the potential consequence of any failure to comply; and identifying existing or planned compliance checking that would provide assurance about the extent of compliance. The work completed to date has identified some areas in which management should consider whether additional detective controls need to be implemented to give management comfort that key processes are working effectively and identify any instances of non-compliance.

- For **Development**, the Microsoft Power Automate App should be used consistently across all Development projects to gain assurance that key documents and consents have been obtained and all required actions taken within required timeframes. There are also opportunities to consider the effectiveness of arrangements to mitigate the risk of bribery and corruption in the Development process and formalise the communication of planned disposals or and demolitions. A new role of Construction (Design & Management) Regulations 2015 (CDM) Advisor has been included in the Technical Consultancy Framework due to go live in February 2023 which will provide additional assurance that Development projects are adhering to health and safety procedures, including the changes to the CDM Regulations 2015. *(contd)*

Report Conclusion (contd)

- For **Repairs**, management should review arrangements in place to identify instances where Right to Repair timescales have not been met. Right to Repair applies to certain types of qualifying repair work costing under £350, with legislation setting out timescales for the completion of the work and, where timescales are not met, the payment of compensation of between £15 and £100 dependent on the length of the delay. Management should also consider developing a formal repairs quality framework that will assess both the quality of repairs being carried out and the quality of material being used and supplied to the Repairs Services. Wheatley Homes East and South repairs management should complete their review of trade operative skills assessments, documenting this on a central skills matrix.

Management comments and timescales

Management has advised that the recommended areas for improvement of controls within Development processes will be reviewed and actions implemented by 30 June 2023.

Management has acknowledged there may be instances where Right to Repair timescales are not met and tenants are able to invoke their Right to Repair. A new monitoring process will be included in our new repairs performance framework.

Quality issues with repairs can be picked up through several routes including the customer pulse surveys, post inspections including 100% of all damp and mould works, customer views through the feedback cards, CFC call backs and most importantly through the creation of the My Repairs team and will be further enhanced through introduction of the "Rate It" approach

These recommended actions will be completed by 31 March 2023.

Responsible Officer: Group Director of Assets and Repairs

Report Conclusion (contd)

- For **Health and Safety**, management has a control framework place to detect Health and Safety and fire safety legal and regulatory compliance requirements in the workplace. These are captured in a Register of Health and Safety Legal Compliance, which was developed by the Health and Safety team in advance of this compliance mapping exercise. We noted one additional planned control for the team relating to the roll-out of Manager-specific Health and Safety training from April 2023.

- For **Assurance**, Management should consider reviewing the controls in place to promote compliance with Money Laundering regulations to confirm whether additional controls are required to detect any instances of suspicious activity that should be reported. Management should re-clarify the extent to which money laundering regulations apply to the Group's activities by obtaining external legal advice about which (if any) of the Group's activities are regulated for money laundering purposes.

- **For Wheatley Foundation**, Management should consider introducing checks to confirm that all required charity information is published on its external documents, including where this is done on the Foundation's behalf by Wheatley Solutions teams. Similarly, while there are arrangements in place to manage the retention of documents held by the Foundation team, additional controls could be introduced to give management comfort that these processes are being applied consistently. The planned creation of a Funding Register will give management comfort that all grant requirements are known. Additional controls could be implemented to confirm the register is kept up to date and that all recorded requirements are met. The Foundation is also currently working with Governance to review the arrangements the Foundation has in place to meet its Equality, Diversity and Inclusion (EDI) requirements. Additional controls may be required to ensure that Equality Impact Assessments have been completed for every new or changing policy, process or service which has the potential to discriminate against anyone, or negatively impact on a particular group. The draft compliance map on the next slide provides further information.

Report Conclusion (contd)

- For **Wheatley 360**, the work completed to date has identified areas in which management should consider whether additional detective controls need to be implemented to improve oversight of the extent to which customer safeguarding procedures are implemented by frontline staff. Additional detective controls may also increase confidence that staff have the correct training and knowledge to report concerns witnessed in Wheatley communities; and in the Group's reporting to external agencies/bodies. The draft compliance map on the next slide provides further information.

The Internal Audit team also followed up the status of the 11 business areas completed during 2022/23 and, for those at stage 3, management was asked to advise of the status of previous 'planned' controls activity or where it had been identified there was 'no controls' in place to manage legal and regulatory compliance requirements. Four compliance maps had reached Stage 3: Housing, Technical, Care and NETs. In each case, management had reviewed the controls in place, and considered changes required to those processes where there were no detective controls in place. For Care, Technical and NETs, additional controls have been introduced. For Housing, additional monitoring of exception reports has been introduced as an interim measure, pending a Housing-wide review of assurance checks to be completed by the Business Improvement Team.

12. Data Analytics - Wheatley Care review

Summary of work performed

The Internal Audit team has developed a planned approach to produce continuous analysis of SSSC registration compliance. Areas for analysis have been agreed to improve efficiency of Care management checks and testing methods have been confirmed and cross-checked with Care's own analysis. An IDEA script has now been created and shared with the Care Performance Team to automatically run this analysis on the areas identified below. This will improve the efficiency of these checks by allowing analysis and review to take place within the Care Performance team, removing the need to align with Internal Audit team resource availability.

Registration

- New starts not applied to register with SSSC within 4 weeks
- Staff with registration condition due to expire within the next year
- Registrations due for renewal in next month
- % staff registered with SSSC within first 6 months

Annual Fees

- Staff with overdue annual fees
- Annual Renewal Fees due in next month

Qualification Requirements

- % of relevant staff compliant with SSSC qualification
- % of staff with a registration condition currently working towards a qualification

Analytics covering these areas have been completed using data obtained for the months of October 2022 to March 2023. Results have been returned to the Care Services Innovation and Improvement Manager to review any exceptions noted. No significant issues were identified from the exercise.

Care Performance team will run the IDEA script from April 2023 onwards. Internal audit will assist where required during this initial period.

Summary of work performed

There are no exceptions to highlight to the Group Audit Committee. The Internal Audit team has developed a planned approach to payroll testing that identifies those controls to be tested through development of continuous auditing and those where a periodic testing approach remains more appropriate. We have confirmed the operation of the controls through a walkthrough test and have started development of the continuous audit testing scripts.

Using the data available for Q3 and Q4 2022/23 we have used IDEA to confirm:

1. There are **no duplicate employee numbers being used** (across all payrolls)

2. We identified **21 (Q3) and 19 (Q4) duplicate bank account numbers in use** (across all payrolls). These were matched to the annual remuneration reports and HR spreadsheet of changes and most are clearly joint accounts, with the remainder relating to a change in role or employment status.

3. We identified two individuals who are each employed in two roles and each received payments from two different payrolls during Q3. We have confirmed with the payroll team that these are staff who have been appointed to an additional relief role in addition to their existing role within a different Subsidiary.

4. Our testing confirmed that **none of the duplicate bank accounts belong to Payroll staff**.

5. There were **29 (Q3) and 22 (Q4) employees who received no Gross Pay in a payroll run** during the quarter under review. These relate to leavers, staff on maternity leave, staff on long term sick and some relief staff. We have confirmed with the payroll team that this is due to the nature of the contracts in place for these staff members.

Summary of work performed

The accounts payable analytics performed this period considered purchase card transactions during July to September 2022 and then October to December 2022. We also reviewed faster payments made in the same period. The tests completed included analysis of purchase card transactions to identify i) transactions over £1,000, ii) spend that was not coded, and iii) spend that did not have attached receipts. For faster payments, we i) matched the transaction list against a list of IPOS suppliers and ii) summarised the data to identify suppliers to whom we had made 2 or more faster payments.

Both the purchase card and faster payments analyses identified exceptions that indicate financial procedures are not operating as expected across the Group. Exceptions are shared with Finance management to investigate planned actions, including updating the Purchase Card Procedures and reducing the number of staff authorised to make cash withdrawals using Purchase Cards, are in progress..

To seek further detail on the repeating exceptions and the overall control structure in place around financial procedures, Internal Audit will plan a detailed review of accounts payable. This will allow identification of control improvements required to address these exceptions and strengthen the Group's controls over expenditure. Internal Audit plans to conduct this review in August/November 2023, after external audit of the accounts is completed, to reduce unnecessary pressure on Finance resource capacity.

We will continue to work with Finance staff to develop the continuous auditing of purchase cards and faster payments.

Group-wide action status at 31 March 2023

As at 31 March 2023, 22 of the 38 actions followed up have been confirmed by Internal Audit as complete. There are 6 actions where the completion date is not yet due.

There are 10 overdue actions, 4 of which relate to the Scottish Government Net Zero Grant Compliance audit. Work is in progress to fully implement the remaining actions, which are dependent on the progress of the three projects supported by the grant. A further 4 Digital Maturity Assessment actions are dependent on the approval of the Group's 2023/24 Delivery plan. The remaining overdue actions relate lessons learned from HR self service pilot study, and an ongoing review of user resource and network access from the ITGC review.

Review	Overdue actions	Revised due date
Net Zero Grant Compliance	4	31 July 2023
Digital Maturity Assessment	4	30 April 2023
HR Self Service	1	TBC
ITGC	1	31 August 2023

Status	Actions
Actions brought forward from 31 December 2023	9
New actions agreed	29
Total Actions followed up	38

The chart below summarises our assessment of the status of the 38 actions followed up this quarter.
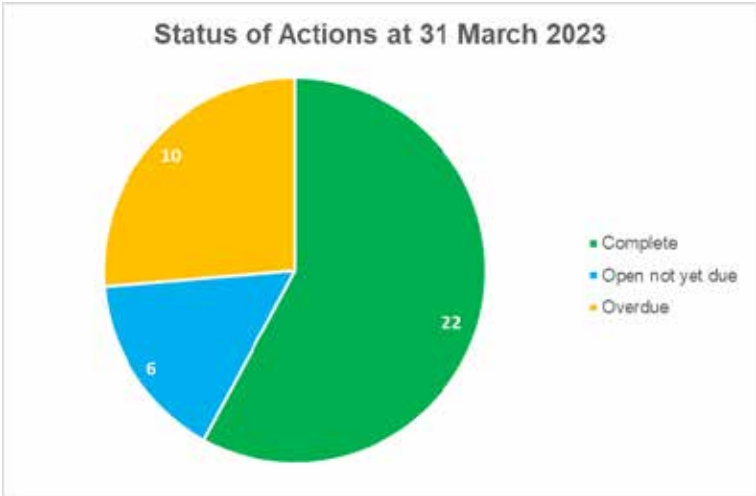
The graph on the next slide shows the status of the actions we followed up by review.

Wheatley Group Action Status
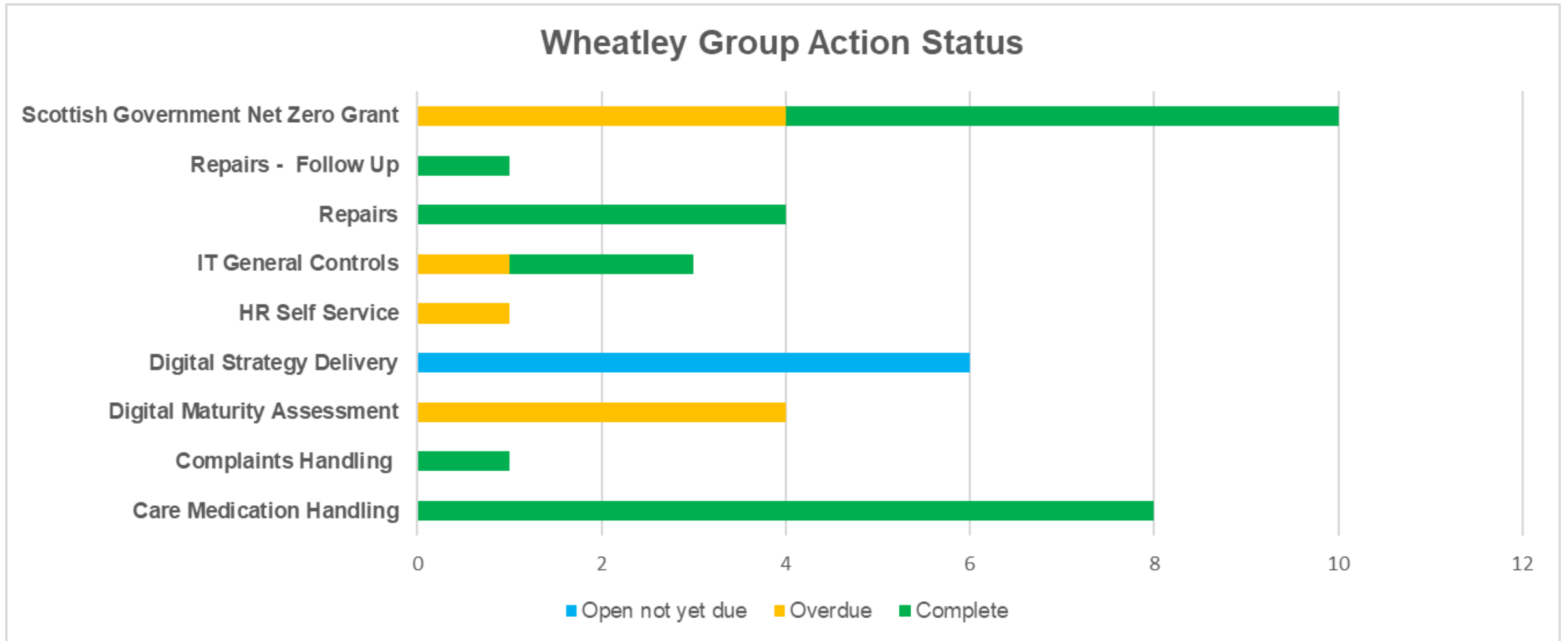
Internal Audit Rolling Plan

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Development of the Internal Audit Plan

Identification of internal audit areas of focus

As previously agreed by the Group Audit Committee, the Internal Audit team has reviewed the rolling plan during the current period, as indicated by the diagram below.

This has resulted in identification of areas of audit focus over a rolling 12-month period (see slide 3), from which reviews for the next period have been prioritised (see slide 7), for approval by Committee members.

The following slides detail the current list of Internal Audit Areas of Focus for the next 12 months. The plan is updated prior to each Group Audit Committee meeting to reflect the Internal Audit team's review, as follows:

Red font

- Reviews which have been added to the plan, amended, or deleted as no longer applicable

Blue font

- Proposed reviews for the next three months

Black font

- No changes

The plan also identifies other significant pieces of work undertaken by the internal audit team, including facilitation of the Group risk management process.

Internal Audit Areas of Focus

The following details the identified areas of audit focus over the next 12 months. This list (along with any new areas of focus) is used to identify reviews to be prioritised each quarter, for approval by Group Audit Committee. The areas of focus will also be reviewed quarterly. The areas highlighted in blue italics are proposed for the next three months. Areas reviewed during the previous 12 month period are shown on slide 5.

Operational Process

- Treasury & Cash management, including covenant reporting
- Procurement: Use of Supplier Frameworks
- Procurement: Contract Management System implementation
- Amended Lets
- ASB Framework
- Capital Investment Programme
- Supply chain management
- Iworld / Astra application review (joint review)
- Cyber security – Ransomware response
- Money and Fuel advice

Regulatory Focus

- Sustainability – reporting requirements
- Factoring income
- Management of commercial properties
- Policy framework
- Equality, Diversity & Inclusion
- Housing standards - EESSH 2 compliance
- Data Protection (external review)

Strategic Change

- ~~CFC operating model~~
- New Build Programme: locality planning, portfolio additions, development pipeline, project management
- Community Engagement, inc tenant involvement and consultation
- Data Strategy implementation / delivery
- Repairs "track it" implementation/ lessons learned
- Sustainability Strategy delivery
- Incident and change management
- Cloud telephony project
- MyVoice implementation

Management Focus

- *MyAcademy, including new MyContribution process*
- *New build programme – securitisation process*
- Wheatley Care Recruitment and Induction process
- NETS mobile app
- *City Building Glasgow Co-ordination Group*
- Wheatley Homes – South Repairs
- Organisational and operational resilience

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Potential Continuous Auditing Areas of Focus

In addition to the areas of audit focus for the next 12 months that have been laid out on the preceding slide, we have identified areas in which there is potential for the development of a continuous auditing approach through data analytics.

- *Blue italics:* we will work with management to understand the data available, including whether it meets our required data quality criteria, and conclude on whether it is possible to develop a continuous auditing approach.

- Green font: areas in which continuous auditing has been implemented. A summary of the testing undertaken will be included in the quarterly Group Assurance Updates.

Finance
- Faster payments
- Purchase Cards
- Supplier payment dates
- Purchase to pay process

Housing & Property Management
- Rent analysis:
  - Credits against rent accounts
  - Voids
  - Allocations
  - Amended Lets
  - Local compliance checks
- *Complaints analysis*

Governance & Business Solutions
- Power Bi reports
- Utilities analysis
- Non-contract spend
- IT user access – starters / leavers / movers

Assets & Repairs
- Repairs data – various
- Health & Safety data
- Fire safety
- Technical compliance
- ESG reporting

Communities
- Care training records
- Here for You reporting development
- Foundation use of funds
- CFC data handling

Chief Executive
- Payroll
- Expenses
- *My Academy employee records*

The following details the areas of audit focus that have been reviewed during the previous 12-month period.

Operational Process

- Accounts payable: Purchase Cards, Faster Payments, IPOS
- Complaints Handling
- Voids management
- Care Financial Management
- IT General Computer Controls

Regulatory Focus

- Legislative compliance mapping advisory review
- Lowther: Follow up of Improvement Actions implementation
- SHR Assurance Statement
- Medication handling protocols
- Health & Safety – Lone working

Strategic Change

- Strategic Change oversight arrangements
  - Customer Engagement model
  - DGHP Transformation Programme
  - Repairs Transformation Project
- Cyber Security
- Digital Maturity Assessment
- Digital Strategy Delivery

Management Focus

- Wheatley Care Data Analytics
- Repairs follow up
- Cost of Living / Wrap-around services
- Scottish Government Net Zero Grant requirements
- HR self service preparedness review
- Repairs service (Damp and mould)
- RSL records managements

Continuous Auditing

- Purchase cards
- Faster Payments
- Payroll
- Wheatley Care data analytics
- Here for You fund (development of management reporting)
- Lone working - Orbis user data

Legislative compliance mapping advisory review

Timeline Phases

We have been working on the mapping of areas where legislative compliance is required across the Group since the beginning of the financial year. The chart below summarises the areas reviewed to date and the planned timetable for the remaining areas.

Phases 1 - 4 (completed Aug 22 – May 23)
- Housing
- Care
- Technical
- NETS
- Lowther
- CFC
- Repairs
- Development
- H&S
- W360
- Foundation
- Assurance

Phase 5 (Aug 23)
- Complaints
- IT
- Payroll
- Treasury

Phase 6 (Nov 23)
- Financial Reporting
- Legal Services
- Human Resources

Phase 7 (Feb 24)
- Governance
- Organisational Development
- Strategy & Performance

Phase 8 (May 24)
- Procurement
- Assets & Sustainability
- Comms & Marketing

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IA Plan for next period

Review	Relevant Strategic Risk	Proposed scope
Compliance checking advisory review (phase 5)	RISK016 – Laws and regulations	We will continue our mapping of existing legislative compliance checking across the Group, focusing in the coming period on IT, Treasury, Payroll and Complaints.
New Build Securitisation	RISK008 – Compliance with funder requirements	We will review the new build securitisation process to assess the extent to which controls in place to confirm that all documentation required to securitise new build properties is in place at the point of handover.
MyAcademy	RISK015 – Failure to recruit, develop, retain and succession plan	We will review MyAcademy to assess the extent to which the new MyContribution process embedded within MyAcademy has been implemented by teams across the Group. We will also review controls in place to confirm the completeness and accuracy of standing data within the system, including updates for joiners, movers and leavers; training required for job roles and training completion certificates.
CBG Partnership Oversight Board assurance	RISK006 – Customer satisfaction	We will set aside time support the CBG Partnership Oversight Board.

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The Internal Audit team will also allocate resources to the following work, which does not relate to specific risks within the Strategic Risk Register.

Review	Proposed scope
Data analytics	We will complete established quarterly reviews of payroll data, Wheatley Care staff qualifications, and purchase card expenditure. During the review of My Academy we will investigate the potential for developing continuous auditing checks in these areas. We will also introduce an IDEA support group for IDEA users to share good practice and maximise usage across the Group.
Follow-Up review	Quarterly follow-up exercise
Risk Management	Facilitation of the quarterly review of risks across Group, including quarterly reporting to Subsidiary Boards, Group Audit Committee and Group Board. We will also hold risk workshops with Subsidiary Boards during May and June 2023.

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