

Plymouth Community Homes Board Board Room, Plumer House and Microsoft Teams 9 February 2023 at 5pm

Present in person unless stated:

Valerie Lee (VL) Chair Debbie Roche (DR) (Vice Chair) – Virtual Lavinia Porfir (LP) Liz Nicolls (LN) Valerie Lee (VL) Graham Clayton (GC) Tasawar Nawaz (TN)- Virtual Maja Jorgensen (MJ) Julie White (JW)

In attendance:

John Clark (JC) Chief Executive Nick Jackson (NJ) Director of Business Services and Development Charlotte Edwards (CE) Head of Strategy, Performance and Policy Andrew Lawrie (AL) Head of Development- Part John Rees (JR) Head of Finance – Virtual -Part Leanne Eastwood (LE) Governance Officer – Minutes James Hancock- Risk Manager- Part Mary O'Leary- Head of Communications Helen Ryan- Head of Communities and Supported Housing. Steve Ford-Head of Neighbourhoods Keith Harris- Health & Safety Officer- Virtual – Part Tina Sokhal- Altair – Observing Eugene Potter- Head of Digital & Information Technology – Virtual -Part

Apologies:

Jill Gregg (JG) Gill Martin (GM) Director of Corporate Services Lucy Rickson (LR) Head of Governance Sally Haydon (SH)

1.	Welcome and Introductions	
	The meeting started at 4:58pm	
01/02/23	VL welcomed everyone to the meeting which was confirmed as quorate.	
	All Board members had been given the opportunity to ask questions in	
	advance via email with responses being circulated to all members ahead	
	of this meeting and attached as an appendix to these minutes.	

2.	Apologies for Absence	
02/02/23	Apologies for absence had been received from JG, GM, LR, & SH.	
^		
3.	Declarations of Interest	
03/02/23	The guidance on declaring an interest was noted; there were a number of standing declarations. No further declarations had been received	
4.	Minutes of Previous Meeting: 24 November 2022	
04/02/23	The minutes from the meeting on the 24 November 2022 were discussed, and it was confirmed that the minutes were a correct record of the meeting and that they could be electronically signed by the Chair.	
5. 05/02/23	Matter Arising – Min number 20/11/22 referred to the Risk Appetite being reviewed at the Board away day. Consideration to be given how this is approached now that risk is embedded in the event rather than a separate session.	VL
6. 06/02/23	Minute Action Log- The Minute Action Log was reviewed and discussed. While no changes were made VL & LE would discuss format moving forward and the inclusion of further progress where applicable outside of the meeting.	LE/ VL
7. 07/02/23	Decisions since last meeting- There had been no decisions since the last meeting.	
8. 08/02/23	Briefing Papers – There had been three briefing papers since the last meeting – Sector risk profile, Governance Review & Away Day Agenda.	
9 09/02/23	Chair's Urgent Business- There was no Chair's urgent business.	
10	Committee Minutes Circulated	
10/02/23	The minutes from the following Committee meetings were included for reference: • PCH Regeneration 18 October 2022 • Development committee 17 November 2022 • Customer Focus Committee 4 November 2022 • Audit & Risk 17 January 2022	
11	Audit & Risk Committee 17 January 2023 Chair update including items for approval at this meeting:	

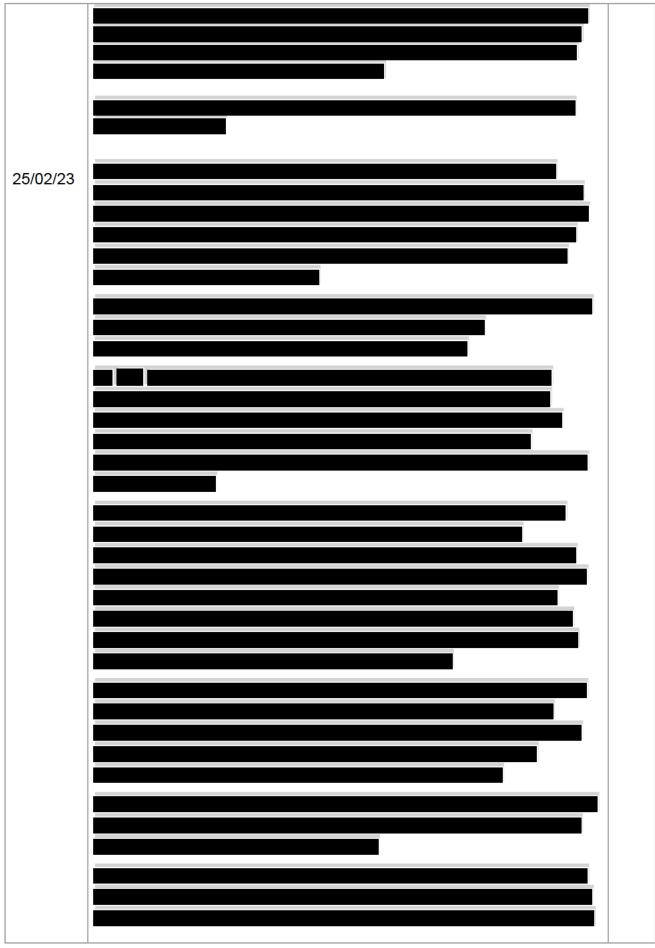
11/02/23	LN provided an update to the Board on the last meeting, this included the H&S Report and Strategic Risk Register which were being brought to Board tonight, both of which the Committee have reviewed and were recommending for approval/noting.	
	The Committee had been presented with Internal Audit outcomes and on reviewing the internal audit actions report were assured to see that only 6 of the 29 recommendations we left to be completed before the financial year end.	
	KPMG had presented the 2022/23 considerations report which highlighted that this year PCH's Financial Statements would be assessed against the new international accounting standards (UK) 315 (Revised). It has also been explained to the Committee that KPMG's charges for the year would increase due to inflation. Since this was presented a reduction in the fee had been negotiated.	
11.1	Health & Safety Annual Report	
	· · ·	
12/02/23	KH Health and Safety Manager provided the Board with an overview of Health and Safety performance across Plymouth Community Homes 1 st January 2022 – 31 st December 2022 which had been scrutinised and recommended to board for approval at the Audit & Risk committee meeting on the 17 January 2023	
	The Audit & Risk Committee requested some additional information at its meeting which has been included in the revised report which now contained the following:	
	 a. Full 12 months incident data (including Dec 2022) b. Comparisons to previous years (ARC minute number 19/01/23) c. Additional section 5.0 to include any interaction / enforcement action with the HSE d. Changes in the report have been highlighted in yellow for ease of reading. 	
	e. Appendix E contained the additional December incident analysis	
13/02/23	As a result of questions, the following was discussed and clarified:	
	While there were increases in the number of incidents reported - it should be noted that these were for minor incidents or near misses. This illustrates our staff's increasing confidence in reporting H&S incidents, taking personal responsible for the safety of others. It also shows that we have the right processes in place to deal with and identify H&S risk at a lower level reducing the risk of serious harm to our staff and residents.	
	The Board discussed in detail the increase in verbal abuse incidents for 2022 with 37 incidents being report across the organisation. Assurance	

	-
	was given that we do not tolerate any form of abuse or threats to staff or residents - staff are trained and supported on how to reduce conflict and how to raise the alarm should an incident take place.
	While the number of incidents reported had increased since Covid it wasn't felt that this was an emerging trend as they were all low-level minor incidents - the type of exchanges that staff have often experienced when being subjected to Anti-Social Behaviour and conflict in their day to day role. The awareness training that staff will have received is helping us to manage these incidents effectively and encourages staff to report incidents which has contributed to the rise.
	There are a number of safeguarding measures in place to protect staff from residents who make persistent or high-level threats – these include Risk Alert Panels, ensuring that staff only visit in pairs and informing the resident that their behaviour will not be tolerated and that they are breaching their tenancy agreement.
	PCH takes a multi-agency approach when dealing with any reports of abuse including verbal, physical domestic, financial and has robust measures in place to support staff when reporting or dealing with incidents of this nature. We regularly signpost our resident to support through interactions with our staff, social media campaigns and on our website.
14/02/23	The PCH Board:
	 Approved the updated Health and Safety policy. Agreed that the Audit and Risk Committee continues to receive annual health and safety performance report for approval.
11.1	Strategic Risk Register
15/02/23	JH, Risk Manager provided the updated Strategic Risk Register for the Board's approval. The register has been scrutinised at the most recent ARC meeting on the 17 January 2023 and the changes to the risk scores were highlighted with four increasing and two going down.
16/02/23	The PCH Board approved the updated Strategic Risk Register.
12	Development Committee 2 February 2023 Chair update including papers for approval at the meeting: Redacted as Commercially sensitive.

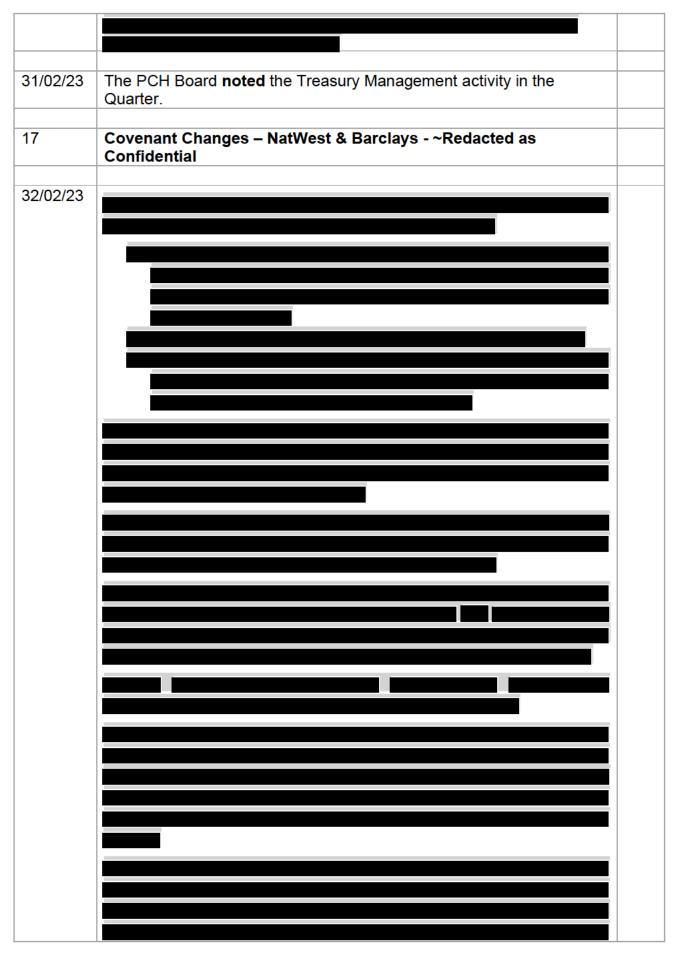
12.1	– Redacted as Commercially Sensitive.	
18/02/23		
19/02/23		

12.2	Development Programme KPI's	
20/02/23	AL, Head of Development presented the Development update and KPI report which enable the Board to monitor progress across all Development Programmes. The report highlighted property completions, pipeline schemes, progress against the 2020-2025 development programme and an overall portfolio summary detailing the total number of homes to be built on schemes and those built since 2009.	
21/02/23	The PCH Board noted the Development Programme & KPI's.	
13	PCH Regeneration Board Chair's update 24 January 2023- Redacted as Commercially Sensitive	
22/02/23		

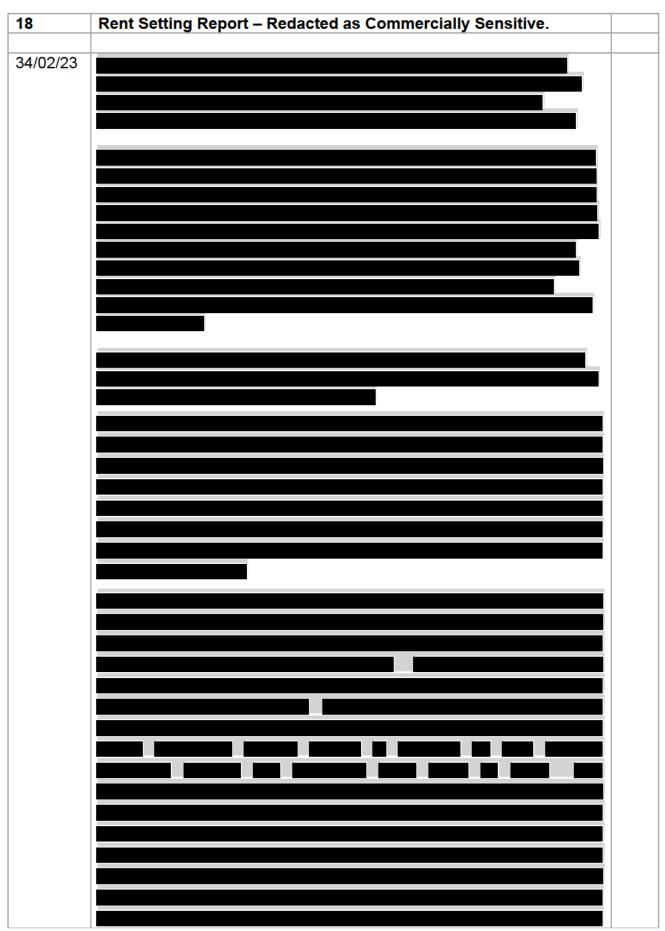
14	Customer Focus Committee Chair's update 3 February 2023.	
14	Customer rocus committee Chair's upuale's repruary 2023.	
23/02/23	LP as Chair of the Customer Focus Committee gave her review explaining that they had received an update on the review of the scrutiny process which will be coming back to CFC in May for approval. This was the first meeting with the two new CFC Co-optees bringing the number up to 4. The Committee had also received an update on the review of Stigma from Campbell Tickell which the Committee felt was lacking in content and did not give an accurate reflection of PCH; the Committee provided that feedback to the lead officers. After the meeting the group had a briefing on the Ombudsman's updated Complaint Code from Angie Edwards-Jones which will be uploaded to Convene for you all to read. There will be further training for Board member in March on complaints.	
15	Management Accounts – Redacted as Sensitive	
24/02/23		



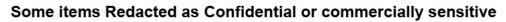
26/02/23	Questions were raised regarding this item ahead of the meeting which were attached as an appendix.	
27/02/23	It was noted that since the writing of the report we have now received confirmation that PCH Manufacturing Services Limited has been completed closed.	
28/02/23	The PCH Board noted the Quarterly Management Accounts.	
16	Quarterly Treasury Management Update Q3 – Redacted as Confidential	
29/02/23		
30/02/23		



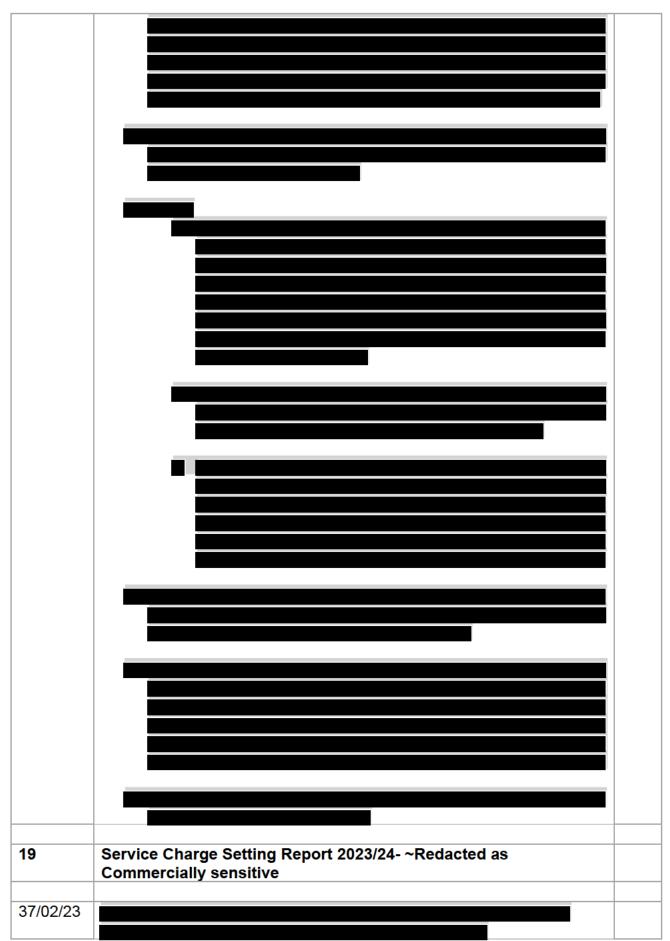
33/02/23	



	1
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	
35/02/23	



36/02/23	



38/02/23		
39/02/23		

20	Housing with Support – Support Charges- Redacted as	
	Confidential	
40/02/23		

41/02/23		
42/02/23		
42/02/23		
21	Tax Strategy	
43/02/23	 NJ, Director of Business Services and Development presented the report. The original Tax Transparency Strategy was approved at the Board Meeting in August 2015; this document proposes updates to the Strategy. The Tax Transparency Strategy proposed a consistent approach to how tax is managed within Plymouth Community Homes and its subsidiaries ("PCH"). It is important to ensure that consistent and effective tax standards are maintained across PCH as tax (both direct and indirect) can have a significant financial impact on PCH. The principle is that we firstly take business decisions for the right operational reasons and, as part of this, pay a fair amount of tax whilst using legitimate and accepted to reduce our tax burden as far as possible so that more money is available for investment in our core social housing activities. 	
44/02/23	The Board approved the updated Tax Transparency Strategy.	
22	Resident Engagement Strategy Monitoring	
45/02/23	 HR, Head of Communities and supported housing presented the report to the Board which gave them an overview of the work that had been completed over the past 12 months in terms of resident involvement. The paper also set out the many changes in the sector in terms of the regulatory environment including together with tenants along with the increase in demand from our residents for the involvement opportunities that we offer. 	
	With this in mind, it was proposed that we go back to the drawing board and redesign what resident involvement looks like for PCH so that we are focusing on the areas which bring the most benefit to our residents. We are looking at reshaping our priorities and utilising any external funding by working with other partners in the city.	

46/02/23	The Board noted the contents of this report and approved the proposed way forward for the Resident Engagement Strategy 2023 to 2026.	
23	Communication Strategy Monitoring	
47/02/23	MOL, Head of Communications presented the report to the Board which provided an update on delivering the Communications Strategy, which has been in place for one year having been agreed by Board in February 2022.	
	The Strategy gave a high-level view of what PCH is looking to achieve from its communications work and outlines the principles the business will use to guide communication and marketing efforts. It also explains how we will deliver, measure and check on our progress against the Strategy.	
	To briefly summarise, all of the Year 1 deliverables are now completed, and many of the Year 2 deliverables had also either been completed or are well underway. Some work has also started for Year 3 deliverables.	
	Many deliverables had been achieved primarily as a result of a restructure of the Communications and Marketing team carried out by the new Head of Service appointed in May 2022, with increased resource agreed for the team to strengthen and expand capacity for digital work, in line with the business plan objective for 'digital by design, access by choice'.	
	The body of this report looked in more detail at each of the deliverables and the actions completed to date, plus those planned for Year 2 and Year 3, and work in progress in those respects	
	Given the progress made to date, the Board are advised that PCH is on track to deliver the full Communications Strategy by 2025.	
48/02/23	The PCH board noted the Communications Strategy annual monitoring.	
24	Digital Strategy	
49/02/23	EP, Head of D&IT presented the Board with an update on the existing Digital Strategy and the progress made over the past 12 months. The Digital & IT Strategy had not changed since 2021/22 and was a continuation of the existing themes and drivers: Key themes and drivers which included:	
	Digital by default, access by choice	

	 Move to cloud based 'as a service' solutions (the PCH cloud journey) improving 'value for money', cyber security, risk management and capability Vanilla and standardised implementation/adoption (reducing levels of customisation, development and complexity) Prevent avoidable contact via channel shift and self-service (residents and staff) Improve digital workflows replacing paper/mandraulic processes/procedures improving staff efficiencies and service to residents Develop the anytime, anyplace, any device access and capability for staff and residents (improving flexible working, business continuity and disaster recovery capability) Remain secure, protected, resilient and fit for purpose (capability/capacity) Building on experiences and lessons learnt from previous implementations and deployments 	
50/02/23	As a result of questions, the following was discussed and clarified:	
	Cyber security and threats were constantly being assessed. It was really encouraging to see the number of staff who contact the D&IT team to check is something is a threat. The Cyber Security/Data Security training that staff have undertaken has increased their awareness and this would be extended to Board members. The workforce has become more mobile since the Strategy was set out and as such, we have ensured our disaster recovery is now mobile and cloud based rather than just being a physical entity. While the implementation of the Strategy would not give any direct	
	savings in technology budgets, it does support us to ensure that we are working more efficiently and improve digital workflows, for example replacing manual largely paper driven processes. We are digital by default, access by choice and are seeing a real increase in residents opting for the digital route, for example for the summer edition of In touch 25% of residents opted to have this digitally, this had increased to 50% by the next issue. We are finding that the majority of people want to get access to their information online. We have also increased the use of the tenant portal and now tenants can apply online using a full end to end process to secure a home. However work continues to increase capability and usage of the portal and other tenant facing applications.	
	Digital discussions will feature at the Board away day in March as part of the Strategic Business Plan deliverables discussions. The Board will be able to talk through some of the ways we can use digital transformation as an enabler for customer excellence and to improve cost efficiencies.	

51/02/23	The PCH Board noted the Digital Strategy annual monitoring.
25	Safeguarding Report
52/02/23	SF, Head of Neighbourhoods and HR, Head of Communities and Housing with Support presented the safeguarding report for the Board to gain assurance on safeguarding compliance. The report was the first annual report and describes safeguarding in the context of both Housing with Support and General Needs. The report sets out the procedure and processes that staff needed to follow when reporting safeguarding risks and included a
	comprehensive list of partnerships across the city. A summary of cases was also included showing the safeguarding categories including financial abuse, self-neglect, physical & psychological abuse along with trends and analysis.
	The final section of the report gave the Board information of how these services are audited and how they could gain assurance in these areas.
53/02/23	Questions were raised ahead of the meeting which were attached as an appendix to these minutes.
54/02/23	As a result of questions and discussion the following was clarified:
	This was a really important paper, and the Board were pleased to see it being presented on an annual basis. The report gave the Board a sound level of assurance and information on how this is obtained and maintained.
	Clarity was provided on the catagorisation which reflected those identified within the Care Act 2014. However there were other layers underneath this and moving forward further information would be provided on domestic abuse and race hate crime which are high profile within the city.
	Assurance was given that staff have had training on cuckooing and financial abuse and how this affects not just our residents but also the safety of our properties.
	The Board asked if it would be possible to understand some of the outcomes of the referrals; it was explained that often we do not know the final outcome as they are confidential to the resident.

55/02/23	It was discussed and agreed that next year the report would contain additional information on the categories of referrals, trends and outcomes that PCH have out in place as a result of these.	SF/ HR
56/02/23	Assurance was given to the Board that staff receive regular up to date safeguarding training relevant to their role. Board safeguarding awareness would also be picked up in the Board L&D Plan.	GO V
26	Q3 2022/23 Performance Report	
== 100 100		
57/02/23	CE, Head of Strategy, Performance and Policy presented the report to the PCH Board to give an update on performance for Q3 2022/23, which included an update on a range of building safety measures.	
	There had been an improvement in our repairs performance during Q3, with an increase to just under 94% of jobs being completed within timeframe; this was split between just under 98% for emergency jobs and over 91% for routine jobs.	
	There had been a slight reduction in the complaints and enquiries dealt with in timeframe to just over 99% which means that four complaints were responded to after ten days.	
	Void re-letting continues to be higher than target, however we continue to see a sustained reduction in the average number of days to re-let homes compared with the year-end position for 2021/22. The Q3 position now 35.33 days and the in-month position for December was 31.9 days. The Board were reminded that this figure would stay higher than target until the information is available for Q1 2023 were a truer figure would be reflected.	
	We are now using the finalised Tenant Satisfaction Measures (TSMs), which were proposed in the Social Housing White Paper, these were released in September 2022. As a result, several of the measure's definitions previously used for the Q1 report have been amended. Notably there has been a change in how the lift safety checks are now calculated which is at 71.65% for Q3. Clarity was provided that this related to one lift which was currently out of action and therefore the checks could not be completed. There was another lift available in this block which was in use.	
	Proportion of homes for which all required gas safety checks have been carried out stood at 99.98% at the end of Q3 which represents three properties overdue.	

	The percentage of homes with a valid 5-year electrical test reduced	
	slightly to just under 98%. There are asbestos management surveys or re-inspections for almost all of homes with the Q3 position at 99.95%. There are 8 properties	
	without a survey, of which 6 are those that transferred to us in Barne Barton.	
	The KPI for legionella shows that just over 87% of homes have a risk assessment, this includes homes where we choose to carry out an assessment in addition to those we consider required as per the HSE code of practice. The figure for minimum legal compliance i.e., just blocks of sheltered homes is 98.06%.	
	Rent arrears were within target and collection levels improved to 99.30% for the Q3 position both are better compared to this time last year and have improved since the Q2 report.	
	Affordable home completions are lower than the expected completion target for a variety of reasons but mostly due to slow delivery of S106 projects.	
	We have also seen an improvement in staff sickness absence, reducing to 8.27 days in Q3, although this is above the target of 8 days.	
	As a result of questions and discussions the following was clarified:	
	The report showed a number of properties without EPC's; clarity was provided that there have been EPCs carried out however as they were more than 10 years ago they are not included in the figures.	
58/02/23	It was discussed and agreed that further information would be provided to the Board to raise visibility of damp and mould cases. This would include further narrative on the number of reported cases and if we are meeting our policy commitments to inspect properties.	CE/ EM T
	It was also suggested that it would be helpful to understand the severity of the damp and mould cases that are being reported and if we are repeatedly returning to the same properties with the issue; how to report this would be considered by EMT.	
	The PCH Board noted the quarterly performance report.	
27	Vice Chair and Committee Chair Appointments	
59/02/23	VL, Chair of PCH Board, presented the report to the Board for approval of a plan for the appointment a Vice Chair to the Board and Committee Chairs.	

It was explained that the appointments to the roles of Vice Chair and Committee Chair are for 3 years, up to a maximum of 6 years; this may be extended where the Board determines it would be in the best interests of PCH. The current Audit and Risk Committee (ARC), Customer Focus Committee (CFC) and Vice Chairs' terms of office differ from the postholders' terms of office: • Vice Chair role expires 23 Feb 2023, Debbie Roche retires Dec 2023 CFC Chair role expires 1 Sep 2023, Lavinia Porfir retires May 2024 ARC Chair role expires 5 Nov 2023, Liz Nicolls retires Sep 2024 The Board has been through many changes, including a new Chair in November 2022 and 4 new Board members in summer 2022; we are also recruiting 2 independent Board members by March 2023 and 2 resident Board member this summer (and the second Council nominated space remains vacant). Therefore, it is important to keep stability in the Vice Chair and Committee Chair roles during 2023. This situation has been discussed with the Chair and this report proposes a way forward that balances Board stability with short extensions of role terms. The proposal is to extend the current postholders of Vice Chair and CFC Chair until 5 November 2023 (to coincide with the ARC Chair role expiry date). We will recruit to the Vice Chair, ARC and CFC Chair roles from existing Board members using this proposed timetable: • By Jul - role profiles updated and approved by Board Jul/Aug – start discussions at Board appraisals • Aug – written expressions of interest requested and short interviews held by PCH Board Chair and Vice Chair/Board member • Sep – confirmation of appointment Oct/Nov – induction and shadowing 6 Nov 2023 – start of appointments Jan/Feb 2024 – first Committee meetings chaired by new postholders If no suitable candidates step forward, we will discuss options with the PCH Chair (i.e. further extension or interim appointment) and bring these back to Board. Current postholders have been consulted on these proposals and are happy to proceed as outlined in the report.

The future annual Board member succession plans will include the terms of office for Chairs and Vice Chair.

60/02/23	The PCH Board APPROVED:
	 extension of Debbie Roche as Vice Chair from 23 February 2023 to 5 November 2023 extension of Lavinia Porfir as Chair of the Customer Focus Committee from 1 September 2023 to 5 November 2023 internal recruitment to the Vice Chair, ARC and CFC Committee Chairs as outlined in the report
28	Social Housing Regulation inc. PCH Annual Regulatory Judgement
61/02/23	JC, CEO, presented the report to the Board explaining that the Social Housing (Regulation) Bill will give tenants greater powers, improve access to swift and fair redress, and enhance the powers of the Regulator of Social Housing (RSH).
	This report provided an overview of the Bill and assurance that PCH is proactively preparing for the new legislation and regulation. The changes will mainly impact the Consumer Standards published by RSH.
	As a community-based landlord that puts residents at the heart of decision-making, PCH is well placed to adapt to the changes. However, we cannot be complacent and our EMT and SMT will work together to meet the specific measures and overarching aims of the changes.
	Also, the Board was notified of the RSH review of our governance and viability gradings in November 2022. Our G1 (highest) for governance has been confirmed and we have been re-graded as V2 (second highest) for viability.
62/02/23	Questions were raised ahead of the meeting which were attached as an appendix to these minutes.
63/02/23	 The PCH Board: 1) NOTED the G1 and V2 RSH regulatory judgement 2) NOTED the remainder of the report
29	Forward Plan
64/02/23	The Forward Plan yearly overview was noted by the Board.

Signature..... Valerie Lee – Chair

Date

Certified as a true copy Lucy Rickson, Head of Governance

Date.....