



Doncaster Council

Report

Date: 16 March 2022

To the Chair and Members of the Cabinet

St Leger Homes of Doncaster Ltd (SLHD) Performance & Delivery Update: 2021/22 Quarter Three (Q3)

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Councillor Glyn Jones, Deputy Mayor and Cabinet Member for Housing and Business	All	None

EXECUTIVE SUMMARY

1. As part of the Management Agreement and governance arrangements for SLHD, an Annual Development Plan (ADP) is produced in agreement with Doncaster Council (DC) officers, the Housing Portfolio holder and the Mayor. The ADP identifies the key deliverables, outcomes, milestones and performance measures. Part of the agreed governance framework is a quarterly report of Key Performance Indicators (KPIs) to Cabinet.
2. This report provides an opportunity to feedback on:
 - 2.1. performance successes and challenges against the 2021/22 Key Performance Indicators (KPIs); and
 - 2.2. the Value For Money (VFM) Statement for the financial year ended 31 March 2021 (2020/21).
3. Seven of the fifteen KPIs measured were met or were within tolerances as at the end of Quarter 3 2021/22 (31 December 2021). Commentary appears below.

EXEMPT REPORT

4. This report is not exempt.

RECOMMENDATIONS

5. That Cabinet :
 - 5.1. note the progress of SLHD performance outcomes and the contribution SLHD makes to supporting DC strategic priorities; and
 - 5.2. accept SLHD's VFM statement for the financial year ended 31 March 2021 (2020/21).

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

6. As this report includes the current progress on the SLHD performance indicators, the implications of the contents may ultimately affect the delivery of services to the people of Doncaster.

7. BACKGROUND

- 7.1. **Appendix A** contains the SLHD 2021/22 KPI summary for Q3 2021/22. Commentary covering the performance against all indicators is provided below.
- 7.2. Targets and measures were reviewed with DC officers and elected members prior to the start of the financial year. KPIs were agreed with DC and there are now 20 KPIs for 2021/22 :
 1. two are measured quarterly – residents supported in training and residents supported in employment;
 2. four are measured annually - STAR survey (2), energy efficiency and Decent Homes Standard numbers. **NB** : It should be noted here that the annual STAR survey for 2021/22 is now complete and the two KPIs have been included in this report; and
 3. three KPIs relating to Homelessness do not have a target this year due to ongoing Covid19 requirements.
- 7.3. The only KPI changes from 2020/21 are for:
 4. Local expenditure; where we report against Revenue spend (as before) and now, as agreed with DMBC, to also include Capital spend; and
 5. Gas servicing; we are now reporting properties with a valid safety certificate rather than properties attended.
- 7.4. This report provides an opportunity to feedback on performance successes and challenges against the 2021/22 Key Performance Indicators (KPIs) as agreed as part of the Annual Delivery Plan (ADP).

8. 2021/22 QUARTER 3 PERFORMANCE

- 8.1. The table below summarises the KPI dashboard as at 31 December 2021. Performance comparatives have been included from 2020/21.

	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Green (meeting target)	6	5	5	8	5	6	6
Amber (within tolerance)	1	1	2	2	3	1	1
Red (not meeting target)	8	9	6	7	7	8	8
No target (homelessness)	3	3	3	0	0	0	0
Quarterly / Annual KPIs	2	2	4	0 ¹	4	4	4
Total	20	20	20	17 ¹	19	19	19

NB:

¹ For 2020/21, there were four annual KPIs. Two of these were for the planned January 2021 STAR survey but this was deferred until July 2021 as part of a wider programme.

8.2. The tolerances which determine the amber status are 10% and consistent with DC and Doncaster Children's Trust measures. Please note performance data is cumulative year to date (YTD) rather than performance in the quarter, as this can be misleading when comparing to target.

8.3. KPI 1: Percentage of Current Rent Arrears against Annual rent debit

Year end target 21/22 **3.00%**
 Profiled Target December 21 **3.42%**
 Q3 21/22 Performance **3.01%** **BETTER THAN TARGET – GREEN**

	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21	Q4 19/20	Q3 19/20	Q2 19/20	Q1 19/20
Arrears %	3.01%	2.64%	2.64%	2.75%	3.39%	3.05%	3.12%	2.79%	3.29%	2.95%	2.77%
Target %	3.42%	3.21%	3.16%	3.00%	3.20%	3.00%	2.95%	3.22%	2.95%	2.95%	2.95%

Arrears performance remains strong, but arrears have increased slightly to end of December to 3.01%. This represents a considerable decrease from the same period in 2020 which was 3.39%. Performance continues to track below the profiled target of 3.42%.

December arrears of 3.01% (and November's 2.84%) represent a quartile 2 position when compared to Housemark's most recent national monthly pulse benchmarking exercise, where top quartile at end of November was 2.43%.

This strong performance continues against a backdrop of challenges that have been experienced throughout the year, in respect of lengthy waiting times for court dates and backlogs of cases (currently around two months for a pre hearing and a further two months for a further hearing). Also, the impacts of the cessation of the £20 Universal Credit uplift is now being felt as some claimants did not see the change in their October/November payments as well as the Christmas period.

Work across the Income Management and Tenancy Sustainability teams continues to focus on early intervention and supporting tenants to maximise incomes in order to manage their rent accounts successfully. Properties have been reviewed based on their SAP/EPC rating and are proactively being contacted to provide support to tackle fuel poverty. Further proactive contact will take place for those who are Benefit Capped in January.

8.4. KPI 2 : Void rent loss (lettable voids)

Target **0.50%**
 Q3 2021/22 YTD Performance **0.79%** **WORSE THAN TARGET – RED**

	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Void rent loss YTD %	0.79%	0.79%	0.82%	1.00%	1.02%	0.97%	0.97%

Void numbers at quarter end	147	159	142	159	216	195	209
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The number of voids held at the end of December shows a reduction at 147, which is lower than November (153) and October (170). The 147 includes eight non-lettable voids, of which five are awaiting demolition, two are to undergo Option Appraisal one requiring major works.

Of the 139 available to let, 29 were fully repaired and available, and 46 were under offer.

The 139 properties available to let at end of December (and November's 146) represent a 0.70% proportion of dwellings vacant and available to let and would be a quartile 3 position when compared to Housemark's most recent national monthly pulse benchmarking, where the median indicator was 0.60% at end of November

A number of issues are contributing to targets not being achieved; increased delays waiting for R&D survey results, asbestos containing materials (ACM) removals, shortage of materials, delays waiting for the delivery of non stock items.

There continues to be much activity within SLHD designed to improve voids performance. This includes:

- Regular fortnightly monitoring meeting chaired by the Chief Executive;
- The resolution of resourcing difficulties;
- Action to tackle material shortages;
- Data analysis of performance;
- Improved cross team communication including team co-location;
- Changed processes to manage asbestos containing materials designed to expedite activity whilst still meeting regulatory safety duties;
- Working with area housing teams and partners on low demand areas to improve let-ability of hard to let properties;
- Analysing refusal reasons and putting measures in place to reduce refusals;
- Additional advertising using Zoopla;
- Full review taking place of current process to identify any changes which will streamline and improve performance;
- Increase in operational void meetings from 2 to 3 times per week; and
- National and local benchmarking to compare performance and identify best practice.

8.5. KPI 3 : Average Days to Re-let Standard Properties

Target **20.00 days**
Q3 2021/22 YTD Performance **32.39 days** **WORSE THAN TARGET – RED**

	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Re-let days	32.39	31.62	32.72	46.11	48.27	49.32	55.05

In month performance for December was 43.79 days, a decline compared to November's of 34.01 days and October's 31.37 days. This has an adverse effect on cumulative YTD performance, now standing at 32.39 days.

There is no benchmarking data published yet for 2021/22 but top quartile for 2020/21 was 32.11 days for our peer group.

A number of long standing empty and low demand properties have adversely impacted on performance as they became re-let.

Stringent monitoring remains in place across all teams involved in the key to key process to ensure work is completed in voids and all teams are working collectively to ensure that voids are re-let at the earliest opportunity to ensure a continued improvement in performance.

8.6. KPI 4: Number of Households placed in B&B Accommodation

**Target
Q3 2021/22 YTD**

**No target 2021/22
571**

	21/22 no.	20/21 no.
April	78	78
May	54	83
June	61	82
July	73	64
August	57	35
September	68	35
October	64	76
November	66	79
December	50	54
Total YTD	571	586

We have reduced overall B&B numbers compared to 119 in January 2021. We are working hard to continue to reduce this and have set ourselves a target of 45 by the end of March 2022 and zero by March 2023.

As a result of this work, the total number of nights has reduced from 770 in November to 488 in December. Following a huge increase in demand for emergency accommodation in September and October, where families had to be placed into B&B, a concerted effort successfully achieved no families left in B&B for Christmas.

Alongside this, we were provided with a Government directive on 20 December called Protect and Vaccinate which increased B&B placements and may increase further in January but we will still be working to move on other individuals in hotels to achieve the overall reduction. Along with the end of year target of 40 in B&B we will be working hard to achieve zero for families and children.

8.7. KPI 5: Number of Full Duty Homelessness Acceptances

**Target
Q3 2021/22 YTD**

**No target 2021/22
292**

	21/22 no.	20/21 no.
April	31	29
May	45	18
June	36	30
July	23	31
August	43	26
September	47	34
October	18	46
November	28	34

December	21	25
Total YTD	292	273

The number of full duty acceptances has reduced from Q2, a positive trend. The cumulative annual figure is 292, compared to 273 for the same period in 20/21. We hope to continue this recent trend and achieve an overall annual reduction by the end of the year.

We are developing our prevention and case management processes robustly to prevent more people needing approach us in the first instance and to enable effective case management and resolve more cases before reaching full duty.

8.8. KPI 6: Number of homeless preventions

Target
Q3 2021/22 YTD

No target 2021/22
439

	21/22	20/21
	no.	no.
April	50	68
May	41	47
June	63	44
July	47	44
August	33	55
September	75	57
October	38	48
November	56	61
December	36	32
Total YTD	439	456

It is disappointing that the level of preventions has dropped in December to 36 from 56 in November, this is mainly due to the team concentrating on reducing B&B and ensuring no families and children were in B&B for Christmas. We have also been focusing on the protect and vaccinate programme and Severe Weather Emergency Protocol (SWEP).

Our overall YTD level of preventions in 21/22 is 439 compared to 456 in 20/21 and we will be working hard in the remaining months to push this overall figure up closer to last year's performance. Going into 2022/23 there will be much more of a focus on prevention work and the target will be set higher than 20/21 performance.

8.9. KPI 7: Number of complaints upheld as a percentage of all interactions

Target **0.070%**

30 November* YTD Performance **0.118%**

WORSE THAN TARGET – RED

*Complaints are reported one month in arrears to ensure that the complaints are closed down within our service standard of 10 working days.

The table below summarises the interactions and complaints upheld in the eight months to end of November for the past three financial years

	Interactions	Complaints	Upheld	% upheld
21/22	237,963	769	280	0.118%
20/21	238,662	681	160	0.067%

19/20	231,087	770	164	0.071%
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Volumes of both interactions and complaints continue to fluctuate each month, which makes comparisons to previous years unrepresentative due to restrictions placed on the organisation due to Covid-19.

In November 2021 we received 136 complaints. This is an increase of 46 (+51%) compared to October, and is 72 more than we received compared to November 2020. It is the highest volume of complaints we have seen in a November for the past four years.

63 (46%) of the 136 complaints were upheld. This is an increase of 20 compared to last month and is 32 more than November 2020.

All of this has an adverse effect on the YTD position which cumulatively stands at 0.118%, the highest so far this year, and worse than target.

For repairs, there is increased monitoring of performance. The majority of complaints centre on the length time taken to get repairs appointed. This is in part, due to the increased repairs demand we continue to see post pandemic of circa 20% and the added impact of depleting resources and recruitment issues across our sector, with limited trade availability. Some of the resource issues are short-term Covid related and include the availability of some materials.

There are similar issues with our nominated sub-contractor, who is experiencing similar challenges.

We continue to focus on our availability for customer appointments and we are exploring additional “local” framework contractors especially in disciplines where we have a reduced trade presence.

The Repairs Excellence project is now underway, looking at a number of areas to improve all round performance, and a pilot launches this month, with a new approach to communicating with our customers with text reminders, to confirm appointments and hopefully reducing no-access, to free up resources to attend our appointments. 100% success was achieved in the first week of the pilot.

For Housing, a number of complaints are related to ongoing ASB issues and complaints about neighbours etc. – sometimes complaining about issues we are already looking into and sometimes because they feel nothing is being done. We are using VoiceScape, a telecoms software package, to check in with complainants who have a live ASB case. Weekly messages will provide reassurance that we are working on the case and invites them to respond if they have any new information or want to speak to their housing officer.

Many of the complaints for Home Options are around the requests for service/enquiries and the length of time taken to respond. We are reviewing front end access into service to provide a quicker response at first point of contact and immediate allocation to an officer to case manage if required.

In Home Options we are also ensuring all homeless cases have an allocated and dedicated case manager so that customers have one person they deal with and can contact if they have a problem

8.10. KPI 8 : Number of tenancies sustained post support :

Target **90.00%**
Q3 21/22 YTD Performance **98.44%** **BETTER THAN TARGET- GREEN**

	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Tenancies sustained %	98.44%	98.20%	98.88%	97.25%	96.76%	96.67%	95.59%

An excellent performance in the year to date, continuing the above target performance all year in 2020/21.

Tenancies sustained post support continue to perform well with December results showing 98.78% of tenants are still in their tenancies six months after their support concluded, and four of the nine months to date have achieved 100% in month. This gives a cumulative performance thus far of 98.44% against a target of 90%.

8.11. KPI 9 : Number of repairs complete on first visit (FVC)

Target **92.00%**
Q3 21/22 YTD Performance **89.38%** **WITHIN TOLERANCES - AMBER**

	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
First visit complete %	89.38%	90.80%	90.93%	90.92%	90.80%	91.24%	93.38%

Due to the changeover in systems in mid October, this is the first month performance information has been available since the end of Q2 (September). At the end of Q2 cumulative performance was 90.80% and September's monthly performance was 92.10%. Cumulative performance has reduced to 89.38% at the end of Q3.

Details of all the repairs not meeting target are being extracted from the new system and analysed, and the results will inform the Repairs Excellence Board project that aims to improve all aspects of the repairs service

8.12. KPI 10 : Gas Servicing - % of dwellings with a valid gas safety certificate

Target **100.00%**
Q3 21/22 YTD Performance **100.00%** **MEETING TARGET - GREEN**

SLHD are entirely compliant with regulatory standards relating to gas safety.

This is a changed KPI for 2021/22 and reports the percentage of dwellings with a valid gas safety certificate rather than percentage of properties attended (2020/21 KPI). This change offers clarity on the number of properties that are in the no access procedure.

This process starts well before the anniversary of the gas service and allows time to gain access whilst still having an in date gas safety certificate. Once the certificate is out of date we can then start the legal process of gaining access to undertake the essential compliance work.

At the end of Q3, all properties held a valid gas certificate.

8.13. KPI 11 : Days lost through sickness per FTE

Profiled target	5.75 days	
Year end target	7.89 days	
Q3 2021/22 YTD Performance	8.61 days	WORSE THAN TARGET – RED

December saw 1.42 days absence per employee against a target of 0.65. This is an increase on November's absence (1.25 days absence per FTE) and more than double the monthly target.

As anticipated, the YTD position now stands at 8.61 days per FTE taking us over the annual target for year end, so this KPI will be red for the rest of the year.

Housemark's most recent national monthly pulse benchmarking shows the 'Working days lost due to sickness absence' indicator as at the end of November was 4.00% for the Median and quartile 3 was 5.38%. SLHD's equivalent indicator was 6.76%. However it needs to be borne in mind that many of the organisations reporting are Housing Associations who traditionally outperform local authorities.

The year end projection has increased further to 10.59 days per FTE, and is significantly higher than last year or indeed previous year's target of 7.9 days per FTE.

The highest cause of absence YTD remains stress depression and anxiety accounting for a 41.4% of the absence (no significant change from last month at 40%). Non work related stress remains the biggest contributor, with work related stress accounting for just 3.8% of this total.

December saw a further general increase in the number of days absence due to stress depression and anxiety and all known cases are actively being managed. These are not work related cases.

The second highest reason for absence remains Musculo-Skeletal (MSK), accounting for 20.3% a drop of nearly 9% on last month followed by Coronavirus which now accounts for 13.1% of all absence to date and an increase of just over 1% on last month.

Covid cases in December were more than double November and just slightly under the July peak. We have now seen 797.4 days lost due to Covid related sickness (not including self-isolation) in this financial year.

If we look at the absence figures this month excluding Covid we do still remain above target. This would still likely bring our projected outturn higher than target but by a much smaller margin.

8.14. KPI 12a and 12b : Local expenditure

It should be noted here that historically SLHD has always reported expenditure of a Revenue nature for the KPI, but following discussions with DC, will now report two local expenditure KPIs, the second of which will include Capital spend, and more accurately reflects the nature of the SLHD business:

- KPI 12a % Local expenditure of a Revenue nature only (as before)
- KPI 12b % Local expenditure of a Revenue and Capital nature

Target	70.0%	
KPI 12a Q3 YTD	55.8%	WORSE THAN TARGET – RED
KPI 12b Q3 YTD	71.0%	MEETING TARGET – GREEN

The table below summarises the total and Doncaster spend for the nine months to end of December with comparatives from previous financial years.

	KPI 12a		KPI 12b
	Doncaster spend YTD	Total spend YTD	Incl Capital spend %
21/22	£4,459k	£7,986k	55.8%
20/21	£3,930k	£7,522k	52.3%
19/20	£4,023k	£6,688k	60.2%

Cumulatively, YTD performance stands at 55.84% and an under-performance of £1.13m.

For the new KPI 12b including Capital spend, cumulative performance for the year to date would be 70% and the target met.

Changing the balance of local spend is only potentially possible at the point that contracts are renewed and if local suppliers are appointed as part of this process. This is not always possible if local suppliers do not exist, do not put forward bids or tender submissions, are not part of consortia frameworks being utilised, or are unable to demonstrate value for money through legally required, transparent procurement processes.

Based on the types of goods and services due to be procured over the coming months, it is not anticipated that SLHD will be able to increase local revenue spend much further than it is currently and the target will not be achieved by year end.

8.15. KPI 13 : ASB Cases Resolved as a % of All Cases Closed

Target	95.00%	
Q3 21/22 YTD Performance	97.32%	BETTER THAN TARGET – GREEN

No specific issues at this stage. Performance for ASB is continuing the strong trend, with a performance of 99.05% for December and a cumulative performance of 97.32% for the year to date. Just one case out of 105 closed showed as unresolved, a reflection of the team's work to ensure they are proactively tackling ASB.

Currently there are 342 open cases - the exact same figure as at the end of January last year. Once again noise and verbal harassment are the top 2 categories, with 82 each, totalling nearly half of all ASB cases.

8.16. KPI 14 : Number of residents undertaking training or education

Target YTD	59	
Q3 21/22 YTD Performance	20	WORSE THAN TARGET – RED

Similarly to last quarter this figure remains below target. This is despite additional efforts to widen the possible participant group offering places on the college courses to non SLHD residents (widened to social housing tenants as a whole).

A minimum number of participants is needed to run the course as determined by the provider and this is the number we are finding challenge in meeting. This was the case for the most recent course.

One of the challenges here is the current buoyant employment market, making it potentially easier to find work without training.

We continue therefore to review the possible ways to market the course and for the coming 12 months are considering a wider review of the opportunities that we provide and if this can be expanded outside of the usual cleaning and multi-skill options.

8.17. KPI 15 : Number of residents supported into employment

Target YTD	24	
Q3 21/22 YTD Performance	45	BETTER THAN TARGET – GREEN

We continue to exceed the target for Doncaster residents into employment driven largely by our ongoing efforts with apprentices, Kickstart and success in appointing previous WOW participants into permanent roles. This work will continue.

9. Annual KPIs

9.1. For 2021/22, there are four annual KPIs that would normally be reported at the end of the financial year.

9.2. Two of these relate to the annual STAR survey. The survey for 2021/22 is now complete and results were received in September. These have been analysed in detail and action plans are being developed as required. The two indicators have been included since Q2 reporting.

9.3. The other two annual KPIs show the most recent performance from Q4 2020/21.

9.4. KPI 16 : Tenant satisfaction with overall service

Target 2021/22	87.00%	
2021/22 Performance	84.80%	WORSE THAN TARGET – RED

Results for the 2021/22 survey are currently being analysed. Results from the 2021/22 survey are slightly down on the previous STAR survey but Housemark have recently reported that a drop in satisfaction levels are being evidenced nationally.

9.5. KPI 17: Percentage of homes meeting Decent Homes standard ANNUAL KPI:

Target 2021/22	100.00%	
Performance	99.99%	(Q4 2020/21)

There were eight properties out of 20,080 that were non-decent at year end. All these properties are included in the capital re-inclusion programme for this financial year.

9.6. KPI 18 : Tenant satisfaction with property condition %

Target 2021/22	89.00%	
2021/22 Performance	86.50%	WORSE THAN TARGET – RED

Results for the 2021/22 survey are currently being analysed

9.7. KPI 19: Energy efficiency ANNUAL KPI :

Target 2021/22	68.37%	
Performance	64.74%	(Q4 Outturn 2020/21)

This was a new KPI for 2020/21, which requires all properties to achieve EPC Level C by 2030. The outturn performance of 64.74% for 2020/21 exceeded the target for that year of 41.53%. SLHD are currently reviewing investment needs as part of a new environmental strategy. This indicator will be reported annually.

10. Annual Value For Money (VFM) statement for 2020/21

- 10.1. In the Cabinet decision of 3 July 2018 there is a requirement for SLHD to report annually to DMBC on Value For Money (VFM) performance. The main vehicle for this is an annual VFM statement, which includes details of costs and performance of each of SLHD's service areas against budgets and targets, and how these compare with other organisations.
- 10.2. The VFM statement for 2020/21 was presented to SLHD's Board in November 2021 and is attached at **Appendix B**.
- 10.3. Operationally, the main challenges in 2020/21 were to maintain core services within the constraints of Covid19 restrictions, implementing a new integrated housing management system, further rollout of Universal Credit (UC), Building Safer Futures consultation and publication of the social housing White Paper.
- 10.4. Despite the significant Covid19 restrictions throughout the year, particularly in April and May 2020, SLHD ensured business critical services were delivered, before a phased return to full service in early June.
- 10.5. The statement shows that St Leger is again, in general, a low cost, mid to high performing organisation when benchmarked with our peers (25 organisations – ALMOs, Metropolitan Boroughs and Unitary Authorities) and also all housing providers nationally (120 organisations).
- 10.6. At an overview level, VFM 'dashboards' can be produced by plotting a selection of cost and performance indicators in a 2x2 matrix to show how an organisation compares with its peer group, geographically or nationally, for core service areas. The aim is to have as many indicators as possible in the low cost, high performance green area and as few as possible in the high cost, poor performance red area. Dashboard are intended to give a VFM snapshot and generate further investigation.
- 10.7. The table below shows the cost and performance indicators selected and the resulting dashboard for 2020/21. Comparative dashboards are included in the VFM statement.

Key	Service	Cost indicator	Performance indicator
1	Responsive repairs	CPP * of responsive repairs	STAR satisfaction with repairs service
2	Void repairs and lettings	CPP of void repairs	Void rent loss %
3	Rent arrears & collection	CPP of rent arrears & collection	Current arrears %
4	Tenancy Management	CPP of tenancy management	STAR satisfaction with service overall
5	Customer involvement	CPP of customer involvement	STAR satisfaction with views being listened and acted
6	Customer services	CPP of housing management	Average days to respond to complaints
7	Neighbourhood m'ment	CPP of estate services	STAR satisfaction with neighbourhood as place to live
8	Community investment	CPP of community investment	Residents supported into employment

* CPP = Cost Per Property

Peer group 2020/21 - 25 ALMOs, Metropolitan Boroughs and Unitary authorities



Nationally 2020/21 – approx. 120 housing providers



11. Background Papers

11.1. None

12. Glossary of acronyms and abbreviations

ADP	Annual Development Plan
ASB	Anti- Social Behaviour
CPP	Costs per property
DC	Doncaster Council
FTE	Full Time Equivalent
HRA	Homelessness Reduction Act
KPI	Key Performance Indicator
MSK	Musculo-Skeletal
SLHD	St Leger Homes of Doncaster
STAR	Survey of Tenants and Residents
SWEP	Severe Weather Emergency Protocol
UC	Universal Credit
VRL	Void rent loss
VFM	Value For Money
WoW	World of Work
YTD	Year to date

OPTIONS CONSIDERED

13. Not applicable

REASONS FOR RECOMMENDED OPTION

14. Not applicable

IMPACT ON THE COUNCIL'S KEY OUTCOMES

	Outcomes	Implications
	Doncaster Working: Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future; <ul style="list-style-type: none">• Better access to good fulfilling work• Doncaster businesses are supported to flourish• Inward Investment	Work of SLHD impacts on Council key priorities, with implications on the quality of life for Doncaster Council's tenants and other residents and the communities they live in.
	Doncaster Living: Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;	

	<ul style="list-style-type: none"> • The town centres are the beating heart of Doncaster • More people can live in a good quality, affordable home • Healthy and Vibrant Communities through Physical Activity and Sport • Everyone takes responsibility for keeping Doncaster Clean • Building on our cultural, artistic and sporting heritage 	
	<p>Doncaster Learning: Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> • Every child has life-changing learning experiences within and beyond school • Many more great teachers work in Doncaster Schools that are good or better • Learning in Doncaster prepares young people for the world of work 	
	<p>Doncaster Caring: Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> • Children have the best start in life • Vulnerable families and individuals have support from someone they trust • Older people can live well and independently in their own homes 	
	<p>Connected Council:</p> <ul style="list-style-type: none"> • A modern, efficient and flexible workforce • Modern, accessible customer interactions • Operating within our resources and delivering value for money • A co-ordinated, whole person, whole life focus on the needs and aspirations of residents • Building community resilience and self-reliance by connecting community assets and strengths • Working with our partners and residents to provide effective leadership and governance 	

RISKS AND ASSUMPTIONS

15. Specific risks and assumptions are included in section 12 of this report

LEGAL IMPLICATIONS

Neil Concannon, Head of Service – Litigation & Regulatory Legal Services, 15.02.22

16. There are no specific legal implications arising from this report. Advice can be provided on any matters arising at the meeting.

FINANCIAL IMPLICATIONS

Julie Crook, Director of Corporate Services SLHD, 03.03.22

17. In 2021/22 SLHD will receive management fees of £36.7m from DC. This is made up of £34.9m from the Housing Revenue Account and £1.8m from the General Fund to pay for the general fund services managed by SLHD.

HUMAN RESOURCES IMPLICATIONS

Angela Cotton, HR & OD Business Manager, 14.02.22

18. There are no specific Human Resource Implications for this report.

TECHNOLOGY IMPLICATIONS

Peter Ward, Technology and Governance Support Manager, 15.02.22

19. There are no specific technology implications for this report.

HEALTH IMPLICATIONS

Kirsty Tunnicliffe, Public Health Improvement Coordinator 15.02.22

20. The pandemic continues to impact on the delivery of the service. Most notably the continued bed and breakfast placements, upheld customer complaints and limited opportunities to proactively prevent homelessness.
21. It is encouraging to see that the tenancy sustainability team are maintaining their focus on early intervention and support and that the number of tenancies sustained post-support exceeds target. It is particularly encouraging to see that the team is targeting those who have lower SAP/EPC ratings, providing these tenants with support to tackle fuel poverty.
22. A suitable, safe and good quality home is essential for good mental and physical health, as are communities that support people and enable them to thrive. Work to resolve antisocial behaviour is exceeding target. Effectively reducing antisocial behaviour can be expected to have a positive impact on individual wellbeing and potentially on community cohesion. Quarter 3 performance in regards to complaints is below target and the main themes include delays to completing a repair, ongoing ASB issues, and requests for service/enquiries and time taken to respond for Home Options. It is positive to see that all properties held a valid gas safety certificate at the end of Q3, supporting tenants' health, wellbeing and safety at home.
23. As a key local organisation, St Leger Homes of Doncaster has the opportunity to improve health and wellbeing by maximising local social, environmental and economic benefits. This can be done in a number of ways, including good working conditions, local

purchasing and training and development opportunities. It is positive to see the number of tenants and residents helped into employment is exceeding target, although the number of tenants and residents helped into training and education remains lower than the target. Understanding the causes of employee sickness absence and improving the working environment has the potential to improve employee health and wellbeing, and reduce preventable days lost to sickness, which is currently below target. In addition to this, further benefits can be realised by continuing to explore opportunities to increase social value through local revenue expenditure.

24. As a stable and secure home is an essential contributor to good health and wellbeing Public Health wishes to see a continued focus on homeless preventions and less reliance on bed and breakfast placements where possible

EQUALITY IMPLICATIONS

25. Equality implications are considered in line with the Equality Act 2011 for the delivery of all SLHD services.

CONSULTATION

26. Consultation has taken place with key managers within SLHD, the Lead Member for Housing and Senior Officers within the Council.

BACKGROUND PAPERS

27. None

GLOSSARY OF ACRONYMS AND ABBREVIATIONS

ADP	Annual Development Plan
APA	Alternative Payment Arrangement (for Universal Credit benefit)
ASB	Anti-Social Behaviour
CIPD	Chartered Institute of Personnel and Development
CV	Curriculum Vitae
DC	Doncaster Council
DWP	Department for Work and Pensions
FTE	Full Time Equivalent
HRA	Homelessness Reduction Act
HSE	Health and Safety Executive
KPI	Key Performance Indicator
MHCLG	Ministry of Housing, Communities and Local Government
SLHD	St Leger Homes of Doncaster
STAR	Survey of Tenants and Residents
UC	Universal Credit
VRL	Void rent loss
WoW	World of Work
YTD	Year to date

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BACKGROUND PAPERS

28. None

Appendix A – SLHD Key Performance Indicator Summary Q3 2021/22

KPI	Indicator	20/21 Outturn	20/21 Quartile	21/22 Quarter 1	21/22 Quarter 2	21/22 Quarter 3	21/22 Quarter 4	21/22 Target	DoT	R/A/G
1	Percentage of current rent arrears against annual debit %	2.75%	Quartile 2	2.64%	2.64%	3.01%		3.42% ytd 3.00% year	↓	✓
2	Void rent loss (lettable voids) %	1.00%	Quartile 1	0.81%	0.79%	0.79%		0.50%	↔	✗
3	Average Days to Re-let Standard Properties ytd days	46.11	Quartile 2	32.72	31.62	32.39		20.00	↓	✗
4	Number of Households placed in B&B Accommodation ytd	831	n/a	193	391	571		n/a	n/a	n/a
5	Number of Full Duty Homelessness Acceptances ytd	398	n/a	112	225	292		n/a	n/a	n/a
6	Number of homeless preventions ytd	604	n/a	154	309	439		n/a	n/a	n/a
7	Complaints upheld as a % of customer interactions %	0.065%	n/a	0.092%	0.096%	0.118%		0.070%	↓	✗
8	Number of tenancies sustained post support	97.25%	n/a	98.88%	98.20%	98.44%		90.00%	↑	✓
9	Number of repairs first visit complete	90.92%	Quartile 3	90.93%	90.80%	89.38%		92.00%	↓	⚠
10	Gas servicing:% of properties with a valid gas certificate	100%	Quartile 1	99.98%	99.92%	100.00%		100.00%	↑	✓
11	Days lost through sickness per FTE	6.60	Quartile 2	1.98	5.09	8.61		5.75 ytd 7.90 full year	↓	✗
12a	Percentage of Local Expenditure % Revenue only	52.07%	n/a	51.65%	57.39%	55.84%		70.00%	↓	✗
12b	Percentage of Local Expenditure % Revenue and Capital	n/a	n/a	70.80%	72.00%	71.00%		70.00%	↓	✓
13	ASB Cases Resolved as a % of All Cases Closed	95.19%	n/a	96.65%	96.68%	97.32%		95.00%	↑	✓
14	Number of residents undertaking training or education ytd	30	n/a	10	12	20		59 ytd 67 full year	↑	✗
15	Number of residents supported into employment ytd	28	n/a	7	33	45		24 ytd 30 full year	↓	✓
16	Tenant satisfaction levels % (STAR)	87.00%	Quartile 2	Annual KPI	84.80%	84.80%	84.80%	89.00%	↓	✗
17	Percentage of homes maintaining decent standard %	99.99%	Quartile 2	Annual KPI	Annual KPI	Annual KPI	Annual KPI	100.00%	n/a	n/a
18	Tenant satisfaction with property condition % (STAR)	89.40%	Quartile 1	Annual KPI	86.50%	86.50%	86.50%	89.00%	↓	✗
19	Energy efficiency. Target: achieve EPC Level C by 2030	64.74%	n/a	Annual KPI	Annual KPI	Annual KPI	Annual KPI	68.37%	n/a	n/a

Notes :

- Direction of travel (DoT) is against performance in the previous quarter. ↑ = Improving, ↔ = No Change, ↓ = Declining.
- Targets are for the end of the year performance unless indicated otherwise (ytd = cumulative year to date).
- R/A/G status is against the cumulative year to date (ytd) or year-end target. R/A/G ✗ ⚠ ✓