



# Doncaster Council

## Report

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**Date: 7 September 2022**

**To the Chair and Members of the Cabinet**

**St Leger Homes of Doncaster Ltd (SLHD) Performance & Delivery Update: 2022/23  
Quarter One (Q1)**

<b>Relevant Cabinet Member(s)</b>	<b>Wards Affected</b>	<b>Key Decision</b>
Councillor Glyn Jones, Cabinet Member for Housing and Equalities, Deputy Mayor	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 performance successes and challenges against the 2022/23 Key Performance Indicators (KPIs).
3. At the end of June 2022, seven of the thirteen KPIs measured were met or were within agreed tolerances of target. Commentary appears below.

### **EXEMPT REPORT**

4. This report is not exempt.

### **RECOMMENDATIONS**

5. That Cabinet note the SLHD performance outcomes and the contribution SLHD makes to supporting DC strategic priorities.

## 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 KPI summary for Q1 2022/23. Commentary covering the performance against all indicators is provided below.
- 7.2. There are 19 KPIs agreed with DMBC for 2022/23 and include :
- two measured quarterly – residents supported in training and residents supported in employment;
  - four measured annually - STAR survey (2), energy efficiency and Decent Homes Standard numbers; and
  - two KPIs relating to Homelessness do not have targets yet this year.
- 7.3. The only KPI changes from 2021/22 is for KPI4 Homelessness, where we now report Number of Households placed in B&B Accommodation at month end
- 7.4. This report provides an opportunity to feedback on performance successes and challenges against the 2022/23 Key Performance Indicators (KPIs) as agreed as part of the Annual Delivery Plan (ADP).

## 8. 2022/23 QUARTER 1 PERFORMANCE

- 8.1. The table below summarises the KPI dashboard as at 30 June 2022. Performance comparatives have been included from previous years. At the end of June 2022, seven KPIs were met or were within agreed tolerances of target.

	Q1 2022	Q4 21/22	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	7	7	6	6	8	5	6	6
Amber (within tolerance)	1	4	3	3	2	2	3	1	1
Red (not meeting target)	6	5	4	5	4	7	7	8	8
No target (homelessness)	2	3	3	3	3	0	0	0	0
Quarterly / Annual KPIs	4	0	2	2	4	0	4	4	4
Total	19	19	19	19	19	17	19	19	19

- 8.2. As we recover from the pandemic it was agreed with the Mayor to set challenging targets for SLHD. SLHD entirely supports this approach and is determined to continually improve performance, however this needs to be understood against a national background of higher demand for services and lower social housing performance as evidenced by Housemark benchmarking. Locally there remains significant progress to be made, however this quarter's performance shows a continued trend of improvement with the same number of targets being met as at Q1 last year and for those targets not met, the direction of travel predominantly shows improved performance.
- 8.3. We submit monthly pulse survey performance data to Housemark which allows us to constantly understand how we are performing against other organisations, albeit there can be quite large swings on specific indicators from one month to the next.

8.4. The tolerances which determine the amber status are consistent with DC and Doncaster Children's Trust measures where possible. 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.

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

**Profiled Target** **2.85%**  
**Jun 22 YTD Performance** **2.62%** **BETTER THAN TARGET – GREEN**

	Q1 22/23	Q4 21/22	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Arrears %	2.62%	2.55%	2.92%	2.57%	2.55%	2.75%	3.39%	3.05%	3.12%
Profiled target %	2.85%	3.00%	3.42%	3.21%	3.16%	2.80%	3.20%	3.00%	2.95%

June's outturn for rent arrears was strong at 2.62% against a profiled target of 2.85%. The year end target for March 2023 is 2.75%.

Performance is strong, but we are preparing for a number of challenges expected throughout the year, including the current cost of living crisis and increased utility bills, which are expected to increase further in October 2022.

The Income Management Team and Tenancy Support Team continue to support residents to maximise their income, including new ways to break down financial gains and grants awarded to identify exactly where the support is required/given the most. We are about to recruit 2 x Mental Health Navigators and are working incredibly close with CAB to provide tailored debt support and have a process in place for referrals to be picked up in a timely manner, reducing the non-engagement risk.

We are working with the Council to support one third of SLHD residents who have not applied to the Council for their £150 rebate.

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

**Target** **0.50%**  
**Jun 22 YTD performance** **0.76%** **WORSE THAN TARGET – RED**

	Q1 22/23	Q4 21/22	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 %	0.76%	0.79%	0.79%	0.79%	0.82%	1.00%	1.02%	0.97%	0.97%
Void numbers at month / quarter end	151	178	147	159	142	159	216	195	209

The number of voids held at the end of June shows a decrease of 27 to 151 and 33 of these are repaired and ready to let and 70 are under offer. This figure includes 18 non-lettable voids, consisting of the following;

- eight awaiting demolition;
- three awaiting investment;
- one acquisition; and
- six requiring adaptations by DC.

Cumulative performance to end of June shows continued improvement in 2022/23 and now stands at 0.76%.

At the quarter end, it is pleasing to note that the total number of relets at 315 continues to exceed the total number of terminations of 281, and this has continued in July. Because of this, void rent loss performance will continue to improve.

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

**Target** **20.0 days**  
**Jun 22 YTD performance** **33.6 days** **WORSE THAN TARGET – RED**

	Q1 22/23	Q4 21/22	Q3 21/22	Q2 21/22	Q1 21/22	Q4 20/21	Q3 20/21	Q2 20/21	Q1 20/21
Re-let days	33.6	33.7	32.4	31.6	32.7	46.1	48.3	49.3	55.1

In-month performance during the quarter has been somewhat volatile, but June's in month performance was 27.0 days, showing a significant improvement albeit this remains below target. Cumulative performance also shows a slight improvement at 33.6 days when comparing to the previous quarter's performance of 33.7 days

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 collaboratively to ensure that voids are re-let at the earliest opportunity, to assure a continued improvement in performance.

#### 8.8. KPI 4: Number of Households placed in B&B Accommodation at month end

**Profiled Target June** **45**  
**Jun 22 YTD performance** **76** **WORSE THAN TARGET – RED**

This is a new KPI for 2022/23 and measures the number of placements in Bed and Breakfast / Hotel accommodation **at month end**. The March 2023 year-end target is 30 and the profiled target is 45 at end June 2022

	Actual no.	Target no.
April	66	55
May	60	50
June	76	45

Placements are increasing as more people approach the service having been evicted from the private rented sector, relationship breakdowns or suffering domestic abuse.

Current performance is higher than the profiled target and is still firmly aiming for the year-end target of 30.

Work is underway to identify temporary accommodation properties within SLHD stock and private sector properties, as extremely high levels of families are approaching the service.

We have recently been successful in a bid to the council to secure significant additional funding over a 12-month period to deliver a homelessness transformation project, which will deliver demonstrable improvements and outcomes to the service including the reduced and minimal use of B&B. A recruitment campaign is underway.

#### 8.9. KPI 5: Number of Full Duty Homelessness Acceptances

**Target**  
**June 22 YTD performance**

**No target for 2022/23**  
**96**

	Actual no.	Target no.
April	30	n/a
May	34	n/a
June	32	n/a

June acceptances for full duty are slightly less than May. This number could increase due to the number of families and singles within the system. However, this will be addressed with the additional staffing resource and a focus on preventative activities.

#### 8.10. KPI 6: Number of homeless preventions

**Target**  
**June 22 YTD performance**

**No target for 2022/23**  
**150**

	Actual no.	Target no.
April	69	n/a
May	39	n/a
June	42	n/a

This number has increased slightly from the previous month but earlier preventative activity is taking place and will continue to be strengthened as we develop the transformation project and new staff are inducted into the service

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

**Target**  
**31 May \* performance**

**0.07%**  
**0.12%**

**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. For the KPI, we analyse the % of complaints upheld against all customer transactions. This provides us with a picture of our customer's dissatisfaction and enables us to drill down further into the relevant service areas.

The table below summarises the interactions and complaints upheld in the two months to end of May for five financial years:

Interactions	Complaints	Upheld	% upheld against interactions	Not upheld as % of all complaints	Upheld as % of all complaints
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<b>22/23</b>	<b>63,052</b>	<b>229</b>	<b>76</b>	<b>0.12%</b>	<b>67%</b>	<b>33%</b>
21/22	66,596	191	61	0.09%	68%	32%
20/21	39,886	118	35	0.09%	70%	30%
19/20	65,886	180	35	0.05%	81%	19%
18/19	55,343	173	30	0.05%	83%	17%

The table shows volumes of both interactions and complaints and highlight the impact of Covid19 in April 2020. It also shows increasing complaints being upheld as a proportion of all complaints, averaging at around a third are now upheld.

In May 2022 we received 109 complaints. This is a decrease of 11 compared to April and is 22 more than we received compared to May 2021. 31 of those 109 complaints were upheld (28.4%). The number of complaints upheld has decreased by four compared to last month but is three more than May 2021.

The cumulative complaints total for 2022/23 is 229 which is an increase of 38 compared to the cumulative 191 at the same stage in 2021/22. Cumulatively we are over our KPI target, achieving 0.12%.

The main themes for upheld complaints in May and April 2022 relate to time taken to complete a repair, staff actions and lack of communication/ information. Whilst it is too early to determine any impact from the Repairs Excellence project, it is anticipated that the changes in operational practice will result in shorter waiting times for repairs and increased satisfaction.

#### 8.12. KPI 8 : Number of tenancies sustained post support :

**Target** **97.25%**  
**June 22 YTD performance** **98.50%** **BETTER THAN TARGET – GREEN**

Period YTD	Cases closed 6 months previously	No. of tenancies sustained after 6 months	% of tenancies active 6 months after support ended	Target %
Q1 20/21	263	251	95.4%	90.0%
Q2 20/21	517	499	96.5%	90.0%
Q3 20/21	679	657	96.8%	90.0%
Q4 20/21	872	848	97.3%	90.0%
Q1 21/22	157	155	98.7%	90.0%
Q2 21/22	335	329	98.2%	90.0%
Q3 21/22	515	507	98.4%	90.0%
Q4 21/22	657	646	98.3%	90.0%
<b>Q1 22/23</b>	<b>267</b>	<b>263</b>	<b>98.5%</b>	<b>97.25%</b>

Tenancies sustained post support continue to perform well in Q1 resulting in performance of 98.5%. Performance has been above 98% for all three months, giving

a cumulative performance of 98.5% against a target of 97.25%. This equates to one tenancy, out of 65 closed in the previous six months ending.

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

**Target** **92.0%**  
**June 22 YTD performance** **94.3%** **BETTER THAN TARGET – GREEN**

This KPI measures the number of responsive repairs completed at the first visit without the need for the operative to return a second time because the repair was inaccurately diagnosed and/or did not fix the problem.

Period YTD	No. of repairs completed	No. of repairs completed first visit	% repairs completed first visit	Target %
Q1 20/21	7,165	6,701	93.5%	92.0%
Q2 20/21	18,485	16,892	91.4%	92.0%
Q3 20/21	30,685	27,866	90.8%	92.0%
Q4 20/21	42,464	38,609	90.9%	92.0%
Q1 21/22	9,839	8,941	90.9%	92.0%
Q2 21/22	18,547	16,841	90.8%	92.0%
Q3 21/22	26,252	23,759	90.5%	92.0%
Q4 21/22	34,595	31,192	90.2%	92.0%
<b>Q1 22/23</b>	<b>7,611</b>	<b>7,178</b>	<b>94.3%</b>	<b>92.0%</b>

Q1 outturn was 94.3%, which is above the target of 92%.

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

**Target** **100.00%**  
**Jun 22 YTD performance** **99.94%** **WITHIN TOLERANCES - AMBER**

At the end of Quarter 1 we were achieving 99.94%, which means we had 12 properties that do not have a valid gas certificate.

The required legal process to gain access has commenced for these 12 properties. It should be noted here that SLHD KPIs use the Housemark definitions wherever possible and for this KPI, the definition is:

*“The percentage of properties with a valid landlord gas safety record is a snapshot count of properties for which the landlord holds a current, valid gas record to confirm that the annual safety check has been completed, as at the end of the period. Properties undergoing legal action for access do not count as having a valid gas safety record.”*

Gas regulations differ slightly to the Housemark definition and it should be noted that according to the government’s regulations despite 12 properties being in a legal process we remain fully compliant with gas regulations.



#### 8.15. KPI 11 : Days lost through sickness per WTE (Whole Time Equivalent)

<b>Profiled target</b>	<b>1.87 days</b>	
<b>June 22 YTD Performance</b>	<b>2.35 days</b>	<b>WORSE THAN TARGET – RED</b>

June saw 0.69 days absence per WTE just 0.09 days above target and a significant drop when compared to the previous month (0.84 days absence per WTE). Whilst still above target year to date (YTD) (2.35 days vs 1.87 days), this month demonstrates an improved performance and narrowing of the gap to the profiled target.

June saw a levelling out of short and long-term absence with no significant difference between the two.

Year to date, stress related cases account for 31.6% of all absence with a significant decrease this month on all stress cases (reduction of 60 days). Musculo-Skeletal (MSK) has risen from the third to the second highest reason this month accounting for 16.8% of all absence. Work is underway to promote our wellbeing offer around MSK including on site wellbeing clinics and access to physio services and digital support through Medicash.

Covid19 drops to the third highest cause of absence, accounting for 13%, a total of 44.6 days this month and the lowest number of days seen in a month since June 2021. This demonstrates that despite high numbers of cases in the community, due to agile working many of our staff are still able to work despite suffering covid symptoms.

All cases continue to be managed in line with the attendance management procedures. Work has now begun to review the attendance management policy and in particular, the short-term triggers to enable us to more proactively manage short-term absence cases across the workforce. This review will take place over the summer with the aim for any changes to have been agreed and implemented no later than January 2023, which is the scheduled review date of the existing policy.

#### 8.16. KPI 12 : Local expenditure

<b>Target</b>	<b>70.0%</b>	
<b>June 22 YTD Performance</b>	<b>74.6%</b>	<b>BETTER THAN TARGET – GREEN</b>

Local spend (capital & revenue) performance stands at 74.6%. .

Efforts continue to secure local suppliers and contractors as part of re-procurement exercises where this is possible. Agreed changes to contract standing orders allowing for quotation exercises to higher values may also help increase use of local companies over the coming months.

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

<b>Target</b>	<b>95.0%</b>	
<b>June 22 YTD Performance</b>	<b>96.1%</b>	<b>BETTER THAN TARGET – GREEN</b>

Performance for June was strong at 97.9% of cases resolved - 142 out of 145 cases closed. This brings the KPI to 96.1% for the year to date.



We opened 150 new ASB cases in June and currently have 391 active with 95 of those being verbal abuse and harassment, 93 being noise and 58 drugs related.

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

<b>Profiled Target</b>	<b>19</b>	
<b>June 22 YTD Performance</b>	<b>0</b>	<b>WORSE THAN TARGET – RED</b>

This KPI remains significantly under target as the end of Q1. There has been no WOW courses run at Doncaster College during Q1 and we have not had any WOW participants asking for training or employability assistance.

This will change significantly in Q2, and this has already been seen in July when a new WOW multi skills course began at Doncaster College with 12 participants. This is a higher number than on recent other WOW courses and reflects the fact that we have opened up the criteria required for course participation. The new WOW cleaning course is also due to start in September and so those participants will be reflected in quarter 2.

Lastly, we have also had a young student start a week of work experience on July 11th with SLHD and so the KPI figures will reflect these and other participants in the next report.

8.19. KPI 15 : Number of residents supported into employment

<b>Profiled Target</b>	<b>7</b>	
<b>June 22 YTD Performance</b>	<b>7</b>	<b>MEETING TARGET – GREEN</b>

This quarter we met our target of residents into work. Of the seven participants assisted into employment:

- five have begun working for SLHD in a WOW cleaning role for six months;
- one has begun working for SLHD in a WOW external property maintenance role; and
- The other participant has secured a permanent full time position at Doncaster College as a technician. He was originally a participant who completed his six months as an external property maintenance operative through WOW.

9. Annual KPIs

9.1. For 2022/23, there are four annual KPIs. These are shown below with the most recent performance (March 2022 year end) included for reference

9.2. KPI 16 : Tenant satisfaction with overall service

<b>Target 2022/23</b>	<b>87.0%</b>
<b>March 22 year end Performance</b>	<b>84.9%</b>

March 2022 year end performance was the results for the 2021/22 STAR survey. Benchmarking shows a significant drop in satisfaction nationally during 2022, indicating widespread frustration with the issues impacting on performance.

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

**Target 2022/23 100.00%**  
**March 22 year end Performance 99.99%**

There were two properties out of 20,000 that were non-decent at March 2022 year end. These properties are included in the capital re-inclusion programme for the 2022/23 financial year.

9.4. KPI 18 : Tenant satisfaction with property condition %

**Target 2022/23 89.0%**  
**March 22 year end Performance 86.5%**

As with KPI 16, March 2022 year end performance was the results for the 2021/22 STAR survey.

9.5. KPI 19: Energy efficiency ANNUAL KPI :

**Target 2022/23 71.0%**  
**March 22 year end Performance 70.3%**

This was a new KPI for 2020/21, which requires all properties to achieve EPC Level C by 2030. The outturn performance of 70.3% for 2021/22 exceeded the target at the time. SLHD are currently reviewing investment needs as part of a new environmental strategy.

## OPTIONS CONSIDERED

10. Not applicable

## REASONS FOR RECOMMENDED OPTION

11. Not applicable

## IMPACT ON THE COUNCIL'S KEY OUTCOMES

	Outcomes	Implications
	<b>Doncaster Working:</b> 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"><li>• Better access to good fulfilling work</li><li>• Doncaster businesses are supported to flourish</li><li>• Inward Investment</li></ul>	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.
	<b>Doncaster Living:</b> Our vision is for Doncaster's people to live in a borough that is vibrant and full of	

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

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## **RISKS AND ASSUMPTIONS**

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

## **LEGAL IMPLICATIONS**

**Scott Fawcus 11.08.22**

13. 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, 24.08.22**

14. In 2022/23 SLHD will receive management fees of £36.9m from DC. This is made up of £34.2m from the Housing Revenue Account and £2.7m from the General Fund to pay for the general fund services managed by SLHD.

## **HUMAN RESOURCES IMPLICATIONS**

**Angela Cotton, HR & OD Business Manager, 23.08.22**

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

## **TECHNOLOGY IMPLICATIONS**

**Elaine Thompson, Technology and Governance Support Manager, 11.08.22**

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

## **HEALTH IMPLICATIONS**

**Claire Hewitt, PA to Director of Public Health 11.08.22**

17. 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. The current and growing cost of living crisis is likely to increase demand and complexity on all parts of the system, including housing. Planned recruitment to focus on proactively preventing homelessness is positive in this context.
18. Complaints for the reporting quarter have again reduced and are used to bring attention to where improvement can be made. The repairs excellence project will ensure that homes can be ready and safe for tenants.
19. As a stable and secure home is an essential contributor to good health and wellbeing, the number of placements to B&B and hotel accommodation is high and has increased, with families noted as approaching the service in high numbers. Where temporary accommodation is necessary for families, it is essential that their broader health and wellbeing needs are supported.
20. As a local anchor 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 continues to remain below target.

## **EQUALITY IMPLICATIONS**

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

## **CONSULTATION**

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

## **BACKGROUND PAPERS**

23. None

## **GLOSSARY OF ACRONYMS AND ABBREVIATIONS**

ADP	Annual Development Plan
APA	Alternative Payment Arrangement (for Universal Credit benefit)
ASB	Anti-Social Behaviour
CAB	Citizens Advice Bureau
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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## Appendix A – SLHD Key Performance Indicator Summary Q1 2022/23

KPI	Indicator	21/22 Outturn	Q1	Q2	Q3	Q4	Target	DoT	R/A/ G
1	Percentage of current rent arrears against annual debit %	2.55%	2.62%				2.85% ytd 2.75% y/e	↓	✓
2	Void rent loss (lettable voids) %	0.79%	0.76%				0.50%	↑	●
3	Average Days to Re-let Standard Properties ytd days	33.7	33.6				20.0	↑	●
4	Number of Households placed in B&B Accommodation at month end (new KPI 2022/23)	n/a	76				45 ytd 30 y/e	n/a	●
5	Number of Full Duty Homelessness Acceptances ytd	384	96				no target	n/a	n/a
6	Number of homeless preventions ytd	566	150				no target	n/a	n/a
7	Complaints upheld as a % of customer interactions %	0.13%	0.12%				0.07%	↑	●
8	Number of tenancies sustained post support	98.3%	98.5%				97.3%	↑	✓
9	Number of repairs first visit complete	90.2%	94.3%				92.0%	↑	✓
10	Gas servicing: % of properties with a valid gas certificate	100.00%	99.94%				100.00%	↓	⚠
11	Days lost through sickness per FTE	11.90	2.35				1.87 ytd 7.90 y/e	↑	●
12	Percentage of Local Expenditure % Revenue and Capital	73.0%	74.6%				70.0%	↑	✓
13	ASB Cases Resolved as a % of All Cases Closed	97.6%	96.1%				95.6%	↓	✓
14	Number of residents undertaking training or education ytd	30	0				19 ytd 67 y/e	↓	●
15	Number of residents supported into employment ytd	51	7				7 ytd 30 y/e	↓	✓
16	Tenant satisfaction levels % (STAR)	84.8%	Annual KPI	Annual KPI	Annual KPI	Annual KPI	87.0%	n/a	n/a
17	Percentage of homes maintaining decent standard %	99.99%	Annual KPI	Annual KPI	Annual KPI	Annual KPI	100.00%	n/a	n/a
18	Tenant satisfaction with property condition % (STAR)	86.5%	Annual KPI	Annual KPI	Annual KPI	Annual KPI	89.4%	n/a	n/a
19	Energy efficiency. Target: achieve EPC Level C by 2030	70.32%	Annual KPI	Annual KPI	Annual KPI	Annual KPI	71.0%	n/a	n/a

- 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 ● ⚠ ✓