

Date: 28 March 2024

To: Chair and Members of the Overview and Scrutiny Management Committee

Report Title: St. Leger Homes of Doncaster Limited (SLHD) Key Performance Indicators (KPIs) and Tenant Satisfaction Measures (TSMs) update for Quarter 3 (Q3) ended 31 December 2023 (2023/24) and Value For money Statement for year ended 31 March 2023 (2022/23)

| Relevant Cabinet Member(s) | Wards Affected | Key Decision? |
|----------------------------|----------------|---------------|
| Clir Glyn Jones | All | No |

1. EXECUTIVE SUMMARY

- 1.1. As part of the agreed governance framework detailed in the Management Agreement there is a requirement to provide a quarterly performance report for the Executive Board of the City of Doncaster Council (CDC).
- 1.2. The Management Agreement acknowledges the importance of Value For Money (VFM) and requires both CDC and SLHD to use reasonable endeavours to deliver the best possible VFM. The agreement requires appropriate VFM reporting which includes a quarterly report of Key Performance Indicators (KPIs) and an annual VFM statement.
- 1.3. This report provides an opportunity to:
 - feedback on performance against the 2023/24 Key Performance Indicators (KPIs)
 Appendix A;
 - present SLHD's annual VFM statement for the financial year ended 31 March 2023 (2022/23). **Appendix B**;
 - consider latest 2023/24 benchmarking Appendices C(i) and C(ii); and
 - consider draft KPIs for 2024/25 Appendix D.
- 1.4. In relation to 2022/23 VFM performance, it was again very positive, in particular when benchmarking with our peers and also all housing providers nationally. Benchmarking again showed we had more cost and performance indicators above median than below, and VFM dashboards showed services to be in favourable quadrants.
- 1.5. For 2023/24, of the 20 KPIs measured at end of Q3, twelve were met or were within agreed tolerances of target. Some KPIs are new for 2023/24 and some are from the suite of Tenant Satisfaction Measures (TSM) from the Social Housing Regulation Bill.
- 1.6. In relation to the TSMs, SLHD carried out a series of tenant perception surveys over a five month period to the end of September 2023, and these have again been included, along with other TSM data.

2. **EXEMPT REPORT**

2.1. This report is not exempt.

3. RECOMMENDATIONS

- 3.1. That Members note the:
 - progress of SLHD's performance and the contribution SLHD makes to supporting Doncaster Council's (DC) strategic priorities;
 - annual VFM Statement for 2022/23; and
 - KPIS for 2024/25.

4. WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

4.1. As this report includes the progress on the SLHD KPIs, the implications of the contents may ultimately affect the delivery of services to the people of Doncaster.

5. BACKGROUND

- 5.1. The Management Agreement requires that an Annual Development Plan (ADP) and a suite of Key Performance Indicators (KPIs) are produced in agreement with Doncaster Council (CDC) officers, the Housing Portfolio holder and the Mayor.
- 5.2. The ADP identifies the key deliverables, outcomes, milestones and performance measures. The suite of KPIs is aligned with the ADP and also forms a key role in evidencing that SLHD is delivering VFM. SLHD also presents annually to CDC a review of its performance including a VFM assessment. This was the recommendation on VFM from the 3 July 2018 Cabinet report and forms part of this report.

6. 2023/24 QUARTER 3 (Q3) PERFORMANCE SUMMARY

- 6.1. In March 2023, 18 KPIs were agreed with Doncaster Council (CDC) for 2023/24. Seven of the KPIs are also in the 22 new Tenant Satisfaction Measures (TSMs) required for 2023/24. SLHD is measuring performance for the 22 TSMs and were reported first at Q2 2023/24, and are included again at Appendix C(i) as part of the benchmarking work.
- 6.2. In collecting the information during the year, performance data for the four additional Health and Safety measures (which are also TSMs) is now captured and has been added to the KPI schedule from Q2 onwards, to give a schedule of 22 KPIs for 2023/24.
- 6.3. Of the now 22 KPIs, four are normally measured annually tenant surveys (two), energy efficiency and Decent Homes Standard numbers, the same as in 2022/23. The tenant survey information is also now available.
- 6.4. The table below summarises the KPIs at the end of Q3, with comparatives, and shows twelve were met or were within agreed tolerances of target.

| KPIs | Q3 23/24 | Q2 23/24 | Q1 23/24 | Q4 22/23 | Q3 22/23 | Q2 22/23 | Q1 22/23 | Q4 21/22 | Q3 21/22 | Q2 21/22 | Q1 21/22 |
|--------------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Green (meeting target) | 9 | 8 | 4 | 6 | 7 | 5 | 6 | 7 | 7 | 6 | 6 |
| Amber (within tolerance) | 3 | 3 | 1 | 5 | 1 | 2 | 1 | 4 | 3 | 3 | 2 |
| Red (not meeting target) | 8 | 9 | 9 | 6 | 7 | 8 | 6 | 5 | 4 | 5 | 4 |

| No target (homelessness) | n/a | n/a | n/a | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 |
|--------------------------|-----|-----|-----|----|----|----|----|----|----|----|----|
| Quarterly / Annual | 2 | 2 | 4 | 0 | 2 | 2 | 4 | 0 | 2 | 2 | 4 |
| Total | 22 | 22 | 18 | 19 | 19 | 19 | 19 | 19 | 19 | 19 | 19 |

- 6.5. SLHD supports the Mayor's approach to setting challenging targets and is determined to continually improve performance, notwithstanding a background of higher demand for services and nationally lower social housing satisfaction levels.
- 6.6. We continue to benchmark our services nationally through Housemark, which provides timely information on how we are performing against other organisations. We continue to compare favourably with our peers and nationally with the majority of indicators submitted above median.
- 6.7. Tolerances which determine the amber status are consistent with CDC measures where possible. Performance data is cumulative year to date (YTD) unless otherwise indicated.

7. ANNUAL VFM PERFORMANCE SUMMARY (2022/23)

- 7.1. The VFM statement for 2022/23 was approved by SLHD's Board in December 2023 and is attached at **Appendix B.** It should be noted that Annual cost and performance benchmarking reports are not available to analyse until the October/November after year end, so the annual VFM statement is finalised in December each year. However, we also benchmark key performance measures in-year on a monthly basis, as set out at Appendix C(ii), which is much more current.
- 7.2. Operationally, no new services were introduced in 2022/23, although core services were constantly reviewed and underwent some realignment or process improvements during the year. The main projects were in relation to Building Safer Futures, the Social Housing Bill, commencement of a number of 'Journeys to Excellence' projects around repairs, homelessness and customer access, and addressing cost of living challenges.
- 7.3. Budgets included targeted savings of £333k therefore stayed the same or reduced, except where there had been agreed cost or inflationary increases with CDC.
- 7.4. 2022/23 operational performance was again good or improving against a suite of challenging targets. KPIs showed a mix of meeting, within tolerance of, or not meeting target, but with improving trends in most areas. All were robustly managed and SLHD operated within the challenging budget.
- 7.5. Doncaster has the lowest rents within South Yorkshire, and 9th lowest nationally (England) of all Housing Revenue Accounts (HRAs), which drives management fee income and provides many budget challenges to the services we strive to deliver.
- 7.6. Benchmarking is a key element of assessing VFM and 2022/23 was again positive with more cost and performance indicators in the upper quartiles (above median).
- 7.7. VFM dashboards again compared favourably with our peers and also all housing providers nationally, with most indicators selected in the low cost, high performance 'green' quarter of the 2x2 dashboard (see below).

- 7.8. The dashboards do show a slight deterioration on 2021/22's exceptional results, where the services were all in the green quadrant, and this occurs in three areas:
 - 6 : Customer Services Costs remain low and a similar position to 2021/22, but Performance has dropped compared to others.
 - 7: Neighbourhood Management Costs remain low and similar position to last year, but Performance has dropped compared to others. (STAR survey for neighbourhood as a place to live)
 - 8 : Community investment Performance has improved slightly but costs have increased when compared. This measure includes our financial inclusion/tenancy support team so the dashboard move is likely to be due to others spending or allocating less to this category.
- 7.9. All the other five indicators are in Green again and there are some movements within this area compared to last year, eg STAR satisfaction with repairs service has improved.

PEER GROUP VFM DASHBOARD 2022/23 ALMOs, Metropolitan Boroughs and Unitary authorities (approximately 30 providers)

| Key | Service | Cost indicator – Cost Per Property | Performance indicator |
|-----|---------------------------|---------------------------------------|---|
| 1 | Responsive repairs | Responsive repairs | STAR satisfaction with repairs service |
| 2 | Void repairs and lettings | Void repairs | Void rent loss % |
| 3 | Rent arrears & collection | Rent arrears & collection | Current arrears % |
| 4 | Tenancy Management | Tenancy management | STAR satisfaction with service overall |
| 5 | Customer involvement | Customer involvement | STAR satisfaction with views being listened and acted |
| 6 | Customer services | Housing management | % of stage 1 complaints responded to within target time * |
| 7 | Neighbourhood m'ment | Estate services | STAR satisfaction with neighbourhood as place to live |
| 8 | Community investment | Community investment | Residents supported into employment |

^{*} Average days to respond to complaints (previous year's indicator 2021/22)



- 7.10. At a more detailed level, indicators are banded into quartiles, ie Quartile 1 is top 25%, Quartile 4 bottom 25%, etc.. Benchmarking was positive overall with more cost and performance indicators in the upper quartiles (above Median), with our peers (~30 ALMOs, Metropolitan Boroughs and Unitary Authorities) and also all providers nationally (~110 organisations).
- 7.11. All of the above shows that SLHD remains a low cost, high performing organisation.
- 7.12. As in previous years, within the full suite of 100+ cost and performance indicators, there are areas of good performance and also areas for improvement or further investigation, which will be addressed.

8. KPI DETAILED COMMENTARY

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

Profiled Target Q3 23/24 3.10% Q3 23/24 Performance 3.09% BETTE

BETTER THAN TARGET - GREEN

| | Q3 23/24 | Q2 23/24 | Q1 23/24 | Q4 22/23 | Q3 22/23 | Q2 22/23 | Q1 22/23 | Q4 21/22 | Q3 21/22 | Q2 21/22 | Q1 21/22 |
|-------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| Arrears % | 3.09% | 2.92% | 2.80% | 2.74% | 2.98% | 2.80% | 2.62% | 2.55% | 2.92% | 2.57% | 2.55% |
| Profiled target % | 3.10% | 3.00% | 2.85% | 2.75% | 3.00% | 3.00% | 2.85% | 3.00% | 3.42% | 3.21% | 3.16% |

Arrears at the end of December 2023 were 3.09% compared with 2.90% at the end of November. Whilst this is a significant increase, it is in line with the profiled arrears target for this point in the year.

However, the year-end target of 2.75% remains a challenging target, particularly in the current economic climate.

We continue to closely monitor all arrears bands to ensure actions are timely and targeted. An arrears action plan has been developed and in place with our Income Management teams to address rising arrears through to the end of March. Focus remains to ensure tenants have maximum support when in financial crisis and we continue to seek DHPs, external grants and other mechanisms to help alleviate financial hardship for those most in need.

Performance continues to benchmark favourably with peers.

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

Target 0.50%
Q3 YTD 23/24 performance 0.68% WORSE THAN TARGET – RED

The KPI of 0.50% equates to approximately 110 void properties.

The total number of voids of 113 consists of 108 lettable (96 general voids + 12 acquisitions) and 5 non lettable voids. Lettable void numbers at the end of December of

108 have increased from September's 79. The number of lettable voids held in the year to date has generally fluctuated between 110 and 130, but improved significantly in the latter part of Q2, and was below 100 from early September until late December (averaging 84) before increasing again at the end of Q3.

| | Q3 | Q2 | Q1 | Q4 | Q3 | Q2 | Q1 |
|-----------------------|-------|-------|-------|-------|-------|-------|-------|
| | 23/24 | 23/24 | 23/24 | 22/23 | 22/23 | 22/23 | 22/23 |
| Void rent loss YTD % | 0.68% | 0.70% | 0.73% | 0.67% | 0.67% | 0.72% | 0.76% |
| Target % | 0.50% | 0.50% | 0.50% | 0.50% | 0.50% | 0.50% | 0.50% |
| Lettable Void numbers | 108 | 79 | 122 | 127 | 118 | 92 | 133 |
| Total Void numbers | 113 | 98 | 132 | 133 | 126 | 110 | 151 |

Void Rent Loss (VRL) in-month performance shows an improvement at 0.67% when comparing to the previous month of 0.71%.

Cumulative performance has reduced slightly as a result of low void levels in Q3 to 0.68%.

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

Target 20.0 days Q3 23/24 YTD performance 24.6 days WORSE THAN TARGET – RED

| | Q3 | Q2 | Q1 | Q4 | Q3 | Q2 | Q1 |
|-------------|-------|-------|-------|-------|-------|-------|-------|
| | 23/24 | 23/24 | 23/24 | 22/23 | 22/23 | 22/23 | 22/23 |
| Re-let days | 24.6 | 25.8 | 25.6 | 26.7 | 26.9 | 29.1 | 33.6 |

December in-month performance shows a continued improvement at 20.7 days when comparing to the previous month of 20.9 days.

Cumulative performance also shows an improvement 24.6 days, when comparing to November YTD of 25.0 days and Quarter 2's YTD of 25.8 days

Void properties receive continued and extensive focus as we work towards meeting this challenging target. Although the KPI is not meeting target, annual (22/23) and monthly (23/24) benchmarking information continues to show that performance in the region of 25 days, which SLHD has been at for around 18 months, is well within the top quartile.

8.4. KPI 4: Number of Households placed in hotel accommodation at month end

Profiled Target 40
Q3 23/24 performance 91 WORSE THAN TARGET – RED

The table below summarises the KPI at the end of each month and reflects the demands on the service. Numbers placed has been impacted by the Council's Ending Rough Sleeping Action Plan and in particular the Government's Accelerated Migration Scheme which has agreed to give accommodation to people rough sleeping despite there being no statutory duty to do so and accounted for twelve placements at the month end.

| | Dec | Nov | Oct | Sep | Aug | Jul | Jun | May | Apr |
|---|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| No of Households in hotels at month end | 91 | 111 | 76 | 42 | 37 | 43 | 50 | 48 | 26 |

91 placements following the 136 placed in the previous month appears low but remains 49% higher than December last year.

This resulted in 2,735 total paid nights, a 10% increase on November and a consequence of the spike in placements experienced in October.

Whilst the number of households placed has increased, the team are continuing to minimise the number of nights they are staying and moved on 87 households from hotels during the month and ensured no children spent Christmas day in a hotel.

8.5. KPI 5: % of Settled Accommodation at Prevention Stage (New KPI for 2023/24)

Target 60% Q3 23/24 performance YTD 27% WORSE THAN TARGET – RED

This is a new KPI for 2023/24 and measures the total number of households whose prevention duty ended during the month and resulted in accommodation secured for 6+months, expressed as a percentage.

21 prevention cases were closed within the month of which 5 were able to secure existing or alternative accommodation. The sheer demand on the front end of the service and vacancies have impacted on capacity to undertake effective casework.

We have new recruits including short term agency staff that should provide much needed capacity to reduce the backlog of cases and direct resource to more effective casework.

The target was set at a time when the national picture was different and SLHD was advised by DLUHC. The official government figures for January to March 2023 show the national figure to be 45% and Yorkshire and Humberside to be 38%. Doncaster was performing at 38% for that same January to March 2023 period.

8.6. <u>KPI 6: Stage 1 and Stage 2 complaints relative to the size of the landlord per 1000 properties (New KPI for 2023/24)</u>

Profiled Target YTD 37.5
Q3 23/24 performance YTD 47.8 WORSE THAN TARGET – RED

This is a new KPI for 23/24 and is also part of the new Tenant Satisfaction Measures required by the Regulator.

For the target to have been met, less than 750 complaints would have been received. For the nine months to date, 950 complaints have been received and this equates to 47.8 complaints per 1,000 properties (44.7+3.1). The split is as follows:

Number of Stage 1 complaints received for the YTD is 888 = 44.7Number of Stage 2 complaints received for the YTD is 62 = 3.1

Nearly three quarters of all complaints are due to four main themes – in order; policy, time taken, staffing and service delivery. An action plan is in place and monitored by P&I Committee.

8.7. KPI 7: Percentage of complaints responded to within timescale (New KPI for 23/24)

Target 92.3% Q3 23/24 performance YTD 86.6% WITHIN TOLERANCES - AMBER

This is a new KPI for 2023/24 and is one of the new Regulatory TSMs. Complaints performance is measured one month in arrears.

In November 2023 we received 98 complaints. This is a decrease of 47 complaints compared to November 2022 (145).

We responded to 96 of the 98 in timescale (97.7%) We have completed complaints training for the majority of our Service Investigating Officers (SIOs) on how to investigate and respond to complaints. This was completed at the beginning of Sept 23. Mop up sessions are continuing for SIOs who were unavailable to attend the training for various reasons at the time, this will be completed by the end of Feb 2024.

We are also in the final development stage of the OH complaints management system, this will go live imminently following training for all Service Investigating Officers.

This new way of working across the organisation will provide improved automation and support improvements to how quickly we process complaints. This project has had recent delays due to other IT priorities.

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

Target 97.3%
Q3 23/24 performance YTD 99.0% 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 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% |

| Q1 22/23 | 267 | 263 | 98.5% | 97.3% |
|----------|-------|-------|-------|-------|
| Q2 22/23 | 500 | 484 | 96.8% | 97.3% |
| Q3 22/23 | 739 | 714 | 96.6% | 97.3% |
| Q4 22/23 | 1,040 | 1,007 | 96.8% | 97.3% |
| | | | | |
| Q1 23/24 | 196 | 192 | 98.0% | 97.3% |
| Q2 23/24 | 435 | 428 | 98.4% | 97.3% |
| Q3 23/24 | 623 | 617 | 99.0% | 97.3% |

We are pleased that performance of in December remains at 100% for the 5th consecutive month. The cumulative target for the year is now at 99.04% of tenancies still sustained 6 months after their support has ended. The year-end target is 97.3%.

The team continue to work hard with our most vulnerable and high risk tenants and have achieved over £678,000 of financial gains so far this financial year.

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

Target 94.0% Q3 23/24 performance YTD 95.4% 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.

| | | No. of | | |
|-------------------|-----------|-------------|---------------|----------|
| | No. of | repairs | % repairs | |
| | repairs | completed | complete | |
| Period YTD | completed | first visit | d first visit | Target % |
| | | | | |
| 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% |
| | | | | |
| Q1 22/23 | 7,758 | 7,308 | 94.2% | 92.0% |
| Q2 22/23 | 14,243 | 13,426 | 94.3% | 92.0% |
| Q3 22/23 | 23,093 | 21,824 | 94.5% | 92.0% |
| Q4 22/23 | 32,067 | 30,406 | 94.8% | 92.0% |
| | | | | |
| Q1 23/24 | 7,803 | 7,402 | 94.9% | 94.0% |
| Q2 23/24 | 14,899 | 14,240 | 95.6% | 94.0% |
| Q3 23/24 | 24,368 | 23,246 | 95.4% | 94.0% |

The volume of repairs completed in Q3 was higher than the previous two quarters, and although the percentage completed at first visit dropped slightly it was still above target

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

Target 100.00%

Q3 23/24 performance YTD 100.00% MEETING TARGET – GREEN

The 2023/24 gas servicing programme is now complete.

8.11. KPI 10b : Fire - % homes for which all required fire risk assessments have been carried out

Target 100.00%

Q3 23/24 performance YTD 100.00% MEETING TARGET – GREEN

At the end of Q3, all the required fire risk assessments have been carried out.

8.12. <u>KPI 10c</u>: <u>Asbestos - % homes for which all required asbestos management surveys or re-inspections have been carried out</u>

Target 100.00%

Q3 23/24 performance YTD 100.00% MEETING TARGET – GREEN

At the end of Q3, all the required surveys and re-inspections have been carried out.

8.13. KPI 10d : Legionella - % homes for which all required risk assessments have been carried out

Target 100.00%

Q3 23/24 performance YTD 100.00% MEETING TARGET – GREEN

At the end of Q3, all the required risk assessments have been carried out.

8.14. KPI 10b: Lifts - % homes for which all required communal passenger lift safety checks have been carried out.

Target 100.00%

Q3 23/24 performance YTD 100.00% MEETING TARGET – GREEN

At the end of Q3, all the required safety checks have been carried out.

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

Target 8.5 days

Q3 YTD performance * 11.4 days WORSE THAN TARGET – RED

December saw similar absence levels to the previous two months (0.93 days per FTE, 0.92 in November and 0.98 in October). This is against a target each month of approximately 0.71 days. This brings the YTD figure to 8.37 days per FTE against a target of 6.22 days per FTE. This equates to an outturn of 11.4 days per FTE using the CDC calculation method, which is worse than the annual target of 8.5 days.

^{*} Performance is now an annualised calculation and is consistent with CDC

In December, stress, depression and anxiety remained the highest reason for absence, and YTD accounts for 50.8%. This is followed by MSK contributing to 16.4% and infection and virus which now account for 13% of the absence YTD. Whist stress related absence remains high there has been a significant decrease in December in the total number of days bringing the total in the month to 144.5 days (vs 187.0 days in November). Work related causes of stress remain low accounting for less than 10 days.

On average, long term cases account for 0.41 days per FTE per month and short term absence 0.52 days.

The volume of stage meetings and early interventions continues to remain high since the introduction of the new policy which is a positive step in ensuring that colleagues are supported to return to work / remain in work. This month we have seen additional interventions such as additional physic assessments funded by St Leger to expediate an employees return to work. Cases continue to be manged on a case by case basis.

8.16. KPI 12: % of Local Revenue and Capital expenditure

Target 70%
Q3 23/24 performance YTD 41% WORSE THAN TARGET – RED

December spend figures of £1.94m were the lowest for six months due to the last week being the Christmas break. Average spend per month in the nine months to date is £2.17m, with £0.88m on average within Doncaster.

The local percentage in the month was up again in the month to 48% (£1.01m) and therefore increased the YTD slightly to 41%, but local spend is still well below where it needs to be for the KPI to be meeting target. At the Q3 stage of 23/24, Doncaster spend, both capital & revenue in nature, totals £7.9m (41%) out of total spend to all suppliers of £19.4m.

£1.38m of the December spend was in Yorkshire & Humber and represents 71% of the total, just above average spend in the wider region in the year to date.

Wates were again the highest paid supplier in the month (£300k), impacting adversely on both Doncaster and Y&H figures as they are classed as Southeast. The number of suppliers receiving payments in each is month continues to be around the 140 level, but a very small number - six for December - were above £100k, and totalled £1.0m, 49% of the total spend. Four of the six were in Doncaster and totalled £0.5m.

8.17. KPI 13: Number of ASB cases per 1,000 properties (New KPI for 2023/24)

Profiled Target YTD 45
Q3 23/24 performance YTD 47.9 WITHIN TOLERANCES - AMBER

This is a new KPI for 23/24 and is also part of the new TSMs required by the Regulator. A year to date target of 45 per 1,000 properties equates to around 900 ASB cases. The number of actual cases was 952.

December 2023 out turned slightly higher than last December, though cumulatively for 2023/24 we are tracking under last year's figures, with a cumulative total of 47.9 per 1,000 properties, compared with 48.6 per 1,000 for 2022/23.

We are currently tracking close to the year-end target of 60 per 1,000 and the traditional reduction in reports during the winter months will contribute towards this after the summer spike. For further context, the regional average for Yorkshire and The Humber is 75 per 1,000, so SLHD compares very favourably to this.

| | 23/24 | 22/23 |
|-----------|-------|-------|
| April | 86 | 120 |
| May | 127 | 146 |
| June | 158 | 114 |
| July | 105 | 120 |
| Aug | 113 | 132 |
| Sep | 116 | 107 |
| Oct | 98 | 102 |
| Nov | 89 | 82 |
| Dec | 61 | 46 |
| YTD total | 952 | 969 |

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

| Profiled Target YTD | 73 | |
|--------------------------|----|-------------------------------|
| Q3 23/24 performance YTD | 82 | MEETING TARGET - GREEN |

At the end of Q3 we are running ahead of our target with 84 individuals supported against a target of 73.

43 people have been supported into employment including 14 apprentices. Over the last three months, we have also seen WOW participants gain jobs in Ocado, warehousing, decorating and in a school.

In November, five new people started as External Property Maintenance Operatives with us following on from the Multiskills course at College.

The other 41 comes from training, including the most recent WOW Cleaning course in November that saw ten people start the course. In addition, we have also given three people 1 to 1 support in job hunting and interview skills since October.

9. Annual KPIs

9.1. For 2023/24, there are four annual KPIs. These are shown below with the most recent performance - 2023/24 TSM or March 2023 year end - included for reference

9.2. KPI 16: Tenant satisfaction with overall service

Target 2023/24 85.0% March 23 year end Performance 81.3%

Q3 YTD 2023/24 performance 76.0% new TSM WORSE THAN TARGET – RED

The TSM tenant perception surveys undertaken over a five month period from May to September 2023 contain a measure "TP01 % respondents who report that they are satisfied with the overall service from their landlord" and this reported 76%. This is an entirely different KPI and indications are that we are top quartile performance compared to all other ALMOs.

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

Target 2023/24 100.00% March 23 year end Performance 99.69%

0.31% of homes were categorised as non-decent at the end of 2022/23. This equates to 62 properties where the roof is in a poor condition as identified through recent stock condition surveys. Where a major component, such as a roof, is in poor condition and requires replacement or major repair, this automatically makes the property non-decent.

The properties identified form part of a dedicated external investment scheme, with the aim to carry out the necessary improvements during the 2023/24 programme.

9.4. KPI 18: Tenant satisfaction with property condition %

Target 2023/24 83.0% March 23 year end Performance 79.7%

Q3 YTD 2023/24 performance 80.0% new TSM WITHIN TOLERANCES - AMBER

The TSM tenant perception surveys undertaken over a five month period from May to September 2023 contain a measure "TP02: % respondents who report that they are satisfied with the overall repairs service" and this reported 80%. Recent benchmarking information indicates this is top quartile performance.

9.5. KPI 19: Energy efficiency ANNUAL KPI:

Target 2023/24 73.5% March 23 year end Performance 69.22%

WITHIN TOLERANCES - AMBER

This was a new KPI from 2020/21 and requires all properties to achieve EPC Level C by 2030. Data was not available at the year end and is still being analysed and validated.

10. BACKGROUND PAPERS

10.1. None

11. OPTIONS CONSIDERED

11.1. Not applicable

12. REASONS FOR RECOMMENDED OPTION

12.1. Not applicable

13. IMPACT ON THE COUNCIL'S KEY OUTCOMES

| Great 8 Priority | Positive Overall | Mix of Positive & Negative | Trade- offs to consider – Negative overall | Neutral or No implications |
|--|---------------------|----------------------------------|--|----------------------------|
| Tackling Climate Change | ✓ | | | |
| Comments: The main related KPI is for energy efficiency of properties and is an annual | | | | |

indicator.

| Developing the skills to thrive in life and in work | ✓ | | |
|---|---|--|--|
|---|---|--|--|

Comments: SLHD work 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. There are two specific KPIs related to this priority and as with previous quarter ends, one was exceeding target and one was below target. However, the two are closely linked and when combined performance overall would have exceeded the combined target.

| Making Doncaster the | | |
|----------------------|----------|--|
| best | √ | |
| place to do business | Y | |
| and create good jobs | | |

Comments: KPIs relate to target spending locally within Doncaster and also within South Yorkshire where possible. Local spend was below target but is being addressed. Residents supported into training education or employment is below target but should improve as the year progresses as a result of a number of initiatives.

| В | uilding opportunities | | |
|----|-----------------------|---|--|
| fo | or | 1 | |
| he | ealthier, happier and | • | |
| lo | onger lives for all | | |

Comments: All of the KPIs have an influence on opportunities for healthier, happier and longer lives, by maintaining tenancies, providing secure, warm, safe homes, safe

| neighbourhoods, training and employment targets, and addressing homelessness issues | | | | | |
|---|----------------|------------------------|---------------------|----------|--|
| in the borough. | | | | | |
| · · | | | | | |
| | , | | | | |
| Creating safer, stronger, | | | | | |
| greener and cleaner | | ✓ | | | |
| communities where | | • | | | |
| everyone belongs | | | | | |
| Comments: A number of the KPIs | • | | ppendix A ha | ave been | |
| established to have a positive influe | ence on this p | oriority. | | | |
| | | | | | |
| Nurturing a child and | | | | | |
| family-friendly borough | ✓ | | | | |
| Tailing-intending borough | | | | | |
| Comments: A number of the KPIs a | as reported al | oove and at A p | pendix A wil | l have a | |
| positive influence on this priority. | · | • | | | |
| , | | | | | |
| Building Transport and | | | | | |
| digital connections fit | | | | ✓ | |
| for the future | | | | Y | |
| | | | | | |
| Comments: Not applicable | | | | | |
| | | Г | | T | |
| Promoting the borough | | | | | |
| and its cultural, | | | | ✓ | |
| sporting, and heritage | | | | • | |
| opportunities | | | | | |
| Comments: Not applicable | | | | | |
| | | | | | |
| | ļ | _ | | | |
| Fair & Inclusive | ļ | √ | | | |
| | | · | | | |
| Comments: SLHD has its own Equality and Diversity strategy and fair and inclusive | | | | | |
| considerations are implicit in all of the service provided, and therefore KPIs. | | | | | |
| considerations are implicit in all of the service provided, and therefore it is. | | | | | |
| | | | | | |

14. Legal Implications [SF 09.02.24]

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

15. Financial Implications [JC 01.03.24

15.1. In 2023/24 SLHD will receive management fees of £39.3m from DC. This is made up of £36.8m from the Housing Revenue Account and £2.5m from the General Fund to pay for the general fund services managed by SLHD.

16. Human Resources Implications [AA 14.02.24.]

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

17. Technology Implications [ET 09.02.24]

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

RISKS AND ASSUMPTIONS

18. IMPACT ON THE COUNCIL'S KEY OUTCOMES

Specific risks and assumptions are included in the body of this report

19. CONSULTATION

Not applicable

20. BACKGROUND PAPERS

None

21. GLOSSARY OF ACRONYMS AND ABBREVIATIONS

See below

ADP Annual Development Plan ASB Anti- Social Behaviour DC Doncaster Council

DHP Discretionary Housing Payment
DWP Department for Work and Pensions
EPM External Property Maintenance

FTE Full Time Equivalent

KPI Key Performance Indicator

MSK Musculo-Skeletal

SLHD St Leger Homes of Doncaster STAR Survey of Tenants and Residents

STF Sustainable Tenancy Fund

SWEP Severe Weather Emergency Protocol

TSM Tenant Satisfaction Measure

WOW World of Work YTD Year to date

PRS Private Rented Sector

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Appendix A
Appendix B
Appendix C(i)
Appendix C(ii)
Appendix C(ii)
Appendix C(ii)
Appendix D

SLHD Key Performance Indicator Summary Q3 2023/24
Annual VFM Statement 2022/23
Benchmarking TSMs – Housemark 23/24 YTD
Benchmarking KPIs - Housemark monthly pulse survey –
September and November 2023 (in month performance)
Proposed KPIS for 2024/24.