

### **South Essex Homes Limited**

# **Minutes of Board Meeting**

Date: 26 October 2023

**Start: 3.00pm End: 6.05pm** 

#### **Via MS Teams**

#### **Minutes**

**Present** Chris March (CM) – Chair of Board from Agenda Item 2: Roger

Eastwood (RE); Chris Silvey (CS); Keith Ducker (KD), David Joyce (DJ), Sacha Jevans (SJ), Michael Oxley (MO), Brian Beggs (BB),

Martin Terry (MT); Kevin Buck (KB)

In attendance: Mike Gatrell (MG) – Chief Executive, Mario Ambrose (MA) - Executive

Director; Kevin Hazlewood (KH) – Director Operations (Property); Sarah Lander (SL) – Director Operations (Housing); Daniel Lyons (DL) – Director Finance and Corporate Services; Carol Cooper (CC) – Company Secretary; Courtney Merrifield (CME) – Board Support, Ben Harrison (BH), Housing Sustainability Officer; Lynsey Hurd LH) –

Business Development Officer SEPS; Karen Knight (KH) – Operations

Managers, SEPS; Tim Holland (TH) – Head of Housing Supply; Brenda Tilley (BT); Chris McPhillips (CMP) – Scrutiny Forum

**Tenant Observers:** Majzoub Ali – Public Meeting Only

	PUBLIC AGENDA	
		Action
1.	Appointment of Chair	
1.1	CC confirmed that as noted in the report there had been one expression of interest received for the role of Chair from Chris March who left the room whilst the Board discussed the appointment.	
1.2	MT thanked Roger Eastwood for the work undertaken in his time as Chair.	

1.3	Recommendation:	
i)	The Board elected and agreed the appointment of Chris March as the Chair of the Board for a one-year term of office in accordance with the Articles of Association, and to act as Chair from Agenda Item 2	
2.	Welcome & Introductions	
2.1	CM welcomed the Scrutiny Forum to the meeting	
3.	Apologies for Absence	
3.1	Apologies were received from Carly Volke.	
4.	Declarations of Interest	
4.1	There were no declarations of interest.	
5.	Scrutiny Forum – Annual Review and Work Programme	
5.1	SL introduced the members of the Forum and CMP provided an overview of the work undertaken by the Forum over the past year. The planned review of the contact centre will be undertaken once the changes within the contact centre team had been completed. SL confirmed that internal work processes had been updated following recommendations made by the Forum and that the reviews were helpful in assisting SEH to offer an improved service to residents.	
5.2	MT sought clarity as to whether the issues related to cold properties was being treated as a priority by SEH. SL confirmed that SEH work in conjunction with the fraud team in relation to cold properties. MG confirmed that funding from the HRA was used to fund a role within the Fraud Team to focus on housing fraud.	
5.3	DJ updated the Board that the fraud team report regularly to the Audit and Risk Committee.	
5.4	Recommendation:	
i)	The Board noted the note the content of this report and, in particular, the information contained in the Southend Resident Scrutiny Forum's Annual Report October 2023 (Appendix One).	
6.	Better Queensway Update – Deferred	
6.1	The Board had been notified that this item has been deferred.	

## 7. Social Housing Decarbonisation Fund progress update

BH provided a presentation on the background of works required related to net zero and progress on work undertaken as part of the SHDF.

- 7.1 CM suggested that Board members may wish to visit the retrofit house. BH confirmed for CM that the property will continue to be monitored once tenanted and to ensure that tenants are using the technology correctly.
- 7.2 BH confirmed for MT the 110 properties being updated will be premonitored to be able to see the benefit of the works once installed.
- 7.3 KB thanked BH for the work being undertaken and noted it is vitally important work that could see a huge cost benefit and energy reduction for tenants.
- 7.4 SJ sought clarity in relation to funding to meet next zero and whether this is achievable given the challenges. BH noted that all housing providers will struggle to achieve net zero as there are outside contributing such as the National Grid. Funding is also a challenge with most schemes requiring match funding of 50% before funding is awarded as was the case with the SHDF.
- 7.5 MO sought clarity as to whether the Executive Management Team (EMT) were concerned, given the performance of Morgan Sindall (MS) in relation to the Repairs & Maintenance contract and the contract coming to an end, in that the same issues may occur as part of this project. KH confirmed that the way MS operate as a company the SHDF work is being undertaken by a different branch of the organisation which is not connected to the repairs and maintenance contract. The contract scope allowed working in partnership and MS supported both SCC and SEH through the bid and their accreditation assisted in the bid. The Senior Director at MS sees this project as a separate and distinct piece of work and EMT are therefore not concerned.
- DJ noted that given the cost of the works to the properties there may be some properties that cannot be improved in this way and sought clarity as to whether SCC have a strategic approach to those properties. KH confirmed that there is further work to be undertaken, particularly around data relating to properties and that there is a specific group looking at data management and this can be modelled across all interventions. There will be some properties that will be difficult to improve but with ongoing advances in technology there may be different ways to achieve the same result. It was noted that decarbonisation is a long and expensive process across the whole housing sector.

7.7	RE sought clarity as to whether the HRA can support this level of investment. TH confirmed that SCC are currently looking at the HRA business model for the next 30 years and how the HRA can be modelled to support these types of work.	
7.8	BH confirmed for BB that properties are prioritised using the EPC data held and that the worst properties are targeted first, although the project has looked at the logistics and tried to ensure that areas are targeted to make the project more efficient rather than looking at individual properties across the city.	
8.	Public Minutes & Matters Arising from meeting held 25 July 2023	
8.1	The Minutes were agreed as an accurate record of the meeting	
8.2	An amendment to 10.2 in the minutes was made relating to 100% compliance with all FRAs.	
8.3	Matters Arising 9.4 – MT sought clarity regarding the SEH procurement policy in relation to a new R&M contractor. KH confirmed that the SEH procurement policy aligns with SCC's procurement policy. The policy follows public contracted works legislation and SEH are being supported by an external consultant to provide overall assurance and guidance. MT noted that SCC's Social Value Policy states that where possible contracts should be awarded to local contractors. KH confirmed that the current contract included social value clauses. KH noted that MS engagement with residents and social value has been exemplary. As part of the evaluation process the social value of contractors will be measured prior to being invited to bid at 2 <sup>nd</sup> stage.	
9.	Residents' Voice Your View	
9.1	The Residents' Voice Your View question and answer were read to the Board and those members of the public present	
9.2	MO provided information regarding TPAS membership. The cost of membership of a housing organisation (depending on stock size) is approximately £1800 per year. KD confirmed that as a private member of TPAS he felt that there was a lot of overlap with the NFA. The Board agreed that as SEH is a member of the NFA they would not pursue membership of TPAS at this time.	
10.	Governance & Stewardship Report	
10.1	CC provided a brief overview of the recommendations in the report.	

10.2	The items for appointment of Vice Chair and Health & Safety Champion were discussed jointly. Prior to Board discussion BB agreed to withdraw his interest in the role of Health & Safety Champion.	
10.3	BB and KD left the room in order for the Board to discuss the appointments.	
10.4	The Board agreed that KD would be a good representative as the Health & Safety Champion and that this role would work well with his two existing roles of Resident Engagement Champion and Complaints Champion. The Board therefore agreed the appointment of KD as Health and Safety Champion.	
10.5	The Board unanimously appointed Brian Beggs to the role of Vice Chair.	
10.6	BB and KD rejoined the meeting and accepted the roles.	
10.7	DL updated that following a meeting with the Housing Ombudsman (HO) to discuss the Complaints Policy, the HO had made some minor amendments and therefore the Policy had been updated since being approved by the Board at the July meeting.	
10.8	DJ suggested that the use of the phrase "formal complaints" intimated that there are also "informal" complaints which is not the case. The Board requested that DL check with the HO Complaints Guide to see what wording is used there. If "formal complaints" is not used by the HO, then the Board requested that the word "formal" be removed.	DL
10.9	DL clarified for MT that the Board are provided with an annual report relating to complaints which was presented at the July meeting.	
10.10	DJ suggested that bullet point 6 in paragraph 2.2 of the Unacceptable Behaviour Policy be clarified as it wasn't clear from the policy what this meant. KH to review.	KH
10.11	BB sought clarity as to whether the policy was robust enough to allow SEH to take action in cases of ASB. SL confirmed that there is a separate ASB Policy which covers the broader issue of ASB and action.	
10.12	DJ was concerned that the suggestion in paragraph 7.2 of the Damp Mould and Condensation Policy, that "the tenant could be moved to a more suitable home if available and appropriate" could be misleading for the tenant and raise false expectations. SL noted that this would be considered if the DMC could not be solved due to overcrowding or poor ventilation in the property.	

10.13	MT also requested that this be reworded.	
10.14	KH noted that this is a policy statement showing the wider world that we take the matter of DMC seriously hence it was drafted to underpin SCC's strategy across the city. There is a potential of relocation where treatment and insulation would not solve the issue due to overcrowding and poor ventilation and felt that the possibility of alternative accommodation should be included in the policy. DJ still felt that despite this the statement could raise expectations unfairly. KH agreed to reword the statement.	КН
10.15	Recommendations:	
i)	The Board agreed and appointed Brian Beggs as Vice Chair	
ii)	The Board noted the Chair's Action to appoint Kevin Buck and Brian Beggs to Personnel & Remuneration Committee and Audit & Risk Committee respectively.	
iii)	The Board agreed the appointment of Martin Terry to the Personnel & Remuneration Committee	
iv)	The Board agreed and appointed Keith Ducker as Health & Safety Champion	
v)	The Board noted the Self-Assessment against the Housing Ombudsman Code of Complaint Handling	
vi)	The Board agreed the updated Personnel & Remuneration Committee's Terms of Reference	
vii)	The Board agreed the Complaints Policy, pending minor adjustments.	
viii)	The Board agreed the Reasonable Adjustments Policy.	
ix)	The Board agreed the Unacceptable Behaviour Policy, pending minor adjustments	
x)	The Board agreed the Damp Mould and Condensation Policy, pending minor adjustments	
xi)	The Board noted the update relating to recruitment of SEPS' Board Members and the members of the interview panel.	

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11.	Chair's Remarks	
11.1	CM thanked the Board members for electing him as Chair and thanked Roger Eastwood for all the work undertaken during his tenure. CM also noted that George Sutherland, Chair of SEPS' Board had stepped down after completing his maximum term and that GS had been with the organisation for 18 years.	
12.	Health & Safety Compliance Report	
12.1	KH noted that paragraph 3.5 provides the current position relating to building high rise registration and confirmed that at this time, despite being chased, invoices are still awaited from the Building Safety Regulator. The Team continues to chase.	
12.2	DJ expressed concern that it was not clear for the reasons that some properties are non-compliant. KH confirmed that there is reference in the metrics appendix as to the corresponding paragraph within the report so that Board members could see the overall situation.	
12.3	KB thanked MA for showing him the sprinkler system at Cecil Court and KB is hopeful that this will be rolled out to the whole stock. KB left the meeting.	
12.4	KH confirmed for BB that all passenger lifts have undergone insurance inspection and also undergo additional monthly service regimes ensuring LOLER compliance. LOLER does not apply to the domestic lifts and where there are domestic lifts SEH adheres to HSE guidance.	
12.5	MO expressed concern with non-compliance in paragraphs 5.2 and 5.3. KH confirmed that he is meeting with the contractor on 2 November and preliminary discussions have been undertaken to be able to understand why 79 locations in communal areas have not been completed.	
12.6	Recommendation:	
i)	The Board noted the metrics of the Corporate Compliance Position Statement and the statements in sections 4 to 10 of this report	
ii)	The Board noted the actions being taken to regularise positions where required.	
13.	Damp, Mould & Condensation Update Report	
13.1	KH updated that there has been an increase in the number of properties with leaks and a deep dive of data will be undertaken to try and understand the reasons behind this.	

i)	The Board noted the update provided on financial information as at September 2023	
14.4	Recommendations:	
14.3	MT noted the importance of engaging with residents which can help with perception issues. DL confirmed that a quarterly newsletter – Insight – is sent to all residents. DL to check to see if Board members also receive a copy.	DL
14.2	due to the poor performance of the contractor and the need to use secondary contractors. It was noted that the contractor poor performance has also led to a significant increase in complaints.  MO noted that feedback from residents regarding satisfaction is concerning although it is not clear what the reasons for the feedback are. DL confirmed that this information is from last year's survey and this year's survey is currently being undertaken. There has been an increase in dissatisfaction across the sector. This year additional data will be collected regarding the complaints question as there has been confusing data as to whether residents have actually made a formal complaint and are dissatisfied with the outcome or whether something has just been mentioned previously. Whilst it is important to look at our own satisfaction levels it is important to look at the information in the context of the whole sector. SL noted that where tenants have provided negative feedback teams have followed up to get a better understanding of the reasons for dissatisfaction and that sometimes perception that a complaint was made but there was no record with the complaints team.	
14.1	DL noted that there is a slight overspend on the repairs budget	
14.	Company Assurance Report as at 30 September 2023	
i)	The Board noted the contents of the report.	
13.4	Recommendation:	
13.3	MA noted that the Healthy Homes Team will be proactive and will be able to provide a better understanding of why mould is occurring.	
13.2	KH confirmed for SJ that there are no financial implications in this financial year relating to DMC as the work undertaken as part of the current contract has been priced at PPP (price per property). An additional budget provision has been agreed with SCC in order to set up the Healthy Homes Team and contracts are currently being finalised with the Healthy Homes Advisors. In addition, most of the mould issues can be fixed with a mould wash.	

ii)	The Board noted the Key Performance Indicators position as at September 2023	
15.	Draft Financial Accounts 2022/23	
15.1	DL updated that the Accounts had been taken to the Shareholder Board and complimentary comments had been received relating to both the Accounts and Business Plan. The loss for SEH is due to higher utility costs. Charges have been adjusted for this year to reflect the true cost.	
15.2	DJ highlighted the Letter of Representation and urged all directors to be aware of what this means for them. It was noted that the Audit & Risk Committee recommended the Board accept the Financial Statements.	
15.3	Recommendations:	
i)	The Board approved the Financial Statements for 2022/23.	
ii)	The Board noted the report and the external audit management letter comments.	
iii)	The Board noted the Letter of Representation from the Company to SB Audit and authorised the Chair and Company Secretary to sign the letter on behalf of the Company.	
16.	Reserves Policy Update	
16.1	DL noted that the Reserves Policy had not been taken to the Audit & Risk Committee meeting and an additional appendix was included regarding changes to calculations.	
16.2	DL clarified for DJ that the EMT is comfortable that the figures are correct and that the figures are such to allow for every eventuality.	
16.3	Recommendation:	
i)	The Board approved the Reserves Policy	
17.	Risk Management Strategy	
17.1	It was noted that the Strategy had been to the Audit & Risk Committee and that no significant changes had been made since last year.	
17.2	Recommendation:	
i)	The Board agreed the revised Risk Management Strategy.	

18.	Performance Management Framework	
18.1	DL confirmed that the Framework had been agreed at the Audit & Risk Committee meeting and that the data strategy review is underway and will inform the Framework going forward. Any revisions will be brought back to the Board as required.	
18.2	DL confirmed for MT that the core KPIs are agreed by the Board and SCC. Each team monitors performance again specified delivery aspects.	
18.3	DL confirmed for MT that hybrid working arrangements have not impacted frontline services. MG noted that there has been no negative impact from the change in working arrangements.	
18.4	SJ clarified for MT that she has been on the Board for 8 years and feels that SEH have a really strong performance indicator framework which are measured and reported, if there had been a negative impact from hybrid working this would have been noted by the Board.	
18.5	DJ noted that there are no triggers within either the Strategy or Framework as to when the Board would be notified of issues and felt there should be a trigger so that officers would know when to report to the Board. MG confirmed that the EMT would make a judgement call as to when issues should be flagged to the Board, but he was happy to look at this in more detail.	DL
18.6	Recommendation:	
i)	The Board agreed the revised Performance Management Framework.	
19.	Domestic Abuse Update Report	
10.1		
19.1	SL provided an overview of the report. It was noted that the Southend Domestic Abuse Partnership Board had agreed their strategy and strategic objectives in line with SEH' objectives and that SEH is a key partner on the Partnership Board.	
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19.2	Southend Domestic Abuse Partnership Board had agreed their strategy and strategic objectives in line with SEH' objectives and that SEH is a key partner on the Partnership Board.  Recommendation	
19.2 i)	Southend Domestic Abuse Partnership Board had agreed their strategy and strategic objectives in line with SEH' objectives and that SEH is a key partner on the Partnership Board.  Recommendation  The Board noted the content of the report.  Minutes of Audit & Risk Committee meeting held 3 October	

20.2	DJ noted that feedback from External Audit had raised concerns about payroll and the Auditors had not been provided with sufficient information from HR when requested. This had been discussed at the Committee meeting and it was agreed that the Board should be aware and recommend that Officers pursue the situation which was unsatisfactory. The same issues had been noted by External Audit the previous year and there had been no improvement. RE noted that the payroll process had been audited by SCC but had not been provided to External Audit when requested. MT agreed to discuss with SCC's Audit Committee and feedback to the Board.	DL
20.3	RE requested that the number of disrepair claims be reported to the Board via the Audit & Risk Committee to include any costs associated with disrepair claims.	КН
	The Board noted the Minutes of the Audit & Risk Committee meeting.	
21.	Better Queensway Update - Deferred	
21.1	The Board had been notified that this item has been deferred.	
22.	Confidential Minutes and Matters Arising from meeting held 25 July 2023.	
21.1	The Minutes were agreed as an accurate record of the meeting.	
21.2	There were no confidential matters arising.	
23.	Minutes of the Personnel & Remuneration Committee meeting held 5 September 2023	
23.1	SJ noted the Committee had discussed HR performance and how improvements were still required in relation to support for recruitment and management as the current service was a concern for the Committee.	
	The Board noted the Minutes of the Personnel & Remuneration Committee meeting.	
24.	South Essex Property Services and South Essex Facilities Management New Business Opportunities and Financial Report update	
24.1	LH provided an overview of the report and explained the types of business lines that both companies undertake.	

24.2	DJ sought assurance regarding the training and insurance for fire door inspections given the potential risk involved in this business line. LH confirmed that all staff are BM Trada trained to carry out the fire door servicing. In relation to insurance DL confirmed that bespoke professional indemnity insurance had been obtained from Lloyds of London for SEH as the duty holder. The policy is for £1m.	
24.3	KH reassured the Board that the BM Trada standard undertaken by the fire door servicing team is of a higher standard that required by Legislation comprising of a 23-point check system for each door.	
24.4	Recommendation:	
i)	The Board noted the new business updates, business lines progressing and the financial assurance report.	
25.	Safeguarding Children and Adults at Risk of abuse of neglect update	
25.1	SL updated the revised Safeguarding Adults Policy is at the consultation phase and will be brought to the next Board meeting.	
25.2	DJ expressed concern regarding the process for sending safeguarding information to other parties and what checks are in place to ensure that the referral is received by that party. SL noted the concern and informed him that there is currently an internal audit being undertaken so any issues relating to safeguarding processes should be highlighted by this. However, the audit is being undertaken by Mazars on behalf of Internal Audit and at the beginning Mazars were not clear what safeguarding was about, this has since being explained.	
25.3	Recommendation:	
i)	The Board noted the information provided in Appendix One	
26.	Date of next meeting 25 January 2024	