

Readers may note that some information within these documents have been omitted / redacted.

Some information has been omitted / redacted as disclosure may prejudice the commercial interests of Irvine Housing Association trading as Riverside Scotland.

We recognise that the commercial sensitivity of information may decline over time and the harm arising from disclosure may be outweighed by the public interest in openness and transparency. We commit to review the redaction of any such information from time to time.

Some information has been redacted as it contains personal data which identifies an individual. Disclosure of this information would place Irvine Housing Association t/a Riverside Scotland in breach of the Data Protection Act 2018.

**Board Meeting Agenda**  
**243<sup>rd</sup> Meeting: Wednesday 30 June 2021**  
**At 5.30 p.m. by MS Teams video conference**

**AGENDA**

		<b>Data Class</b>
1.	Apologies for Absence	
2.	Declarations of Interest	
3.	Previous Minutes – Minutes of the Board Meeting held on Thursday 20 May 2021	Public
4.	Matters Arising	
5.	Substantive Business	
5.1	Business Insight & Information Presentation (Tim Quinlan, Senior Insight Manager, Business Information and Insight)	
5.2	Draft Financial Statements for 2020/21	Restricted
5.3	Chair's Action Procedure	Restricted
5.4	Annual Loan Portfolio Return	Restricted
5.5	Managing Director Recruitment	Confidential
5.6	Board Member Recruitment & Membership Applications	Confidential
5.7	Retirements and Elections at AGM – verbal update	
5.8	Landlord Compliance Policies Review	Public
5.9	MD Appraisal	Public
5.10	Whole Board Appraisal Survey Results	Confidential
5.11	Progress Reports on Development Projects	Confidential
5.12	Operational Performance Report	Public
5.13	Financial Performance Report	Restricted
5.14	Equality, Diversity and Inclusion Action Plan	Public
5.15	MD Report - PH	Public
6.	Minutes/Updates:	

	a) Unconfirmed Group Customer Experience Committee Meeting Minutes – 29 April 2021 b) Group Board Core Brief – May 2021	Confidential Confidential
7.	Disclosure	
8.	Any Other Business	
9.	Date of Next Meeting – 5.30 p.m. on Thursday 19 August 2021 – Board Meeting via MS Teams video conference	

PH / db  
14/6/2021

Date:	15 <sup>th</sup> June 2021
Subject:	Asset Compliance Policy Review
Author:	Heather Anderson
Sponsor:	John Watson
Appendices:	Yes
Action:	Information
Data Class:	Public

### **EXECUTIVE SUMMARY RECOMMENDATION**

Board approved the Association's suite of Asset Compliance Management Policies in 2019. These policies set out how the Association manages the following Asset Compliance functions, to ensure adherence to legislative and regulatory guidance, and ensure the safety of staff and customers:

- Asset Compliance Management
- Electrical Safety
- Asbestos Management
- Fire Safety
- Legionella
- Gas Safety

These policies have now been reviewed and the revised and up to date versions are attached to the report as Appendices 1-6. There have been no fundamental changes made, only the following amendments:

- Updates to employee job titles throughout to reflect changes to the Association and TRG staffing structures.
- 'Gas Safety' policy changed to 'Heating and Ventilation' policy.
- Emphasis on 'risk based' Compliance Management and updated targets and timescales for addressing assessed risks.
- Inclusion of LD2 compliance target for all applicable properties within the Fire Safety policy.
- Update to the categorisation of property types and associated risk ratings within the Fire Safety Policy (Section 5, Fire Risk Assessments), and revised Key Performance Targets based on timescales to address identified risks.
- Replacement of 'Sheltered Housing' with 'Retirement Living'.
- 'Legionella' Management policy changed to 'Water Hygiene' Management policy.
- Update to the 'portfolio of risk assessment' in the Water Hygiene Policy (Section 5), and performance indicators at Section 7.
- Removal of detailed procedures contained in the Asbestos Management Policy - to be included in the operational management plan.

**1 Background**

As above.

**2 Recommendations**

Board is asked to approve the revised Asset Compliance Management Policies attached to this report as Appendices 1-6.



## Heating and Ventilation Policy

Date Effective: May 2021  
Date of Review:

1.	<p><b>Purpose</b></p> <p>The overall aim of this policy, and the associated procedures and control documents is to ensure the safety of people living and working in properties, containing gas-fuelled heating appliances, owned or managed by Irvine Housing Association [IHA].</p> <p>IHA aims to protect the occupiers of its properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with gas so far as is reasonably practicable.</p> <p>This document sets out key policy objectives, control measures and accountabilities for ensuring the safety of gas heating and hot water installations.</p> <p>This purpose of this policy is to ensure IHA meets its obligations under the Gas Safety (Installation and Use) Regulations 1998</p> <p>The application of this Policy ensures that IHA meets compliance with the following legislation /guidance outcomes of the Scottish Housing Regulator as outlined below:</p> <ul style="list-style-type: none"> <li>• <u>Health and Safety at Work Act 1974</u></li> <li>• <u>Gas Safety (Installation and Use) Regulations 1998</u></li> <li>• <u>Control of Substances Hazardous to Health Regulations 2002</u></li> <li>• <u>Management of Health and Safety at Work Regulations 1999</u></li> <li>• <u>Workplace (Health Safety &amp; Welfare) Regulations 1992</u></li> <li>• <u>Equality Act 2010</u></li> <li>• <u>Compliance with HETAS guidance (solid fuel systems)</u></li> </ul> <p><u>Approved Codes of Practice (ACoP) [HSE]:</u></p> <ul style="list-style-type: none"> <li>• <u>L56 - Safety in the installation and use of gas systems and appliances Gas Safety (Installation and Use) Regulations 1998</u></li> <li>• <u>L122: Safety of pressure systems</u></li> </ul> <p>Registered Social Landlords must meet all applicable statutory requirements that provide for the health and safety of the occupants in their homes. In relation to gas safety specifically, they must ensure any gas appliances, and supply provided with the property, are safe and inspected at least once every 12 months.</p> <p>IHA acknowledges and accepts its responsibilities under the applicable regulations and legislation and that failure to properly discharge these responsibilities may result in:</p> <ul style="list-style-type: none"> <li>• Prosecution by Health and Safety executive under Health and Safety at Work Act 1974</li> <li>• Prosecution under Corporate Manslaughter and Corporate Homicide Act 2007</li> <li>• SHR serious detriment judgement</li> </ul>
2.	<p><b>Scope</b></p>

	<p>This policy applies to all properties owned or managed by IHA heating and ventilation equipment and those properties that may have a gas supply which is not used but where a duty of care applies. The following are covered by this Policy:</p> <ul style="list-style-type: none"> <li>• Domestic and non-domestic gas installations and appliances for heating, hot water and cooking purposes and includes all supplies, metered installation, carcass and installation pipework, flues, chimneys and appliances. <ul style="list-style-type: none"> <li>○ Non-domestic appliances and installations are rated &gt;70KW and have pipe work in excess of 35mm. They are required to be subjected to the same tests as domestic premises but it is necessary to expand on those tests because the appliances consume more fuel and air.</li> <li>○ Commercial and industrial space heating (convection air heaters) <ul style="list-style-type: none"> <li>• Indirect gas fired air heaters</li> <li>• Overhead radiant tube and luminous heaters</li> </ul> </li> <li>○ Gas Fired Central Heating and Hot Water Boilers and System</li> <li>○ Domestic Gas Fired Cooking Appliances (owned by IHA).</li> <li>○ Gas Fired Overhead Radiant Heaters and Systems.</li> </ul> </li> <li>• Non gas heating including all buildings with fixed heating installations including but not limited to the following list are qualifying buildings:- <ul style="list-style-type: none"> <li>○ Ground source/ air source heating</li> <li>○ Electrical Boilers</li> </ul> </li> <li>• All types of ventilation systems are included including with the exception of domestic single mechanical ventilation extraction i.e. kitchen/bathroom fans unless interlocked with gas installation. System types include:- <ul style="list-style-type: none"> <li>○ Fire Dampers</li> <li>○ Air conditioning Units (Fixed)</li> <li>○ Portable Air Conditioning Units</li> </ul> </li> </ul>
3.	<p><b>Key policy objectives</b></p> <p>IHA will:</p> <ol style="list-style-type: none"> <li>1. Prepare and disseminate a “Heating &amp; Ventilation Management Plan” for the portfolio and</li> <li>2. Appoint persons with clear roles and responsibilities to manage the risk associated with Heating &amp; Ventilation).</li> <li>3. Risk Assess our portfolio to identify qualifying building and equipment presence within our assets.</li> <li>4. Establish and keep up-to-date, a record of installations and equipment within our “Compliance Register”</li> <li>5. Carry out a programme of annual gas safety checks, at each property which has a gas supply (not just those where it is believed there are appliances connected to a metered supply). The target is to carry out every Gas Safety Check within 365 days of the previous check, or a new installation.</li> </ol>



	<ol style="list-style-type: none"> <li>6. Ensure that where repairs and/or maintenance is required to gas appliances, pipe work and flues, this is completed to approved standards.</li> <li>7. Only use suitably qualified and Gas Safe registered contractors and Operatives to carry out such works.</li> <li>8. Ensure that detailed records are kept and administered, and residents provided with gas safety certificates on completion of safety checks (within 28 days for tenanted properties, and on the day of re let for void properties).</li> <li>9. Ensure that contracts with external contractors are managed effectively and robust contract monitoring is in place to monitor performance and promote continuous improvement.</li> </ol>
4.	<p><b>Policy implementation</b></p> <p>The accountabilities for implementation of this policy are as set out below:</p> <ol style="list-style-type: none"> <li>1. IHA's Managing Director retains overall accountability for the implementation of this policy.</li> <li>2. IHA's Head of Service Delivery, in direct liaison with TRG's Executive Director of Asset Services and the Director of Building Safety, is responsible for overall policy implementation and ensuring that adequate resources are made available to enable the objectives of the policy to be met.</li> <li>3. IHA's Head of Service Delivery, in direct liaison with TRG's Director of Building Safety, is responsible for delivery of the key policy objectives as set out herein including designing and implementing procedures, staff training, and communication to customers.</li> <li>4. IHA's Head of Service Delivery, in direct liaison with TRG's–Director of Building Safety, is accountable for achieving the targets associated with the key policy objectives.</li> <li>5. IHA's Head of Service Delivery, in direct liaison with TRG's Director of Asset Strategy and Delivery, is responsible for operational delivery, including the management of contractors, of servicing and maintenance and annual gas safety checks.</li> <li>6. Neighbourhood Services and front line staff shall support asset management and contractors teams in gaining access to carry out Gas Safety Checks.</li> <li>7. IHA's Head of Service Delivery, in direct liaison with TRG's Head of Health, Safety and Environment, is responsible for ensuring the policy is kept up to date with prevailing legislation and statutory obligations.</li> <li>8. This policy shall be implemented through a set of process maps, procedures and control documents. All staff are responsible for following the requirements of those documents.</li> </ol>
5.	<b>Portfolio Risk Assessment (PRA)</b>

	<ol style="list-style-type: none"> <li>1. A portfolio risk assessment has been carried out to determine the gas status of all properties (gas supply, appliance, flue or installation pipework) and determine the heating type.</li> <li>2. Riverside will always undertake a gas safety inspection whenever there is a supply present to determine if any appliances have been connected.</li> <li>3. The assigned heating type categories, help to distinguish equipment of greatest risk and to determine the inspection type. . Full details are contained with the heating &amp; ventilation management plan.</li> </ol>
6.	<p><b>Safety Checks</b></p> <ol style="list-style-type: none"> <li>1. All equipment will be subject to regular site inspection in line with statutory &amp; regulatory requirements, best practice or industry guidance to reduce risks at the following inspection intervals. Further details are contained within the management plan. Records of checks will be retained for a period of two years from the date they were carried out.</li> <li>2. Each resident (or the Housing Manager for Supported Housing) shall also be supplied with a copy of the latest safety check—within 28 days of the inspection being completed. New tenants will be provided with a copy on occupation.</li> <li>3. If the accommodation is deemed to be temporary for a period of less than 28 days or where the heating is provided via a communal system a copy, a copy of the certificate will be prominently displayed within the premises and provided upon request.</li> <li>4. Contractors will carry out visual checks on residents' own appliances such as gas cookers and gas fires. Any problems identified will be recorded on the safety certificate and issued to the resident. Where the problem is potentially dangerous, the appliance will be disconnected and the supply capped off. Suitable advice on health and safety will be provided to the resident in this event.</li> <li>5. Records of checks will be retained for a period of two years from the date they were carried out.</li> </ol>
6.	<p><b>Access for Gas Safety Checks</b></p> <p>It is a condition of the tenancy agreement that access is provided to allow us to carry out a gas safety check. IHA are obliged to make every possible effort to gain access and will, as a minimum (via its contractors or otherwise):</p> <ol style="list-style-type: none"> <li>1. Issue a letter offering an appointment or a convenient alternative</li> <li>2. Issue 1st and 2<sup>nd</sup> No Access letters on failure to gain access</li> <li>3. Issue a final warning of intention to force entry</li> <li>4. Force entry to the property</li> <li>5. Take legal action to secure possession of the property</li> </ol> <p>IHA will at all times act appropriately and in accordance with regulatory and legal requirements in gaining access to the premises to undertake necessary servicing. In</p>

doing so it will take into account any specific special needs or vulnerability issues before initiating action to gain access to a property for this purpose.

7. **Monitoring and Quality Control**

IHA will monitor implementation of this policy using a set of performance measures as below:

Measure	Target	Interval	Reviewed by
Properties with valid LGSR	100%	Monthly	IHA's Head of Service Delivery in direct liaison with TRG's Executive Directors\ Director of Building Safety
LGSR certificates completed on time	95%		
LGSR certificates of appropriate quality (desktop check)	95%		IHA's Head of Service Delivery in direct liaison with TRG's-Director of Building Safety
Gas safety checks carried out to standard (site check)	95%		

100% of all LGSR certificates will be (automatically or desk-top) checked for completeness and quality, and 5-10% will be checked at monthly intervals, by a follow-up site visit by a suitable qualified and accredited 3<sup>rd</sup> party.

Policy implementation will be reviewed:

- Quarterly by IHA's Compliance and Health and Safety Manager, in direct liaison with TRG's Performance and Compliance Team, reported to the Asset Management SMT.
- Annually by a suitably qualified and accredited 3<sup>rd</sup> party with a report provided to IHA's Managing Director and IHA Board or delegated sub-committee, and TRG's Executive Director Asset Services.
- By the internal audit team as required, with a report provided to IHA's Managing Director, IHA Board or delegated sub-committee, and TRG's Group Audit Committee.



## Electrical Safety Management Policy

Date Effective: May 2021  
Date of Review:

1.	<p><b>Purpose</b></p> <p>The overall aim of this policy, and the associated procedures and control documents is to ensure the safety from electricity, or fire caused by electrical fault, for people living and working in properties owned, managed or leased by Irvine Housing Association [IHA] as a subsidiary company of The Riverside Group [TRG].</p> <p>IHA aims to protect the occupiers of its properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with electrical hazards so far as is reasonably practicable.</p> <p>This document sets out key policy objectives, control measures and accountabilities for ensuring electrical safety.</p> <p>This purpose of this policy is to ensure IHA meets its obligations under the following legislation:</p> <ul style="list-style-type: none"> <li>• The Health and Safety at Work etc. Act 1974;</li> <li>• The Management of Health and Safety at Work Regulations 1999;</li> <li>• The Scottish Housing Quality Standard (SHQS) and the Scottish Government's Repairing Standard.</li> <li>• The Electricity at Work Regulations 1989 [1]</li> <li>• Electrical Equipment (Safety) Regulations 1994 [4]</li> <li>• The Housing (Scotland) Act 2014</li> <li>• The provision &amp; use of work equipment regulations 1998 (PUWER)</li> <li>• Environmental Protection Act 1990</li> <li>• The Consumer Protection Act 1987 (CPA)</li> <li>• Housing &amp; Planning Act 2016</li> </ul> <p>Other Legislation</p> <ul style="list-style-type: none"> <li>• Gas Safety installation &amp; use regulations</li> <li>• The Building (Scotland) Act 2003</li> <li>• Building Act 1984</li> <li>• The Workplace (Health Safety &amp; Welfare) Regulations 1992</li> <li>• Personal Protective Equipment at Work Regulations 1992</li> <li>• Construction, Design and Management Regulations 2015</li> <li>• GDPR</li> <li>• The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)</li> </ul> <p>Approved Codes of Practice (ACoP) [HSE]:</p> <ul style="list-style-type: none"> <li>• Electrical Installation Regulations BS 7671:2018 (as amended)</li> <li>•</li> </ul> <p>Further Guidance</p> <ul style="list-style-type: none"> <li>• Electrical Guidance Note 3</li> <li>• British Standards relating to Lightning Protection BS 6651:1999, BS EN 62305</li> </ul>
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	The application of this Policy ensures that IHA meets compliance with the outcomes of the Scottish Housing Regulator specifically in relation to the 'Healthy, Safe and Secure' elements of the Scottish Housing Quality Standard.
2.	<p><b>Scope</b></p> <p>This policy applies to all fixed electrical installations and fixed or portable equipment including installed in any areas within all properties owned or managed by IHA. IHA does not hold a duty of care to leaseholders, owner occupiers or shared owners in respect of domestic electrical installations.</p> <p>Any electrical equipment installed by IHA for use by an employee at work or by a tenant is covered by the policy as follows:</p> <ul style="list-style-type: none"> <li>• Fixed wired electrical installation</li> <li>• Portable appliances</li> <li>• Integrated Warden Call</li> <li>• Domestic social alarms</li> <li>• Door Entry Systems (domestic)</li> <li>• Door Entry Systems (commercial)</li> <li>• Communal Digital Aerials</li> <li>• Specialist electrical equipment i.e. lightning conductors</li> </ul> <p>This policy does not include the following</p> <ul style="list-style-type: none"> <li>• Fire safety electrical equipment i.e. fire alarm, AOV, emergency lighting which is covered by the Associations Fire Safety Management Policy.</li> </ul>
3.	<p><b>Key Legal Requirements</b></p> <p>UK regulations have an explicit duty on owners of buildings with electrical installations or with electrical equipment is installed, IHA are expected to take reasonably practicable measures to ensure that the premises, including means of access or egress and equipment provided for use, are safe and without risk to health. IHA will:</p> <ol style="list-style-type: none"> <li>1. Identify all fixed electrical installations and metered installations</li> <li>2. Identify all electrical equipment and identify and assess the nature and level of risks.</li> <li>3. Manage these risks to reduce them as far as reasonably practicable.</li> <li>4. Take action to reduce the risks which are proportionate</li> <li>5. Provide information, instructions and training to the people who use the equipment.</li> <li>6. Introduce an effective In Service Inspection and Testing of all installations and equipment and maintenance program.</li> </ol>
4.	<p><b>Key policy objectives</b></p> <p>IHA will:</p> <ol style="list-style-type: none"> <li>1. Implement as appropriate TRG's "Electrical Safety Management Plan" across the stock profile.</li> <li>2. Appoint persons with clear roles and responsibilities to manage the risk associated with electrical installations and equipment.</li> </ol>

	<ol style="list-style-type: none"> <li>3. Assess our stock profile against qualifying building criteria to identify presence of “electrical equipment” within our assets.</li> <li>4. Ensure that In Service Inspection and Testing of all installations and equipment is undertaken at suitable intervals in accordance with EWR and PUWER, servicing and maintenance contracts in place and undertake the necessary work to correct any C1\C2 deficiencies found.</li> <li>5. Develop and maintain a register [the Register] listing all properties with electrical installations that IHA are responsible for whether owned, leased or managed and date of the last EICR.</li> <li>6. Prioritise &amp; complete corrective actions identified within defined timeframes and promptly repair or renew any defective part of an electrical installation</li> <li>7. Ensure any unauthorised and defective alterations or additions to electrical installations are rectified or removed on discovery.</li> <li>8. Only appoint electrical contractors registered with the NICEIC, ECA, NAPIT or other accredited body and who are registered under a recognised Domestic Installer Self-certification Scheme in compliance with The Scottish Building Standards Standard 4.5 – electrical safety for all buildings and standard 4.6 – electrical fixtures for domestic buildings only.</li> <li>9. Ensure that detailed records are kept and administered.</li> <li>10. Ensure that contracts with external contractors are managed effectively and robust contract monitoring is in place to monitor performance and promote continuous improvement.</li> <li>11. Implement appropriate training for all staff responsible for administering the controls</li> </ol>
5.	<p><b>Policy implementation</b></p> <p>The accountabilities for implementation of this policy are as set out below:</p> <ol style="list-style-type: none"> <li>4. IHA’s Managing Director retains overall accountability for the implementation of this policy.</li> <li>5. IHA’s Head of Service Delivery, in direct liaison with the TRG’s Executive Director of Asset Services, is responsible for overall policy implementation, ensuring adequate resources are made available to enable the objectives of the policy to be met</li> <li>6. IHAs Head of Service Delivery in direct liaison with TRGs Director of Building Safety and relevant Head of Performance and Compliance is responsible for the delivery of the key policy objectives as set out herein including designing and implementing procedures, staff training and communication to customers.</li> <li>7. IHA’s Asset Services Manager in direct liaison with TRGs Senior Compliance Manager is responsible for the implementation and monitoring of the operational effectiveness of the Policy, operational management plan and procedures and ensuring all appointed organisations and individuals have the appropriate levels of skills, knowledge, education and training.</li> </ol>

	<p>8. IHA's Asset Services Manager in direct liaison with TRGs Compliance Manager (M&amp;E) is responsible for ensuring all risk assessments are undertaken, risk reduction activity is undertaken and all M&amp;E safety equipment is regularly inspected and tested and remain in use. Management of contractors and ensuring all work is carried out safely and maintaining and updating our compliance register.</p> <p>9. Neighbourhood Services and front line staff shall support asset management and contractors in gaining access to carry out electrical testing and work.</p> <p>10. IHAs Head of Service Delivery in direct liaison with TRGs in direct liaison with TRG's Head of Health, Safety and Environment is responsible for ensuring the policy is kept up to date with prevailing legislation and statutory obligations.</p> <p>11. This policy shall be implemented through a set of process maps, protocols, procedures and control documents. All staff are responsible for following the requirements of those documents.</p>
	<p><b>Mechanical Equipment Management Plan</b></p> <p>IHA will seek to implement as appropriate TRG's Electrical safety Management Plan [ESMP] and carry out training with staff and contractors to ensure its requirements are understood.</p> <p>The management plan sets out the mechanism by which mechanical equipment and installations are managed.</p>
5.	<p><b>Electrical Inspection Condition Reports [EICRs]</b></p> <p>IHA has carried out an assessment of risk as recommended by Guidance Note 3 to IEE Wiring Regulations BS7671 and duly decided on the following intervals of testing:</p> <p>In line with recommendations, dwellings are to be tested and a satisfactory EICR produced as follows:</p> <ol style="list-style-type: none"> <li>1. Every five years.</li> <li>2. During major upgrade works where electrical installations are affected. E.g. kitchen replacement</li> <li>3. After any significant work is carried out to the electrical installation</li> <li>4. At every change of occupancy (exceptions may apply for short-term lets in certain properties – criteria will be included in the Electrical Safety Management Plan)</li> <li>5. At the time of any mutual exchange</li> </ol> <p>And:</p> <ol style="list-style-type: none"> <li>6. all communal areas of Blocks (Landlord's supply), commercial premises and offices, every 5 years</li> </ol> <p>All EICRs shall be held in electronic format, centrally stored, logged to the Register and linked to the relevant property record by Asset ID/UPRN. Only certificates denoted "satisfactory" are admissible.</p>



6.	<p><b>Monitoring and Quality Control</b></p> <p>IHA will monitor implementation of this policy using a set of performance measures as below:</p> <table><tr><th>Measure</th><th>Target</th><th>Interval</th><th>Reviewed by</th></tr><tr><td>No. of Blocks with satisfactory EICR</td><td>100% compliance</td><td rowspan="4">Monthly</td><td rowspan="3">Head of Service Delivery/ Compliance &amp; Health &amp; Safety Manager in direct liaison with TRG's Executive Directors/Head of Performance &amp; Compliance via Compliance Dashboard.</td></tr><tr><td>No. of dwellings with satisfactory EICR (Sheltered)</td><td>100% compliance</td></tr><tr><td>No. of dwellings with satisfactory EICR (General Needs)</td><td>85% Compliance</td></tr><tr><td>EICR completed to programme</td><td>Ongoing annual programme to ensure compliance</td><td>Head of Service Delivery in direct liaison with TRG's Head of Performance &amp; Compliance</td></tr></table> <p>Policy implementation will be reviewed:</p> <ol style="list-style-type: none"><li>1. Quarterly by the TRG's Performance and Compliance Team, in conjunction with the Compliance and Health and Safety Manager, reported to the TRG's Asset Management SMT.</li><li>2. Annually by a suitable qualified and accredited 3<sup>rd</sup> party and a report provided to the IHA's Managing Director and IHA Board or delegated sub-committee and TRG's Executive Director of Asset Services.</li><li>3. By the TRG internal audit team, as required, and a report provided to the Group Audit Committee.</li></ol>	Measure	Target	Interval	Reviewed by	No. of Blocks with satisfactory EICR	100% compliance	Monthly	Head of Service Delivery/ Compliance & Health & Safety Manager in direct liaison with TRG's Executive Directors/Head of Performance & Compliance via Compliance Dashboard.	No. of dwellings with satisfactory EICR (Sheltered)	100% compliance	No. of dwellings with satisfactory EICR (General Needs)	85% Compliance	EICR completed to programme	Ongoing annual programme to ensure compliance	Head of Service Delivery in direct liaison with TRG's Head of Performance & Compliance
Measure	Target	Interval	Reviewed by													
No. of Blocks with satisfactory EICR	100% compliance	Monthly	Head of Service Delivery/ Compliance & Health & Safety Manager in direct liaison with TRG's Executive Directors/Head of Performance & Compliance via Compliance Dashboard.													
No. of dwellings with satisfactory EICR (Sheltered)	100% compliance															
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EICR completed to programme	Ongoing annual programme to ensure compliance		Head of Service Delivery in direct liaison with TRG's Head of Performance & Compliance													
9	<p><b>Electrical equipment checks</b></p> <p>Electrical equipment may also need to be inspected at suitable intervals between EICR examinations, this is to ensure the equipment continues to operate as intended, and risks associated with wear or deterioration are avoided. This is usually where your risk assessment has identified a significant risk from the use of the equipment. If they are required:</p> <ul style="list-style-type: none"><li>• inspections should be regular (e.g. every 6-12 months)</li><li>• the scope and frequency will be determined by the competent person; or the manufacturers of electrical equipment and detailed within the operational management plan.</li></ul> <p>The periods for each system type will be described within the operational management plan. These are the maximum periods between each examination unless there is an examination scheme produced by a competent person in place, which can specify longer or shorter periods depending on the risk of defects arising.</p> <p>IHA will employ competent contractors to inspect and maintain all equipment and will also:</p>															

	<ul style="list-style-type: none"><li>• Ensure that such inspections include an assessment of risk to customers, employees and visitors to the property</li><li>• Ensure that such inspections are carried out within the month of anniversary date. This date will change only where there has been a change of equipment or through a planned renewal of the electrical equipment</li></ul>														
	<p><b>EICR Programme</b></p> <p>IHA recognises that it is not currently meeting its policy objectives for domestic electrical installations in respect of timescales for routine electrical testing [EICRs] and has implemented an EICR programme, to recover the back-log, as follows:</p> <table><tr><th>Property/tenancy type</th><th>Programme start</th><th>Programme completion (=Target Date for meeting policy objective)</th></tr><tr><td>Domestic – General Needs Rented</td><td>01/04/18</td><td>31/03/2022</td></tr></table>	Property/tenancy type	Programme start	Programme completion (=Target Date for meeting policy objective)	Domestic – General Needs Rented	01/04/18	31/03/2022								
Property/tenancy type	Programme start	Programme completion (=Target Date for meeting policy objective)													
Domestic – General Needs Rented	01/04/18	31/03/2022													
	<p><b>Monitoring and Quality Control</b></p> <p>The TRG’s Business Intelligence Team produce reports in relation to the agreed Key Performance Indicators (KPI’s).</p> <p>A risk-based Compliance control framework and monitoring programme has been developed to confirm set objectives are met. A suite of Key Performance/ Management / Operational indicators have been developed along with a reporting framework to inform Senior Management, Board and staff on performance and progress made towards meeting set objectives.</p> <table><tr><th>Measure</th><th>Target</th><th>Min. Reporting Interval</th><th>Reviewed by</th></tr><tr><td>% of known risks which have been assessed</td><td>100%</td><td rowspan="4">Monthly</td><td rowspan="4">Executive Directors\Head of Property Compliance /Safety First via Compliance Dashboard.</td></tr><tr><td>% risks which have been reviewed in accordance with level of risk and appropriate timescales</td><td>100%</td></tr><tr><td>% risks with outstanding actions/control measures by risk level</td><td>0%</td></tr><tr><td>Volume of overdue risk by risk classification</td><td>0</td></tr></table> <p>This approach will support the identification of weaknesses, gaps in performance and provide assurance on compliance.</p>	Measure	Target	Min. Reporting Interval	Reviewed by	% of known risks which have been assessed	100%	Monthly	Executive Directors\Head of Property Compliance /Safety First via Compliance Dashboard.	% risks which have been reviewed in accordance with level of risk and appropriate timescales	100%	% risks with outstanding actions/control measures by risk level	0%	Volume of overdue risk by risk classification	0
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Volume of overdue risk by risk classification	0														

	<p>Policy implementation will be reviewed:</p> <ol style="list-style-type: none"><li>1. Quarterly by the Compliance Team, reported to the Asset Management SMT.</li><li>2. Annually by a suitable qualified and accredited 3<sup>rd</sup> party and a report provided to the Executive Director of Asset Services</li></ol> <p>By the TRG internal audit team, as required, and a report provided to the Group Audit Committee.</p>
<b>8.</b>	<p><b>Guidance &amp; standards</b></p> <p>Measures taken to comply with this policy shall meet as far as possible the requirements of the following technical standards:</p> <p>18<sup>th</sup> Edition of the Institution of Engineering and Technology Wiring Regulations (BS 7671:2018), which came into effect on 1st January 2019. All domestic wiring installations must be designed, constructed, inspected, tested and certificated to meet the requirements of BS 7671: 2018. Although these standards are not applicable to all works covered by this policy we will endeavour to apply them when undertaking any electrical upgrade or repair work.</p> <p>Electrical Installation Certificates shall be suitably completed and in full compliance with BS 7671:2018, IET Guidance Note 1 – and all current amendments.</p> <p>Testing frequencies are derived from table 3.2 of guidance note 3 Inspection and Testing by the Institute of Engineering Technology.</p>



## **Asbestos Safety Management Policy**

Date Effective: May 2021  
Date of Review:

1.	<p><b>Purpose</b></p> <p>The overall aim of this policy, and the associated procedures and control documents is to ensure the safety from asbestos release for people living and working in properties, owned or managed by Irvine Housing Association [IHA] as a subsidiary company of The Riverside Group [TRG] and to ensure IHA complies with its obligations under the relevant statutes.</p> <p>IHA aims to protect the occupiers of its properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with asbestos so far as is reasonably practicable.</p> <p>This Policy sets out key objectives, control measures and accountabilities to protect residents, staff and contractors from harm</p> <p>The purpose of this policy is to ensure IHA meets its obligations under the following legislation:</p> <ul style="list-style-type: none"> <li>• The Health and Safety at Work etc. Act 1974;</li> <li>• The Management of Health and Safety at Work Regulations 1999;</li> <li>• The Scottish Housing Quality Standard (SHQS) and the Scottish Governments Repairing Standard.</li> <li>• Control of Asbestos Regulations 2012</li> <li>• Personal Protective Equipment at Work Regulations 1992</li> <li>• Special Waste Regulations + Amendment 2004</li> <li>• Control of Substances Hazardous to Health (COSHH) Regulations (as amended) 2002</li> <li>• Construction, Design and Management Regulations 2015</li> <li>• Control of Pollution Act 1974</li> <li>• Environmental Protection Act 1990</li> <li>• The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)</li> </ul> <p>The application of this Policy ensures that IHA meets compliance with the outcomes of the Scottish Housing Regulator as outlined below:</p> <p>Registered Social Landlords meet all applicable statutory requirements that provide for the health and safety of the occupants in their homes and comply with the Healthy, Safe and Secure elements of the Scottish Housing Quality Standard. IHA acknowledges and accepts its responsibilities under the applicable regulations and legislation and that failure to properly discharge these responsibilities may result in:</p> <ul style="list-style-type: none"> <li>• Prosecution by Health and Safety executive under Health and Safety at Work Act 1974</li> <li>• Prosecution under Corporate Manslaughter and Corporate Homicide Act 2007</li> <li>• Housing Regulator Enforcement Action</li> </ul>
2.	<p><b>Scope</b></p>

	<p>This policy applies to all properties owned or managed by IHA. IHA does not (normally) hold a duty of care to leaseholders, or shared owners, for asbestos located within the property.</p>
3.	<p><b>Key Legal Requirements</b></p> <p>UK regulations have an explicit duty to assess and manage the risks resulting from the exposure from asbestos in premises. The risks vary with circumstances, ranging from the occupation of a building to the repair, refurbishment and demolition of premises. IHA have implemented this policy in order to ensure compliance with the Control of Asbestos Regulations 2012 which places a duty to manage asbestos within their portfolio.</p> <ol style="list-style-type: none"> <li>1. Prepare an Asbestos management plan</li> <li>2. Appoint persons to manage asbestos and agree responsibilities</li> <li>3. Take reasonable steps to locate asbestos or presume materials that could contain asbestos do contain asbestos</li> <li>4. Keep a written record of where asbestos has been found and inform persons who could potentially disturb asbestos</li> <li>5. Carry out a risk assessment of our ACMs to set priorities for management</li> <li>6. Reduce potential risks from ACM</li> <li>7. Monitor the condition of asbestos regularly</li> <li>8. Prevent people breathing in asbestos dust</li> <li>9. Implement appropriate management arrangements <ul style="list-style-type: none"> <li>▪ Prevent work to our homes that may disturb the fabric of the building until measures to control the risk have been implemented</li> <li>▪ Working with Asbestos</li> </ul> </li> </ol>
4.	<p><b>Key policy objectives</b></p> <p>IHA will:</p> <ol style="list-style-type: none"> <li>1. Prepare and disseminate an “Asbestos Management Plan” for the portfolio and appoint a named “Duty Holder”.</li> <li>2. Designate persons with clear roles and responsibilities to manage the risk associated with asbestos containing materials (ACM).</li> <li>3. Risk Assess/survey our portfolio to identify the “asbestos status” of our assets, introduce default position and develop a survey strategy to locate ACMs.</li> <li>4. Establish and keep up-to-date, a record of the location and condition of all known and presumed asbestos containing materials (The “Register”)</li> <li>5. Undertake material risk assessment of all known and presumed ACM materials and develop procedures to evaluate the risk and determine the appropriate remedial actions and control measures.</li> <li>6. Monitor and maintain the condition of identified retained asbestos materials that are able to be left in-situ and produce prioritised programme of removal/remediation of ACMs due to their location and/or, condition, or type of ACM that considers the risk to health within appropriate timescales, <i>maintain accurate records on actions which have been completed</i></li> <li>7. Monitor the condition of all known ACM materials, including introducing an annual re-inspection to all ACM within communal areas.</li> <li>8. Introduce an approach to ensuring ACM information is provided to every person likely to disturb including Building occupiers/tenants and anyone</li> </ol>

	<p>undertaking work within one of our assets of risks within our buildings from ACM.</p> <p>9. Introduce a permit to work scheme which restricts work which is likely to disturb ACM without appropriate safe systems of work in place and ensure competence of operatives.</p>
5.	<p><b>Policy implementation</b></p> <p>The accountabilities for implementation of this policy are as set out below:</p> <ol style="list-style-type: none"> <li>1. IHA's Managing Director retains overall accountability for the implementation of this policy and is the named Duty-holder.</li> <li>2. IHA's Head of Service Delivery in direct liaison with TRG's Executive Director of Asset Services is responsible for overall policy implementation, ensuring that adequate resources are made available to enable the objectives of the policy to be met and for delivery of the key policy objectives as set out herein, including designing and implementing procedures, staff training, and communication to customers.</li> <li>3. IHA's Head of Service Delivery in direct liaison with TRG's Head of Performance and Compliance is responsible for the delivery of key policy objectives as set out herein, including designing and implementing procedures, staff training, and communication to customers.</li> <li>4. IHA's Head of Service Delivery in direct liaison with TRG's Director of Asset Services and Delivery is responsible for operational delivery, including the management of all contractors carrying out works that may disturb asbestos works and those carrying out asbestos surveys. Also for the updating of the asbestos register as appropriate.</li> <li>5. Neighbourhood Services staff shall support Asset Management and contractor teams in gaining access to carry out asbestos surveys and work.</li> <li>6. IHA's Head of Service Delivery in direct liaison with the Head of Health, Safety and Environment is responsible for ensuring the policy is kept up to date with prevailing legislation and statutory obligations.</li> <li>7. This policy shall be implemented through a set of process maps, procedures and control documents. All staff are responsible for following the requirements of those documents.</li> </ol>
7.	<p><b>The Asbestos Register</b></p> <ol style="list-style-type: none"> <li>1. IHA will compile, maintain and make available to those liable to disturb asbestos, a register compiled from survey and removal records.</li> <li>2. The Register is to be updated when IHA premises are re-surveyed, where information is obtained during building/ maintenance work or where material is removed.</li> <li>3. Where possible contractors will be given access to live survey data in order to update their own systems, in real time, without the need to access the</li> </ol>

	<p>Register or provided with access to the Register, in real time via an internet based portal.</p> <p>4. Contractors have a duty to check the asbestos register and carry out an on-site risk assessment before carrying out any maintenance or building work where there is a risk that asbestos may be present and disturbed.</p> <p>5. IHA will, at suitable intervals and to a relevant level of detail, check that Contractors are checking the asbestos register prior to carrying out works</p>														
8.	<p><b>Monitoring and Quality Control</b></p> <p>IHA will monitor implementation of this policy using a set of performance measures as below:</p> <table><tr><th>Measure</th><th>Target</th><th>Min. Reporting Interval</th><th>Reviewed by</th></tr><tr><td>% of known risks which have been assessed</td><td>100%</td><td rowspan="4">Monthly</td><td rowspan="4">Head of Service Delivery in direct liaison with TRG's Executive Directors/Head of Performance and Compliance via Compliance Dashboard.</td></tr><tr><td>% risks which have been reviewed in accordance with level of risk and appropriate timescales</td><td>100%</td></tr><tr><td>% risks with outstanding actions/control measures by risk level</td><td>0%</td></tr><tr><td>Volume of overdue risk by risk classification</td><td>0</td></tr></table> <p>Policy implementation will be reviewed:</p> <ol style="list-style-type: none"><li>Quarterly by IHA's Asset Services Manager in direct Liaison with TRG's Performance and Compliance Team, reported to IHA's Board or delegated sub-committee and TRG's Asset Investment SMT.</li><li>Annually by a suitable qualified and accredited 3<sup>rd</sup> party and a report provided to IHA's Board or delegated sub-committee and TRG's Executive Director Asset Services.</li><li>By the TRG internal audit team, as required, and a report provided to IHA's Board or delegated sub-committee and TRG's Group Audit Committee.</li></ol>	Measure	Target	Min. Reporting Interval	Reviewed by	% of known risks which have been assessed	100%	Monthly	Head of Service Delivery in direct liaison with TRG's Executive Directors/Head of Performance and Compliance via Compliance Dashboard.	% risks which have been reviewed in accordance with level of risk and appropriate timescales	100%	% risks with outstanding actions/control measures by risk level	0%	Volume of overdue risk by risk classification	0
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Volume of overdue risk by risk classification	0														
9.	<p><b>Guidance &amp; standards</b></p> <p>This policy aims to meet the requirements of the following <del>legislative framework</del> guidance, adopted by the HSE:</p> <ul style="list-style-type: none"><li>Approved Code of Practice (ACOP) L143 2nd Edition – Managing and working with asbestos</li><li>HSG 264 Asbestos: The survey guide</li><li>HSG 227 A comprehensive guide to managing asbestos in premises</li></ul>														



	<ul style="list-style-type: none"><li>• ACoP L143 'Managing and working with asbestos' (December 2013)</li><li>• HSG264. 'Asbestos: The survey guide' (this holds ACoP status)</li><li>• HSG 248 'Asbestos: The analysts' guide for sampling, analysis and clearance procedures</li><li>• HSG 227 'A comprehensive guide to managing asbestos in premises'</li><li>• HSG 247: Asbestos: The licensed contractors guide.</li></ul>
<b>10.</b>	<p><b>Incidents &amp; enforcement</b></p> <p>Detailed processes for dealing with incidents, RIDDOR reporting requirements and IHA's response to any enforcement action will be set out in the Asbestos Management Plan.</p> <p>IHA's Head of Service Delivery, in direct liaison with TRG's Head of Health, Safety and Environment will investigate all asbestos incidents and provide a report identifying the root cause of the incident and make recommendations to minimise any reoccurrence to IHA's Board or delegated sub-committee.</p>



## Fire Safety Management Policy

Date Effective: May 2021  
Date of Review:

1.	<p><b>Purpose</b></p> <p>The overall aim of this policy, and the associated procedures and control documents is to ensure the safety from fire for people living and working in properties, owned or managed by Irvine Housing Association [IHA] as a subsidiary company of The Riverside Group [TRG].</p> <p>IHA aims to protect the occupiers of its properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with fire so far as is reasonably practicable.</p> <p>This document sets out key policy objectives, control measures and accountabilities for ensuring fire safety.</p> <p>This purpose of this policy is to ensure IHA meets its current obligations under the following legislation:</p> <ul style="list-style-type: none"> <li>• The Health and Safety at Work etc. Act 1974;</li> <li>• The Management of Health and Safety at Work Regulations 1999;</li> <li>• Fire (Scotland) Act 2005</li> <li>• Fire (Scotland) Regulations 2006</li> <li>• Housing (Scotland) Act 1987</li> <li>• Housing (Scotland) Act 2001</li> </ul> <p><b>Other Legislation</b></p> <ul style="list-style-type: none"> <li>• Fire and Rescue Services Act 2004</li> </ul> <p>IHA will also seek to ensure that fire safety practices and standards comply with current outcomes of the Scottish Social Housing Regulator as outlined below:</p> <p>Registered Social Landlords must meet all applicable statutory requirements that provide for the health and safety of the occupants in their homes and comply with the Healthy, Safe and Secure elements of the Scottish Housing Quality Standard.</p> <p>The Association recognises that legislation, guidance and standards for social landlords in relation to fire safety are reviewed on an ongoing basis. It is the responsibility of the Association to respond to any changes and amend policy and practice as needed to ensure new applicable standards and objectives are met.</p> <p>IHA acknowledges and accepts its responsibilities under the applicable regulations and legislation and that failure to properly discharge these responsibilities may result in:</p> <ul style="list-style-type: none"> <li>• Prosecution by Health and Safety executive under Health and Safety at Work Act 1974</li> <li>• Prosecution under Corporate Manslaughter and Corporate Homicide Act 2007</li> <li>• Enforcement action by the Scottish Housing Regulator</li> </ul>
2.	<p><b>Scope</b></p>

	<p>This policy applies to all properties and fire safety equipment owned or managed by IHA. IHA is not responsible for fire safety measures within households (rented dwellings).</p> <p>Equipment and systems include;-</p> <ul style="list-style-type: none"> <li>• Fire Detection systems and Alarm installations</li> <li>• Domestic Smoke Alarms</li> <li>• Emergency Lighting</li> <li>• Fire-fighting equipment, including fire extinguishers and fire-fighting inlets</li> <li>• Smoke Control arrangements - including Automatic Opening Vents</li> <li>• Fire suppression systems i.e. sprinklers</li> </ul> <p><i>This also includes Riverside standards for</i></p> <ul style="list-style-type: none"> <li>• Fire Compartmentation and fire doors</li> <li>• Fire Evacuation</li> <li>• Fire Signage</li> </ul>
3.	<p><b>Key Legal Requirements</b></p> <p>UK regulations have an explicit duty on owners of buildings in which mechanical equipment is installed, IHA are expected to take reasonably practicable measures to ensure that the premises, including means of access or egress and plant provided for use, are safe and without risk to health. IHA will:</p> <ol style="list-style-type: none"> <li>1. Take such general fire precautions as will ensure the safety of our employees ensure the premises are safe for relevant persons not in our employment.</li> <li>2. Carry out suitable and sufficient assessment of the risks to identify the general fire precautions he must take and record the significant findings and the persons identified as being at risk.</li> <li>3. Implement appropriate arrangements for the effective planning, organisation, control, monitoring and review of the preventive and protective measures.</li> <li>4. Ensure the risk to persons related to the presence of dangerous substances is either eliminated or reduced by replacing the dangerous substance.</li> <li>5. Ensure our premises are equipped with appropriate fire-fighting equipment and with fire detection and alarms and regularly tested and maintained.</li> <li>6. Maintaining emergency exits and routes to emergency exits to ensure they provide quick and safe escape to a place of safety</li> <li>7. Appointing competent persons to help discharge our legal duties</li> <li>8. Provide our employees with comprehensible fire safety information</li> <li>9. Providing fire safety risk information to relevant persons</li> </ol>
4.	<p><b>Key policy objectives</b></p> <p>IHA will:</p> <ol style="list-style-type: none"> <li>1. Take all reasonable steps to ensure we are compliant with the requirements of The Fire (Scotland) Act and Fire (Scotland) Regulations.</li> <li>2. Develop positive working relationships with the Scottish Fire Rescue Services and TRG's Primary Authority Partners, including complying with any orders they issue in writing and seeking advice as to the severity of the risks identified.</li> </ol>

	<ol style="list-style-type: none"> <li>3. Carry out regular Fire Risk Assessments in all premises as required by the legislation noted above and in line with the timescales set out herein.</li> <li>4. Keep a register of Fire Risk Assessments [the FRA Register] recording the date of the last assessment.</li> <li>5. Identify &amp; deal with any hazards or lack of suitable fire management controls found, by taking corrective and remedial actions [Fire Actions] as appropriate.</li> <li>6. Keep a register of Fire Actions [the Fire Action Register] recording the due date to complete the action (as set out in the FRA) and the actual date of completion.</li> <li>7. Ensure sound fire safety principles are incorporated within planned and cyclical works programmes including the installation of LD2 fire detection systems within all rented properties within designated timescales.</li> <li>8. Introduce appropriate arrangements for the effective planning, organisation, control, monitoring and review of fire prevention and protective measures, including property specific evacuation plans, taking account of the particular needs of residents including those with disabilities.</li> <li>9. Ensure we have accurate recording-keeping which we will share with the local fire authority, as appropriate.</li> <li>10. All retirement living properties and internal communal areas will be appropriately equipped with fire protection equipment and emergency lighting, fire doors, and safety signs, as advised by a fire risk assessment.</li> <li>11. Maintain all fire safety equipment and installations and undertake regular inspections and testing in line with guidance.</li> <li>12. Provide and maintain safe means of escape from premises in the event of a fire</li> <li>13. Carrying out a practice evacuation where appropriate to ensure evacuation procedures are appropriate.</li> <li>14. Identify the relevant degree of training for staff by compilation of a Training Needs Matrix. Subsequently produce a Training Plan and implement in line with the timescales set out in the Fire Safety Management Plan.</li> <li>15. Ensure contracts with external contractors are managed effectively and robust contract monitoring is in place to monitor fire safety performance and promote continuous improvement.</li> <li>16. Respond appropriately to any new and evolving legislation and guidance in relation to fire safety and detection to ensure required standards are met.</li> </ol>
4.	<p><b>Policy implementation</b></p> <p>The accountabilities for implementation of this policy are as set out below:</p>

	<ol style="list-style-type: none"> <li>1. IHA's Managing Director retains overall accountability for the implementation of this policy and is both the Employer and Person in Control of Premises/Duty Holder for the purposes of the Fire (Scotland) Act 2005 and the Fire (Scotland) Regulations 2006.</li> <li>2. IHA's Head of Service Delivery in direct liaison with TRG's Executive Director of Asset Services is responsible for overall policy implementation and ensuring that adequate resources are made available to enable the objectives of the policy to be met.</li> <li>3. IHA's Head of Service Delivery in direct liaison with the TRG's Director of Building Safety and Head of Property Compliance is responsible for delivery of the key policy objectives as set out herein including designing and implementing procedures, staff training, and communication to customers.</li> <li>4. IHA's Asset Services Manager in direct liaison with TRG's Senior Compliance Manager is responsible for the implementation and monitoring of the operational effectiveness of the Policy, operational management plan and procedures and ensuring all appointed organisations and individuals have the appropriate levels of skills, knowledge, education and training.</li> <li>5. IHA's Asset Services Manager in direct liaison with TRG's Compliance Manager (Fire Safety) is responsible for ensuring all risk assessments are undertaken, risk reduction activity is undertaken and all fire safety equipment is regularly inspected and tested and remain in use. Management of contractors and ensuring all work is carried out safely and maintaining and updating our compliance register.</li> <li>6. Neighbourhood Services and front line staff shall support asset management and contractors in gaining access to carry out fire safety work and for resolving fire actions as necessary and updating Registers as appropriate.</li> <li>7. IHA's Head of Service Delivery in direct liaison with TRG's Head of Health Safety and Environment is responsible for ensuring the policy is kept up to date with prevailing legislation and statutory obligations and monitoring Enforcement Notices.</li> <li>8. This policy shall be implemented through a Fire Safety Management Plan. All relevant staff, consultants and contractors are responsible for following the requirements of the plan as set out.</li> </ol>
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<b>5.</b>	<b>Fire Risk Assessments (FRA)</b> <ol style="list-style-type: none"> <li>1. A Fire Risk Assessment (FRA) is a means of identifying potential fire hazards and rating the likelihood and possible severity of the fire and enables IHA to put adequate measures in place to control the risks. In order to discharge its obligations as set out above IHA will carry out and document FRAs for: <ul style="list-style-type: none"> <li>• Offices and business premises occupied and managed by IHA</li> <li>• The communal areas of blocks of flats</li> <li>• The communal areas of Retirement Living Units</li> <li>• Houses in Multiple Occupation</li> <li>• Communal buildings</li> <li>• Commercial buildings</li> </ul> </li> </ol>
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2. The only type of premises that do NOT require a FRA are individual private dwellings, including individual self-contained flats inside a purpose built block or flats within converted buildings
3. IHA will programme and commission Fire Risk Assessments from suitably qualified and Competent Persons in line with the programme timescales set out below.
4. Through TRG's Primary Authority Partnership with the London Fire Brigade (LFB), TRG has risk rated their premises by category of provision. These risk ratings will apply to any premises owned, managed or occupied by IHA. The risk rating allocates the review period for Fire Risk Assessments as shown.

<b>Type 1 (Annual review)</b>	<b>Type 2 (2 yearly review)</b>	<b>Type 3 (3 yearly review)</b>	<b>Type 4 (4 yearly review)</b>	<b>Type 5 (5 yearly review)</b>
<ul style="list-style-type: none"> <li>o <b>Large / complex buildings e.g. 6 storey+, extra care</b></li> <li>o <b>Vulnerable occupants (high / med dependency)</b></li> </ul>	<ul style="list-style-type: none"> <li>o <b>Medium complexity buildings</b></li> <li>o <b>Vulnerable occupants (med / low dependency)</b></li> </ul>	<ul style="list-style-type: none"> <li>o <b>Medium risk premises inc. General Needs Flats (med-rise i.e. 3-5 storey)</b></li> <li>o</li> </ul>	<ul style="list-style-type: none"> <li>o <b>Low risk premises</b></li> </ul>	<ul style="list-style-type: none"> <li>o <b>Very low risk premises inc. GN Flats (low-rise i.e. 1-2 storey) e.g. 2 flats with small entrance</b></li> </ul>

## 6. Fire Actions

1. Fire Risk Assessments describe and schedule actions [Fire Actions] required to be undertaken to remove or mitigate hazards to a tolerable level.
2. IHA will schedule and subsequently resolve all Fire Actions through to resolution in line with the timescales set out in this policy, as far as is reasonably practicable.
3. Actions will be allocated a risk rating, in line with the matrix set out by the Fire Risk Assessor. Risk ratings can be escalated if, in the judgement of the Fire Risk Assessor, the risk rating allocated by the matrix is too low.
4. Actions will be allocated a Target Time in line with the Risk Matrix set out below.

	<b>FRA Actions</b>	<b>Premises Risk Rating</b>				
		<b>Risk Type 1</b>	<b>Risk Type 2</b>	<b>Risk Type 3</b>	<b>Risk Type 4</b>	<b>Risk Type 5</b>
<b>Prio rity of</b>	<b>U (Urgent)</b>	1 day	1 day	1 day	1 day	1 day

	<table><tr><td>A (High)</td><td>3 months</td><td>3 months</td><td>3 months</td><td>6 months</td><td>6 months</td></tr><tr><td>B (Medium)</td><td>12 months</td><td>12 months</td><td>18 months</td><td>24 months</td><td>24 months</td></tr><tr><td>C (Low)</td><td>12 months</td><td>24 months</td><td>24 months</td><td>24 months</td><td>24 months</td></tr><tr><td>D (Recommended)*</td><td>Unlimited</td><td>Unlimited</td><td>Unlimited</td><td>Unlimited</td><td>Unlimited</td></tr><tr><td>Man1 (Management Action)</td><td>1 month</td><td>1 month</td><td>1 month</td><td>1 month</td><td>1 month</td></tr><tr><td>Man2 (Management Action)</td><td>3 months</td><td>3 months</td><td>12 months</td><td>12 months</td><td>12 months</td></tr></table>	A (High)	3 months	3 months	3 months	6 months	6 months	B (Medium)	12 months	12 months	18 months	24 months	24 months	C (Low)	12 months	24 months	24 months	24 months	24 months	D (Recommended)*	Unlimited	Unlimited	Unlimited	Unlimited	Unlimited	Man1 (Management Action)	1 month	1 month	1 month	1 month	1 month	Man2 (Management Action)	3 months	3 months	12 months	12 months	12 months
A (High)	3 months	3 months	3 months	6 months	6 months																																
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Man2 (Management Action)	3 months	3 months	12 months	12 months	12 months																																
	<p>5. Timescales, except in the case of Urgent Risk actions, shall be measured from the date of loading actions to the relevant system or 14 days after the FRA was carried out; whichever is the sooner.</p> <p>6. *FRA actions with Priority D (Recommended) will be given 12 month timescale within the compliance database for the action to be formally validated.</p>																																				
7.	<p><b>Routine Maintenance Fire Safety Equipment</b></p> <p>Fire Safety equipment, including fire doors, will need to be inspected at suitable intervals to ensure the equipment continues to operate as intended, and risks associated with wear or deterioration are avoided. This is usually where our risk assessment has identified a significant risk from the use of the equipment. If they are required:</p> <ul style="list-style-type: none"><li>• inspections should be regular (e.g. monthly or every 6 months)</li><li>• the scope and frequency will be determined by the competent person; or the manufacturers of fire safety equipment and detailed within the operational management plan.</li></ul>																																				
	<p><b>Fire Management Plan</b></p> <p>IHA will consult with the TRG upon and issue a Fire Management Plan [FMP] and carry out training with staff and contractors to ensure its requirements are understood.</p> <p>The management plan sets out IHA's approach to managing fire safety and the mechanism by which fire safety equipment and installations are managed.</p>																																				
8.	<p><b>Monitoring and Quality Control</b></p> <p>IHA will monitor implementation of this policy using a set of performance measures as below:</p>																																				



Measure	Target	Min. Reporting Interval	Reviewed by
% of known risks which have been assessed	100%	Monthly	Head of Service Delivery in Direct liaison with Executive Directors\Director of Building Safety/Head of Performance & Compliance via Compliance Dashboard.
% risks which have been reviewed in accordance with level of risk and appropriate timescales	100%		
% risks with outstanding actions/control measures by risk level	0%		
Volume of overdue actions by risk classification	0		

Additional Management Reports

Measure	Target	Min. Reporting Interval	Reviewed by
No. of <u>overdue</u> Fire Actions	Zero	Monthly	Head of Service Delivery in Direct liaison with Executive Directors\Director of Building Safety/Head of Performance & Compliance via Compliance Dashboard.
No. of <u>outstanding</u> Notices of Deficiency or Enforcement Notice received from Fire Authorities	Zero		
Fire alarm\ detection equipment & emergency lighting inspected and tested on programme (Contractors)	100%		Head of Service Delivery in Direct liaison with Executive Directors\Director of Building Safety/Head of Performance & Compliance via Compliance Dashboard.
Compliance Inspections (Fire MoE and Fire safety equipment)	100%		

Policy implementation will be reviewed:

- Quarterly by TRG's Performance and Compliance Team, in conjunction with the Compliance and Health and Safety Manager, and reported to the Asset Management SMT.
- Annually by a suitable qualified and accredited 3<sup>rd</sup> party and a report provided to IHA's Managing Director and IHA's Board or delegated sub-committee.
- By the internal audit team, as required, and a report provided to the Group Audit Committee.

9.	<p><b>Enforcement Notices</b></p> <ol style="list-style-type: none"> <li>1. All Fire Prohibition/Enforcement/Alteration Notices (or received at IHA shall be forwarded to and collated by the Head of HSE.</li> <li>2. The Head of HSE shall maintain a Register listing each Notice it's date of receipt and the anticipated date of resolution.</li> <li>3. Numbers of active Notices shall be reported on the Compliance Dashboard.</li> <li>4. All Fire Actions resulting from a Prohibition/Enforcement/Alteration Notice shall be allocated an Action Date, agreed with and confirmed to, the relevant Fire Officer. Action to be separately logged (on C365) &amp; monitored by the Head of Service Delivery in direct liaison with TRG's Head of Performance and Compliance.</li> </ol>
11.	<p><b>Guidance</b></p> <p>This policy reflects best practice by following the principles and processes of Fire Safety Management and Fire Risk Assessment Methodology, set out in the following publications:</p> <ul style="list-style-type: none"> <li>• Fire Safety in specialised housing guidance – NFCC</li> <li>• Building Regulations - Technical Handbook</li> <li>• BS 9991:2015 Fire safety in the design, management and use of residential buildings. Code of practice</li> <li>• BS 9999: Code of practice for fire safety in the design, management and use of buildings</li> <li>• BS 7974:2001 Application of fire safety engineering principles to the design of buildings - Code of practice.</li> <li>• British Standard BS 5839-6:2013</li> <li>• British Standard BS 5266</li> <li>• CLG Guidance on fire safety risk assessments in: <ul style="list-style-type: none"> <li>- Sleeping Accommodation</li> <li>- Residential Care premises</li> <li>- Offices</li> </ul> </li> <li>• CLG Guidance on Means of Escape for Disabled People</li> <li>• LGR Guidance on fire safety provisions for certain types of existing housing.</li> <li>• LACORS Housing Fire Safety Guide</li> <li>• Local Government Group Fire Safety in Purpose-Built Blocks of Flats</li> <li>• PAS 79:2012 – Fire Risk Assessment – Guidance and recommended methodology</li> <li>• Fire Safety in purpose built blocks of flats – LGA 2012</li> <li>• Fire safety risk assessment: sleeping accommodation - Department for Communities and Local Government 2006</li> </ul> <p>In addition, and in Liaison with the Scottish Fire Rescue Services IHA will consider guidance received from TRG's Primary Authority Partner, London Fire Brigade (LFB) with the regards to the key provisions and implementation of this policy.</p>



## Water Hygiene Management Policy

Date Effective: May 2021  
Date of Review:

1.	<p><b>Purpose</b></p> <p>The overall aim of this policy, and the associated procedures and control documents is to ensure the safety from infection from legionella for people living and working in properties, owned, managed or leased by Irvine Housing Association [IHA] as a subsidiary company of The Riverside Group [TRG].</p> <p>IHA aims to protect the occupiers of its properties, as well as other residents, visitors, staff, contractors and the general public, from the risks associated with legionella so far as is reasonably practicable.</p> <p>This document sets out key policy objectives, control measures and accountabilities for ensuring legionella safety.</p> <p>This purpose of this policy is to ensure IHA meets its obligations under the following legislation:</p> <ul style="list-style-type: none"> <li>• The Health and Safety at Work etc. Act 1974;</li> <li>• The Management of Health and Safety at Work Regulations 1999</li> <li>• Control of Substances Hazardous to Health (COSHH) Regulations (as amended) 2002</li> <li>• The Housing Scotland Act</li> <li>• The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)</li> <li>• The Water Supply (Water Fittings) Regulations 1999 S I 1999</li> <li>• The Water Supply (Water Fittings) (Amendments) Regulations 1999.</li> <li>• The Scottish Housing Quality Standard (SHQS) and the Scottish Government's Repairing Standard.</li> </ul> <p>The application of this Policy ensures that IHA meets compliance with the outcomes of the Scottish Housing Regulator as outlined below:</p> <p>Registered Social Landlords must meet all applicable statutory requirements that provide for the health and safety of the occupants in their homes and comply with the 'Healthy, Safe and Secure' elements of the Scottish Housing Quality Standard.</p> <p>IHA acknowledges and accepts its responsibilities under the applicable regulations and legislation and that failure to properly discharge these responsibilities may result in:</p> <ul style="list-style-type: none"> <li>• Prosecution by Health and Safety executive under Health and Safety at Work Act 1974.</li> <li>• Prosecution under Corporate Manslaughter and Corporate Homicide Act 2007</li> <li>• Enforcement action by the housing regulator</li> </ul>
2.	<p><b>Scope</b></p> <p>This policy applies to all properties owned, managed or leased by IHA.</p> <p>The default position for any buildings owned or managed by IHA is that IHA will actively manage that risk unless the lease document or other evidence is held to confirm IHA are legally 'exempt' from management responsibility.</p>
3.	<p><b>Key Legal Requirements</b></p>

	<p>UK regulations place an explicit duty on preventing or controlling the risk from exposure to water borne bacteria. IHA have implemented this policy in order to ensure compliance with the COSHH, regulations 7 and 9; HSW Act, sections 2, 3 and 4, ACOP L8 which places a duty on IHA to manage water supply and installed systems within its portfolio.</p> <ol style="list-style-type: none"> <li>1. Prepare a management plan</li> <li>2. Appoint competent person to manage risk (Nominated Responsible Person).</li> <li>3. Take reasonable steps to identify and assess sources of risk (Risk Assessment)</li> <li>4. Prepare a scheme to prevent or control risk of exposure to legionella bacteria, (Written Control Scheme)</li> <li>5. Implement appropriate management arrangements (Monitoring) <ul style="list-style-type: none"> <li>▪ Reduce potential risks from water systems</li> <li>▪ implementing, managing and monitoring precautions and routine inspections</li> </ul> </li> <li>6. Keep a written record of assessments, monitoring and precautions. (Record)</li> </ol>
4.	<p><b>Key policy objectives</b></p> <p>IHA will:</p> <ol style="list-style-type: none"> <li>1. Implement a “Water Hygiene Management Plan” for the portfolio</li> <li>2. Appoint a Responsible Person who will have a duty to put in place a Water hygiene Management Plan [WHMP] to minimise the risk of water borne bacteria (including legionella) and to manage and monitor the necessary work systems and procedures.</li> <li>3. Carry out a risk assessment across the portfolio [PRA] to identify, where practicable, buildings with water supply systems where conditions may be present that encourage water borne bacteria (including legionella) to multiply and/or disperse.</li> <li>4. Use the PRA to identify risk in certain types of buildings and carry out surveys and/or Legionella Risk Assessments [LRAs] in those buildings to identify hazards relating to risk of infection and develop procedures to evaluate the risk and determine the appropriate remedial actions and control measures.</li> <li>5. Establish and keep up-to-date, a record of the water systems and installations, risk assessments, maintenance, inspection and testing (The “Register”)</li> <li>6. Use the outcomes from the LRAs to arrange programmes of routine inspection and testing of water systems, including, where needed, a programme of modification to any deficient systems and equipment.</li> <li>7. Ensure that for dwellings left vacant for extended periods of time a suitable drain-down or flushing regime is put in place to prevent the potential build-up of risk conditions</li> <li>8. Keep all relevant personnel adequately trained in practices and procedures with respect to the control of Legionella.</li> <li>9. Introduce an approach to ensuring risk information is provided to those affected including customers, stakeholders.</li> <li>10. Ensure that contracts with external contractors are managed effectively and robust contract monitoring is in place to monitor performance and promote continuous improvement.</li> </ol>

## 5. Policy implementation

The accountabilities for implementation of this policy are as set out below:

1. IHA's Managing Director retains overall accountability for the implementation of this policy and is the Responsible Person.
2. IHA's Head of Service Delivery in direct liaison with TRG's Executive Director of Asset Services is responsible for policy implementation and ensuring that adequate resources are made available to enable the objectives of the policy to be met.
3. IHA's Head of Service Delivery in direct liaison with TRG's Director of Building Safety is responsible for delivery of the key policy objectives as set out herein including designing and implementing procedures, staff training, and communication to customers.
4. IHA's Head of Service Delivery in direct liaison with TRG's Head of Compliance is accountable for the development, implementation and monitoring of effective Compliance Management policies, procedures
5. IHA's Asset Services Manager in direct liaison with TRG's Compliance Manager is responsible the delivery and monitor of compliance activity and the operational effectiveness of the Compliance Management model and policies, procedures and development and communication of staff and customer guidance.
6. Neighbourhood Services and front line staff shall support Asset Management and contactors teams in gaining access to carry out legionella related works and maintenance.
7. IHA's Head of Service Delivery in direct liaison with TRG's Head of Health, Safety and Environment is responsible for ensuring the policy is kept up to date with prevailing legislation and statutory obligations.
8. a set of process maps, procedures and control documents. All staff are responsible for following the requirements of those documents.

## 5. Portfolio Risk Assessment [PRA] and Legionella Risk Assessments [LRA]

Category	Property Structure	Risk rating	Asset information	Source	Count	High - Enhanced regime	Medium-Routine regime	Low-Assessment visit only	Tolerable-No visit	Notes
					Interval →	H-2 years	M - 3 years	L-5 years	T	
1	Block	1	Communal heating	PM3	No. Blocks with Communal heating		All			
2	Block	2	No communal heating (C&S)	Academy	No. Blocks excluding Category 1	All enhanced care				
3	Block	2	No communal heating (C&S)	Academy	No. Blocks excluding Category 1		All independent living			included in 2 pending more data analysis
4	Block	3	No communal heating (Commercial)	Academy	No. Blocks excluding Category 1		All			
5	Block	3	No communal heating (GNR)	Academy	No. Blocks excluding Category 1			Assessment visit within 5 years		Moves to another category after initial assessment
6	Flat	4	Common supply	PM3	No. of Flats attached to Communal Heating		Included in Cat 1			
7	House	5	Potentially stored water	PM3	No combi installed			Subject to further analysis of asset data		Potential for "No visit" depending on types of systems/risk appetite
8	Flat	5	Potentially stored water	PM3	No combi installed					
9	House	6	No stored water	PM3	Combi installed			No	Yes	
10	Flat	6	No stored water	PM3	Combi installed					

1. IHA in partnership with TRG have developed a practical and proportionate portfolio risk assessment approach to distinguish properties that require a risk assessment to be

	<p>undertaken. If the risk is deemed to be very low and tolerable, risk can be mitigated with control measures, without a site specific risk assessment being documented.</p> <ol style="list-style-type: none"> <li>IHA will always have a Legionella Risk Assessment (LRA) carried out if there are communal water facilities, e.g. within a workplace or building with common/ shared parts. The exception being if the communal water asset is only a single external mains fed cold water bib tap (garden tap).</li> <li>The assigned portfolio categories help to distinguish properties of greatest risk which require a detailed site specific legionella risk assessment to be undertaken and documented. It also helps to distinguish properties in the general needs housing stock which do not require elaborate control measures and where the risk can be mitigated through a managed approach. Full details are contained with the WHMP.</li> </ol>
	<p><b>Water Hygiene Management Plan</b></p> <p>IHA will consult upon and issue the Water hygiene Management Plan [WHMP] and will carry out training with staff and contractors to ensure its requirements are understood.</p> <p>The management plan sets out the mechanism by which water systems and installations are managed.</p>
	<p><b>The Compliance Register</b></p> <p>IHA will;</p> <ol style="list-style-type: none"> <li>Set up and manage a water hygiene compliance register [the Register] and ensure it is kept up to date with details of water systems and installations requiring a risk assessment.</li> <li>Record the findings of any survey/risk assessment or any implementation risk reduction activity including control measures will be documented within the Compliance Register.</li> <li>When any work is undertaken to mitigate the risks or remove the risk by altering the installation etc a clear record will be made within our compliance register.</li> <li>The Register will be updated when we implement any risk reduction activity including control measures or remove the risk by altering the system.</li> <li>Record any routine inspection and testing of water systems,</li> <li>Where possible contractors will be given access to live survey data in order to update their own systems, in real time, without the need to access the Register via an online based portal.</li> </ol>

<b>7.</b>	<b>Monitoring and Quality Control</b>  IHA will monitor implementation of this policy using a set of performance measures as below (subject to catch up as above):  Policy implementation will be reviewed:  <ol style="list-style-type: none"><li>1. Quarterly by IHA's Compliance and Health and Safety Manager in direct liaison with TRG's Performance and Compliance Team, and reported to IHA's Board or delegated sub-committee and TRG's Asset Services SMT.</li><li>2. Annually by a suitable qualified and accredited 3<sup>rd</sup> party and a report provided to IHA's Board or delegated sub-committee and TRG's Executive Director of Asset Services.</li><li>3. By the internal audit team, as required, and a report provided to IHA's Board or delegated sub-committee and TRG's Group Audit Committee.</li></ol>
<b>9.</b>	<b>Guidance</b>  This policy reflects best practice by adopting the principles and processes of robust legionella control set out in the following publications:  <ol style="list-style-type: none"><li>1. Approved Code of Practice (ACOP) L8 – 'Legionnaires Disease: The Control of Legionella Bacteria in Water Systems' Approved Code of Practice.</li><li>2. HSG274 Parts 2 and 3</li><li>3. BS8580:2010 – Water Quality – Risk Assessments for Legionella Control – Code of Practice.</li><li>4. BS8558:2011 Specification for Design Installation, Testing and Maintenance of Services Supplying Water for Domestic Use within Buildings and their Curtilages.</li><li>5. BS7942: 2000 Thermostatic Mixing Valves for use in Care Establishments.</li><li>6. HELA Circular, Scalding risks for Hot Water in Health and Social Care, LAC Number 79/5</li></ol>





## **Asset Compliance Management Policy**

Date Effective: May 2021  
Date of Review:



Registered Scottish Charity No: SC042551

## 1. Purpose

The aim of this policy is to ensure Irvine Housing Association (IHA) as a subsidiary of The Riverside Group (TRG) provides safe houses to our customers and a safe working environment for our staff, contractors and those affected by our activities.

This policy sets out the overarching principles and objectives which underpins IHA's approach to compliance management and how this reflects and is aligned with TRGs wider Compliance Strategy and framework. The policy details the legal and regulatory requirements applicable to ensure effective and safe asset compliance management, and sets out specific areas of compliance deemed to be key risks to the achievement of Business Plan objectives, namely: Asbestos Management, Gas Safety, Fire Safety, Lift Management, Electrical Safety and Legionella Safety.

The application of this policy ensures that IHA will implement effective compliance management and complies with the outcomes of the Scottish Social Housing Regulator, specifically in relation to the 'Healthy, Safe and Secure' elements of the Scottish Housing Quality Standard, and all applicable requirements that provide for the health and safety of the occupants in their homes.

IHA acknowledges and accepts that failure to discharge these responsibilities may result in:

- Prosecution by Health and Safety Executive under Health and Safety at Work Act 1974.
- Prosecution under Corporate Manslaughter and Corporate Homicide Act 2007.
- Housing Regulator Enforcement Action

## 2. Scope

This policy applies to all properties owned or managed by IHA, or places of work for IHA staff. This includes houses, flats, any rented accommodation, communal areas and garages. IHA does not (normally) hold a duty of care to leaseholders, or shared owners, for asbestos located within the property.

## 3. Legal and Regulatory Context

The legal framework for compliance management is provided by the Health and Safety at Work etc. Act 1974, whose premise and main principle is that those who create risk from work activity are responsible for the protection of workers and the public from any consequences, so far as is reasonably practicable. Legislation which is relevant to IHAs overall Compliance Management approach includes:

- The Management of Health and Safety at Work Regulations 1999
- The Workplace (Health, Safety & Welfare) Regulations 1992.

- Environmental Protection Act 1990
- The Reporting of Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR) 2013.
- The Control of Substances Hazardous to Health (COSHH) Regulations 2002.
- Housing (Scotland) Act 2001
- The Provision and Use of Work Equipment Regulations (PUWER) 1998.
- Occupier Liability (Scotland) Act 1960.

#### 4. Strategic Context

IHA as a subsidiary company of TRG will adopt the principles of TRGs wider strategic Compliance Framework, which will include the following elements:

Asset Compliance Strategy	The Asset Compliance Strategy sets out our vision, aims, objectives and strategic priorities.
Compliance Operational Management Framework	This translates our vision, objectives and introduces a compliance management model to provide guidance to staff on managing our risks to ensure we meet our statutory and regulatory obligations.
Strategic Risk Assessment	This sets out our approach to our Landlord Health and Safety Compliance assessment and identifies the key strategic health and safety risks for IHA.
Compliance Control Framework	IHA has developed a risk-based compliance control framework and monitoring programme to confirm our objectives are consistently met and continue to be met.
Competence framework	IHA will ensure that any person or organisation appointed to undertake any compliance related activity is competent.

The Associations Head of Service Delivery will work in partnership with the TRGs Director of Building Safety and relevant Heads of Compliance and the Head of Health and Safety and Environment to ensure the principles of TRGs strategic framework are applied by IHA and that outcomes and service standards are consistent.

#### 5. Key Policy Objectives

IHA will:

1. Adhere to TRGs strategic risk assessment and define relevant control measures and assurance as it applies to IHA.

2. Adhere to TRGs overarching Compliance Framework which will define our strategic priorities and implement a Compliance Management Model which will reduce any risks to a tolerable level.
3. Work with TRG to review existing policies and practices on an ongoing basis, and develop new policies, operational management plans and procedures which are proportionate and applicable to IHA, and which are aligned to our risk assessment areas.
4. Introduce effective risk reduction strategies.
5. Work with TRG to develop effective ICT systems and processes, which are proportionate and applicable to IHA, to ensure accurate recording and reporting of compliance based activities.
6. Ensure that effective contract procurement and monitoring processes are in place for all work streams we are engaged with in relation to compliance activity to monitor performance and promote continuous improvement.

## 6. Key Principles

### ***Asset Compliance Management Model***

IHA as a subsidiary of TRG has adopted TRGs Asset Compliance Management Model, which aims to prevent incidents through a Risk Management process. This is achieved by the identification, assessment and prioritisation of risks, followed by the suitable application of resources to minimise, monitor and control the probability and or impact of unfortunate events. IHA will follow the Compliance Management Model below which centres on five core areas:



We have carried out a suitable and sufficient assessment of the asset risks to which employees are exposed while at work; and the risks to people not in our employment arising from the conduct of our undertakings and identified the key risk areas as follows:

Risk Item 1 – Heating and Ventilation (including Gas Safety)

Risk Item 2 – Fire Safety (including FRA)

Risk Item 3 – Electrical Safety (including EICR)

Risk Item 4 – Asbestos Management

Risk Item 5 – Water hygiene (including Legionella)

Risk Item 6 – Mechanical & Lifting Equipment

This Policy will be supported by specific health & safety related policies and procedures for each key risk area.

We have analysed and evaluated all our key risks through a risk assessment. Details of the main risks are contained within the specific risk policies

The hierarchy responsibility for each key risk is defined in the risk policies.

### ***Risk Management***

The IHA Business Plan reflects that Asset Compliance Management is a key landlord responsibility. With regard to this, IHA will seek to mitigate against business risk through managing Asset Compliance Management in an efficient, effective and economic manner.

## **7. Policy Implementation**

For each risk area we define the following roles and accountabilities:

- Duty Holder – The person with overall responsibility within the organisation for the implementation of policy and ensuring that adequate resources are made available to enable the objectives of the policy to be met.
- Responsible Person – This is the person in control of operational delivery.
- Competent Persons – Individuals and companies appointed to implement control measures.
- Appointed persons – Individuals and companies appointed to undertake compliance related tasks or activities.

The accountabilities within IHA for implementation of this policy are as set out below:

1. IHA's Managing Director retains overall accountability for the implementation of this policy and is the named Duty-holder.
2. IHA's Head of Service Delivery in direct liaison with TRG's Executive Director of Asset Services is responsible for overall policy implementation, ensuring that adequate resources are made available to enable the objectives of the policy to be met.
3. IHA's Head of Service Delivery in direct liaison with TRG's Director of Building Safety and relevant Head of Compliance is responsible for the delivery of key policy objectives as set out herein, including designing and implementing procedures, staff training, and communication to customers.
4. IHA's Head of Service Delivery in direct liaison with TRG's Director of Asset Services and Delivery is responsible for operational delivery, including the management of all contractors carrying out compliance related works. Also for the updating of compliance registers as appropriate and achieving the targets associated with the key policy objectives.

5. Neighbourhood Services and frontline staff shall support Asset Management and contactor teams in gaining access to carry out compliance related work.
6. IHA's Head of Service Delivery in direct liaison with the Head of Health, Safety and Environment is responsible for ensuring the policy is kept up to date with prevailing legislation and statutory obligations.

## **7. Resources**

The Association will seek to ensure adequate resources are available to undertake all required statutory inspections and implement any control measures to reduce risks to a reasonable practicable level. As part of the annual setting of the budget, the forward development programme for Asset Compliance Management will be considered and any functions associated with implementing the Compliance Management Model will be considered and assessed for budgetary implications.

## **8. Training**

This policy and the individual risk area policies outlined in Appendices 1-6 will be the subject of a mixed platform of training across TRG and IHA and will include all stakeholders. This training will include:

- Team Briefings – for those who need to be aware of but not actively involved in the delivery.
- On the Job training – for those who need to use the procedures in their daily roles.
- Regular Tool Box refreshers – for those using the procedures.
- Academic Qualifications – for appointed competent persons.

We will undertake a competence assessment of each appointed person under the risk area policies and ensure suitable and sufficient training is provided and kept up to date in order to maintain competency levels. The competency of external contractors will be ensured through our procurement processes and ongoing contract monitoring.

## **9. Performance Management Monitoring and Reporting**

TRGs Business Intelligence Team will produce reports in relation to the agreed Key Performance Indicators for all areas of asset compliance. This information will be reported to the Managing Director and Board and monitored as detailed in each individual risk area policy.

This Compliance Management policy will be reviewed in line with TRGs wider compliance strategy and framework. Any review resulting in material changes to compliance policy and practice implemented by IHA will be brought to IHA Board for approval.

Date:	30 <sup>th</sup> June 2021
Subject:	Managing Director's Appraisal and Objectives
Author:	Duncan McEachran
Sponsor:	N/A
Appendices:	Appendix 1 - Irvine HA Managing Director Objectives 2020 – 2021 - Outcomes
Action:	Noting
Data Class:	Public

**EXECUTIVE SUMMARY**

This Report is provided to Board with an update on the Managing Director's Appraisal Meeting and the objectives proposed for the 2021/22 performance year.

**RECOMMENDATION**

- It is recommended that Board Members note and comment on the contents of this Report.

## **1 Appraisal and Objective Setting Meeting**

- 1.1 The Association's Chair met 'virtually' with the Managing Director and Riverside's Executive Director of Customer Service on 3<sup>rd</sup> June 2020.
- 1.2 The meeting reviewed the MD's performance against the agreed objectives for 2020/21, highlighting particular areas of achievement and areas where performance did not meet aspiration.
- 1.3 As the current Managing Director will be leaving the business, early in the performance year, broad objectives for the post for 21/22 will be agreed subject to refinement with the new post holder.

## **2 Appraisal of 2020/21**

- 2.1 The MD's objectives for 2020/21 were agreed by Board in July 2020. They are attached, together with some notes on performance, as Appendix 1.
- 2.2 The MD highlighted particular areas of achievement as follows:
  - The maintenance of business continuity, services and governance during the pandemic, with the particular focus on colleague and customer safety.
  - The continued operation of a lettings function throughout periods of lockdown and the letting of homes to vulnerable households.
  - The 'out-performance' of budget and business plan, and the specific achievement of a 44% operating margin.
  - Achieving the start of site with the modular housing development in Dundonald.
  - The excellent progress with the developments at Tarryholme (Phase 2) and Monkton.
  - The successful delivery of a virtual AGM and SGM in 2020 allowing the rule change to be completed.
  - The successful completion of the SHR's Assurance Statement process.
  - The management of a robust, and ultimately successful, process to appoint a new Chair of the Association.
  - The improvement of employee engagement to an overall score of 8.5 in the Hive survey, which was one of the highest in Riverside.
  - The establishment and successful leadership of the Riverside Customer Services Colleague Engagement Group.
- 2.3 The particular areas where the MD felt he would have hoped to achieve better outcomes where related to:
  - More progress to have been made on the Corporate Plan commitment to pursue 'place-making' initiatives and the use of Thistle Housing Services Limited.
  - While performance on arrears recovery and customer satisfaction saw some improvement during the year further improvement is needed.
- 2.4 In summary it was felt that the MD's performance has been excellent overall.



### 3 Proposed 2021/22 Objectives

- 3.1 Objectives for 2021/22 will be agreed with the current Managing Director with the view that they will be refined once a new post holder is in place. Draft outline objectives are set out below for comment by Board.

People	<ul style="list-style-type: none"> <li>• Ensure improvement to the customer experience (KPI – Customer Satisfaction. of &gt;85%)</li> <li>• Reshaping of services to ensure appropriate resources are available to assist customers to sustain tenancies</li> <li>• Continue development of agile/flexible ways of working (to include completion of plans for the office and changes to working practices)</li> <li>• Ensure the maintenance of the Association's Safety First culture</li> </ul>
Homes	<ul style="list-style-type: none"> <li>• Delivery of current new build development programme</li> <li>• Maintain investment in existing homes of agreed business plan levels including achievement of EESSH targets</li> <li>• Oversee the development of an asset management strategy to focus on the regeneration of existing estates</li> </ul>
Place	<ul style="list-style-type: none"> <li>• Establish and commence implementation of a Zero Carbon Plan</li> <li>• Develop and implement place making initiatives to support the communities where the Association operates</li> </ul>
Finance & Operations	<ul style="list-style-type: none"> <li>• [REDACTED]</li> <li>• Achieve arrears target of 3.5% (four week average) and void loss of &gt;3.00%</li> <li>• Review the 30 year business plan to account for risks associated with a changing operating environment and meet Corporate Plan objectives</li> </ul>
Governance	<ul style="list-style-type: none"> <li>• Ensure effective induction and integration of new Chair and Board members</li> <li>• Delivery and maintenance of Annual assurance Statement to the SHR</li> </ul>
Riverside Growth	<ul style="list-style-type: none"> <li>• [REDACTED]</li> <li>• Implementation and development of the Riverside Scotland brand</li> </ul>

- 3.2 The objectives have been set to reflect the themes of the Corporate Plan, the Association's values and recognition of the need to recover the Association's services, and the opportunities that exist. Final objectives will be agreed between the Chair of the Association, Executive Director Customer Services and the Managing Director.

### 4 Recommendation

- 4.1 It is recommended that Board Members note and comment on the contents of this Report.

Date:	21 <sup>st</sup> June 2021
Subject:	Operational Performance
Author:	Heather Anderson
Sponsor:	Paul Hillard
Appendices:	Yes
Action:	Information
Data Class:	Public

### **EXECUTIVE SUMMARY**

This paper and appendices sets out performance across the operational KPIs as at the end of Period 2 of 2021.

### **RECOMMENDATION**

The Board is asked to consider and note the performance position.

## **1 Background**

- 1.1 Performance against the current agreed KPIs is reported to each Board meeting using the newly developed performance reporting system, Tableau. The dashboards as at the end of Period 2 of 2021 are attached to this report as Appendix 1.

## **2 Performance Context**

- 2.1 The current KPIs for 2021/22 for Irvine are:

- Total unadjusted arrears.
- Void rent loss.
- Rent Evictions
- Repairs timescales.
- Compliance
- Tenancy Turnover
- Tenancy Sustainability
- Overall satisfaction
- Listening to Views
- Repairs and Maintenance
- Latest Repair satisfaction
- Complaints Handling
- Complaints resolved at first stage.

## **3 Performance update and analysis**

### **3.1 *Income***

Total arrears are currently at a 4 week average of 3.53%. There are currently 941 tenants claiming Universal Credit. Four Housing Officers remain focused

on arrears recovery work and are working hard to engage with customers and maintain repayment arrangements. No evictions legislation has been extended until the end of September 2021, and we currently have approximately 9 households for whom we are likely to seek eviction when permitted. We have developed bespoke letters in conjunction with our solicitor Harper Mcleod, and are likely to progress to legal action in the meantime for some high risk cases to request enforcement of agreed repayment arrangements. Arrears visits have resumed for high risk cases in accordance with social distancing guidelines.



Void rent loss is out with target due to a higher than average number of voids in recent months (a significant number of tenant deaths), as well as increased turnaround timescales as a result of deep cleans and Covid restrictions.

#### *Customer Satisfaction*

Overall customer satisfaction has improved over the month and is currently at a peak of 86%. As part of our ongoing repairs and maintenance tender process, we have set out key performance indicators in relation to follow on works, which should improve how these works are communicated to customers, and setting 48 hours for the completion of all follow on works.

#### *Compliance*

Gas safety check compliance currently sits at 100%.

## **4 Next steps**

When restrictions allow, we will be holding an organisational wide session on 'person centred' customer service, and will be further developing our Trauma Informed Practice training to build on our customer satisfaction outcomes. The Head of Service Delivery will also be working closely with the Head of Income Collection to establish a future structure for Income Collection service support which will achieve the best outcomes for Irvine customers.

## **5 Recommendations**

### **5.1 As described in the Executive Summary.**

# Irvine - Operational KPIs (Board)

P2 - 03 to 30 May 2021

Rent Evictions

0

Repairs Completed in Ti..

99.5%

Total Repairs: 434

Gas Compliance

100.00%

Expired: 0

Tenancy Turnover

0.8%

Tenancies Ended: 18

Tenancy Sustainability

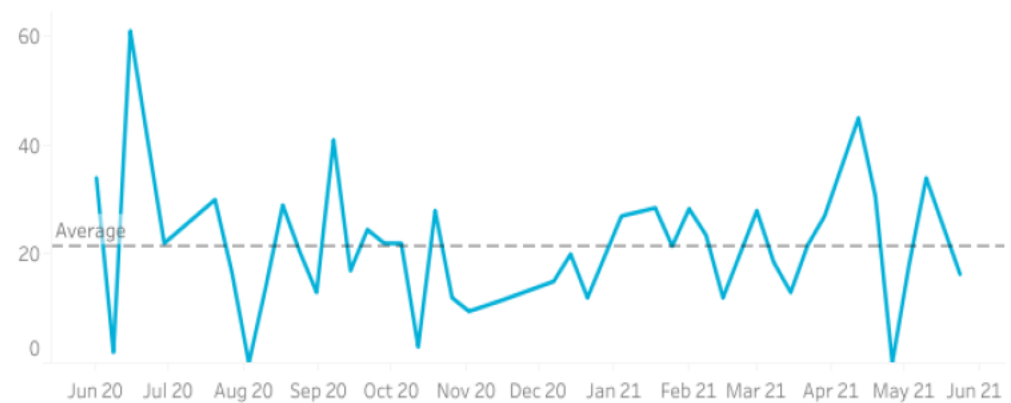
1

Refusals

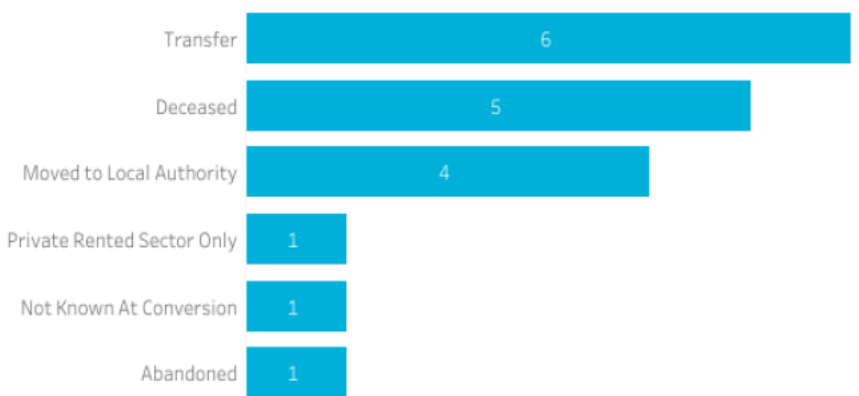
5.56%

18 Lets with 1  
refusal

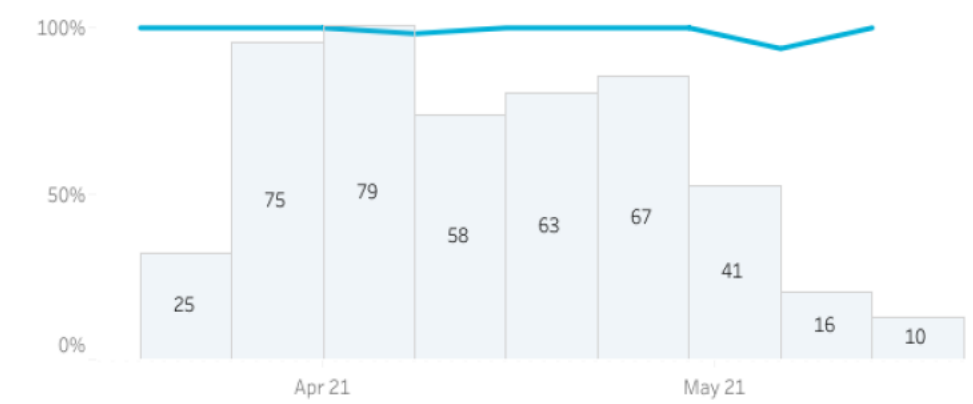
Average Relet Days Week by Week



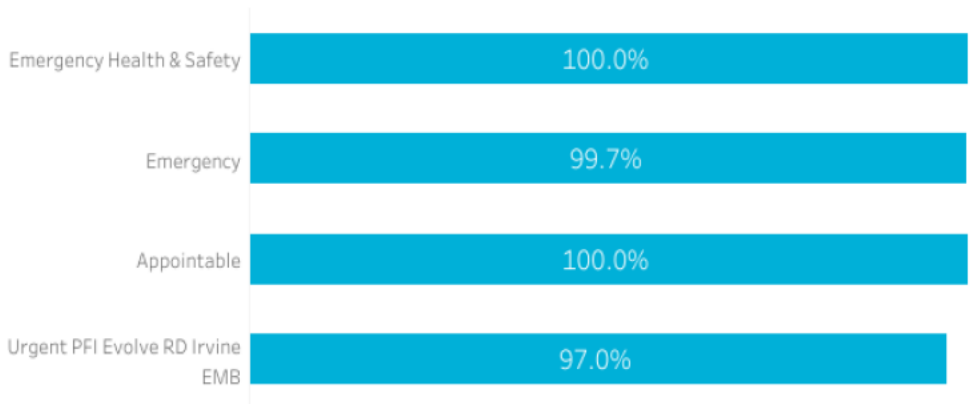
All Ended Tenancies



Repairs Completed in Time vs Volume of Repairs



Repairs Completed in Time by Priority



**Commentary:**

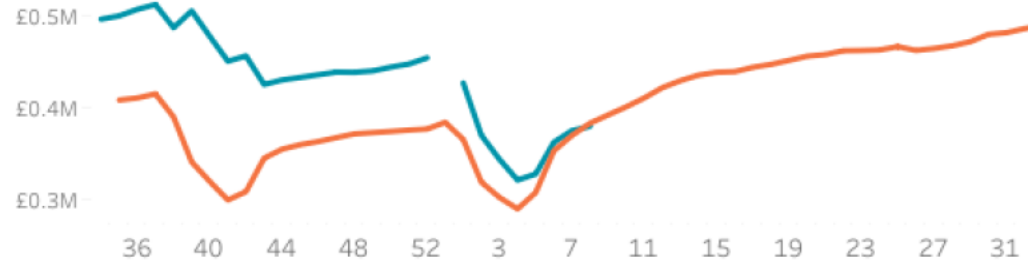
- Average re-let days are currently at 17 for the period. The Asset and Housing teams continue to meet on a weekly basis to track the end to end process for each void property, deep cleans are still included within the process due to Covid, which lengthens turnaround times.
- Two emergency/urgent repairs were out with timescales during the month, due to a missed appointment and administrative error. Both cases have been discussed with the contractor at monthly monitoring meeting.
- The Irvine repairs options appraisal process is ongoing, future repairs services will have a greater focus on handling of follow on works, and customer satisfaction.



Currently Showing: **Irvine A**

Current Arrears  
**£0.38M**  
£10.75M (3.53%)

Arrears 4 Week Average **This Year** vs **Last Year**  
*The latest week is fixed at the centre of the chart*



Commentary

- Average 4 weekly arrears have increased by 0.5% over the period. Four Housing Officers continue to be dedicated to arrears recovery in Irvine, supported by the IC team.
- Evictions remain suspended in Scotland, however high risk cases have been identified and steps taken to ensure cases can proceed to court when permitted.
- Arrears visits have resumed, and we have increased the use of text messaging payment reminders.

Year Movement Per Unit

**+£47**

Moved to Former: **£0.04M**

Yearly Movement Per Unit  
*(Arrears Per Unit - Arrears Per Unit 1 Year Ago) + Arrears Moved to Former in Year per Unit*



Commentary

Void Rent Loss Weekly  
*The Rent Loss for each individual week*



Commentary

- Void rent loss has reduced from a peak in February/March. Normal lettings processes have resumed with the exception of deep cleans for each property.
- We are continuing with the pre allocation process and the asset and Housing teams meet weekly to discuss every void and track the end to end process for each property.

Void Rent Loss  
**0.34%**  
£4,633 / £1.35M





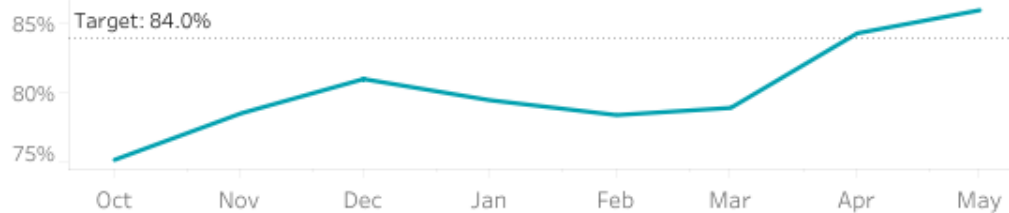
# Social Housing Customer Satisfaction - NSC Paper...

Currently Showing: IRV  
Rolling 3 Month Measures

## Overall Satisfaction

# 86.0%

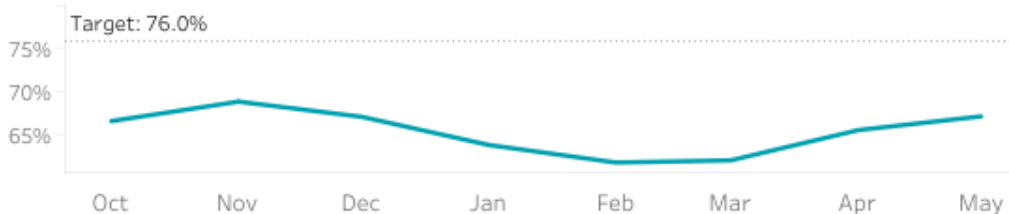
Responses: 121



## Listening to Views

# 67.2%

Responses: 122



## Repairs and Maintenance

# 73.8%

Responses: 122



## Latest Repair

# 80.0%

Responses: 100



## Complaints Handling

# 33.3%

Responses: 3



### Commentary

- Overall satisfaction has continued to increase for Irvine and currently sits at 86%. We have introduced a single point of contact for all Asset related complaints and issues, which has been well received with customers.

### Commentary

- The proactive welfare calls to tenants are continuing, where issues can be identified earlier and actions taken in a proactive approach to tenancy management.

### Commentary

- Listening to Views satisfaction has also improved since a dip in February/March. We are working closely with our local community groups and Customer Panel to support online meetings and discussions, and are planning a wider Customer Webinar in late June to encourage more participation. We are hoping to hold a Tenant Fun Day across our local areas when restrictions allow.

### Commentary

- Overall repairs and maintenance satisfaction has improved slightly since March, most likely due to the lifting of restrictions and resumption of planned maintenance services and routine repairs. We are currently out to tender for our R&M services, with a clearer focus on follow on works, customer communication, tracking of operatives, and collaboration.

### Commentary

- Satisfaction with latest repair has increased since April following a dip at the start of the year. This is likely partly due to the resumption of routine repairs and follow on works which were halted due to Covid. Every dissatisfied case is discussed with the contractor and improvement actions identified.
- Two complainants were dissatisfied in May, these are both complex cases. In both cases joint visits have taken place with operational managers and issues resolved to the customer's satisfaction.

Date:	09-06-2021
Subject:	Equality, Diversity & Inclusion Action Plan
Author:	Caroline Cameron
Sponsor:	Morag Hutchinson
Appendices:	Appendix 1: 2021 EDI Action Plan Monitoring Sheet
Action:	N/A – Information paper
Data Class:	Public

## EXECUTIVE SUMMARY

This paper provides an update on the 2021 Equality, Diversity & Inclusion Action Plan.

## RECOMMENDATION

The Board is asked:

- To note the contents of the 2021 EDI Action Plan Monitoring Sheet.

## 1 Background

- 1.1 In November 2020, the Board approved a new Equality, Diversity & Inclusion (EDI) Action Plan and it was agreed that progress on the associated actions flowing from this would be presented to the Board bi-annually. The last update was at the approval meeting in November 2020.

## 2 Action Plan

- 2.1 The updated 2021 EDI Action Plan Monitoring Sheet can be found at appendix one and details our progress and results to date.
- 2.2 Since the action plan was last presented to Board, work has continued with the Association to embed the ethos of equality and to ensure that the environment we create is inclusive for customers and staff alike. This work included IHA becoming a member of Stonewall Scotland and in terms of our customers, we undertook a full membership drive for our Customer Panel, part of the aim is to have a fully inclusive membership base to ensure we are considering all our customers' views, to date we have brought 85 customers onto our panel.

## 2 Scottish Housing Regulator (SHR)

- 2.1 In its *Regulation of Social Housing in Scotland, Our Regulatory Framework*, the SHR has underlined the importance it places on equalities and human rights, by introducing a new requirement for social landlords to:
- *Have assurance and evidence that it considers equality and human rights issues properly when making all of its decisions, in the design and review of internal and external policies, and in its day-to-day service delivery*



As well as to continue collecting data relating to each of the protected characteristics for existing and new tenants, waiting list applicants, governing body members and staff.

### **3 Risk**

- 3.1 Failing to implement the EDI Policy could result in a number of significant risks arising including:
- reputational damage caused by not providing services equally to all parts of the community;
  - exposure to legal claims for unfair treatment;
  - not providing the right support to those who need it; and
  - not harnessing the skills of employees and the governance community.

### **4 Recommendation**

- 4.1 It is recommended that the Board notes the progress made during 2021 to date.

Equality, Diversity & Inclusion Action Plan 2021

Key:

	On target
	Up to one month slippage
	Over one month Slippage
	Ongoing task
	Complete

Customer Objectives	Detail	Outcomes	Deadline	Owner	Update November 2020	Update June 2021
1. Getting to know our customers	Continue to collect customer diversity information, ensuring that it is stored securely and meets the GDPR. We will use this information to better understand the needs of our customers and identify and shape our services accordingly.	IHA will provide tailored services that are accessible to all customers, taking into account individual needs wherever possible.	Dec-21	HA	Tenants are asked to complete E&D information at the point of applying for housing and at tenancy sign up stage. Data is routinely gathered on tenants who are assessed as having a need for adaptations.  We are already seeing improvements on information gaps, e.g. 23.89% ethnicity was unknown in the 2020 action plan, the 2021 action plan sees this decreased to 18.82%.	Information continues to be gathered at housing application and tenancy start stage. Information gaps will be assessed at the end of the year.
2. Supporting our customers	Continue to work closely with local community organisations and health services representing specific groups ensuring that our Tenancy Sustainability Team are equipped with the knowledge they need to engage with and support our most vulnerable customers.	To ensure that we understand and can identify our customers' needs and signpost them to the right agencies to offer support at the time when they need it most.	Jun-21	HA	Due to the threat of Covid-19 we began contacting all tenants aged 65 or older to offer support and signposting people if they required assistance, linking in with the council's community planning partnerships where appropriate. This was then extended to the over 45s, with regular call backs offered to all those contacted. The tenancy sustainability team are also providing greater support to homeless households leaving hostel accommodation for a new tenancy, doing what we can to ensure that they have what they need to set up their new home.	Staff are continuing to contact tenants proactively to discuss any issues or support needs. Referrals to the TST are increasing (current caseload of 80 across three officers). We are about to begin delivery of the Association's first Housing First support service for vulnerable tenants with families, supported by Scottish Government funding. We have also rolled out introductory training to all staff on Trauma Informed Practice, and will follow this up with a full staff session when restrictions are lifted.
3. Involving our diverse communities	Analyse the profile of our Customer Panel to understand how representative its membership is. Using the results of this analysis, try to recruit more members from any under-represented groups from our communities.	To ensure that the opinions from our Customer Panel are more likely to be representative of our whole communities, to ensure that decisions to shape our services are made in a way that will benefit the most customers and not exclude any groups.	Dec-21	HA	A recent drive to increase membership saw 73 customers join our Panel, this is still a work in progress. We are revamping incentives which should prompt more members to take part in surveys this is still in progress stage and not yet offered but will be in the coming weeks. Our Marketing team also plan to promote more regularly – including the new incentive – promoting through our service update. We are still contacting customers who complete STAR survey and encouraging them to join.  Once the new incentive is finalised and ready to roll out there will be a bigger push to have frontline staff promote/ refer customers to join the customer panel. Hopefully with more numbers we will have a higher response rate and much wider representation. We will carry out analytics to measure this in the coming year.	We now have 85 tenants on our Customer Panel. We are working to increase online engagement with them as well as our local T&R groups following the impact of the Covid pandemic. We are also looking to roll out the wider use of text messaging and Teams as method of engaging with customers, and we have planned a customer panel webinar for late June to discuss how we can ensure we continue to deliver high quality services and engage with customers meaningfully in a post Covid world.
4. Involving our diverse communities	IHA will have input and assist in the design of Neighbourhood Dashboards alongside Group Neighbourhood Planners and BI&I	Access to live information on the E&D information and combined stats of customers in our neighbourhoods to assist with Neighbourhood Plans and targeted action planning (e.g. Customer Panel)	May-21	CC	New Action	IHA input as far as possible into the project to design the dashboards, inclusive of all elements that would assist with neighbourhood analytics. The dashboard was at Beta version and in the final stages of design, at which point the final development on the dashboards was placed on permanent hold. This was due to a Riverside Neighbourhood Team restructure and other higher priorities within BI&I that saw the project team reassigned to the Salesforce project. There is currently no further action IHA can take on this, although attempts are being made, and it will most likely be closed off as incomplete at the next update.
Staff Objectives	Detail	Outcomes	Deadline		Update	Update/2021
1. Getting to know our staff	Continue to encourage 100% of staff to complete their diversity profile on the HR system.	IHA will have a clear evidence base to understand and address key and emerging issues in its workforce. It will also be able to ensure that throughout their employment, all employees are treated fairly and with respect	Dec-21	PH	Progress is being made and this is an ongoing task that will continue into 2021/22.	Ongoing
2. Promoting our staff groups	Increase local involvement where appropriate in the Riverside Group's three staff groups which represent different diversities: * ENABLE * Spectrum * ORIGIN	Staff feel they have a 'voice' in the wider organisation and have an opportunity to be heard, by helping to influence and shape policies and services.	Jun-21	PH	We supported the 'Time to Talk' drop in at the start of February, which was well-attended by staff from Irvine HA and Riverside's Shared Services. We promoted staff wellbeing at our Staff Conference, which included sessions on the staff groups, as well as speakers from The Art of Brilliance and the NHS' Healthy Working Lives. During the Covid-19 lockdown, daily contact between managers and staff is taking place, as well as fortnightly whole team meetings via video conference. Resources are also being made available via Group to support colleagues.  New action was to have reps in all groups	Staff are continuously encouraged to join our three staff groups and we have membership across the three staff groups within our IHA staff team.  Thought is being given to how we can better utilise and incorporate the work of the groups locally as an ongoing action.
3. Creating an inclusive environment for customers and staff	100% of staff to have undergone equality and diversity e learning.  100% of managers to have undergone unconscious bias training.	IHA will ensure that all staff and customers are treated with fairness, respect and dignity. We will aim for a working environment which is free from unconscious bias, discrimination, harassment and bullying.	Dec-21	PH	This has been undertaken as part of staffs' annual Learning Zone profile.	Ongoing on Learning Zone as part of mandatory training requirements, this action is a rolling action and continues to be complete.
4. Embedding a culture of fairness and respect	At team meetings, directors will facilitate regular E&D 'tool box talks' or 'did you know' quizzes. Topics will relate to key issues that have been identified as relevant to our locality for instance; disability and long-term chronic health conditions; mental wellbeing; LGBT, and; sectarianism	A powerful message is cascaded across the business, helping to embed a culture of fairness, respect and dignity throughout IHA.	Aug-21	PH	This has been achieved during 2020 to date but is an ongoing task that will continue into 2021/22, particularly on how we will achieve this in the new digital world that our teams are working in.	Ongoing
5. Stonewall Membership	IHA will become members of Stonewall Scotland	IHA will become a visible LGBTQ+ inclusive employer	Oct-21	MH	New action	Action complete. IHA are members of Stonewall Scotland

Date:	30 <sup>th</sup> June 2021
Subject:	Managing Director's Report
Author:	Paul Hillard (paul.hillard@irvineha.co.uk)
Sponsor:	N/A
Appendices:	None
Action:	Noting
Data Class:	Confidential

## EXECUTIVE SUMMARY

This Report is provided to Board to give an update on the following matters where no formal decisions are required at this time:

- Bank Street, Irvine, Office
- Board Succession Planning
- Repairs and Maintenance Tendering
- Rebranding
- One Housing Group

## RECOMMENDATION

- It is recommended that Board Members note and comment on the contents of this Report.

## **1 Bank Street Office**

### **1.1**

[REDACTED]

### **[REDACTED]**

[REDACTED]

### **[REDACTED]**

[REDACTED]

### **[REDACTED]**

[REDACTED]

### **[REDACTED]**

[REDACTED]

## **2 Board Succession Planning**

2.1 As agreed at the March Board meeting the process of recruitment of new Board members, based on the skills audit and identified skills requirements, has commenced, with David Bond of McGregor Bond appointed as recruitment consultant.

2.2 A recruitment pack has been developed and adverts placed in key trade and professional electronic publications and websites. This has included the Scottish Daily News updates, the SFHA website, Goodmoves and through Scottish Positive Action in Housing's website. The advertisements have also been placed on the Association's website and in the House and Home Newsletter, specifically targeted at the Association's Tenants. The opportunity has also been promoted heavily on social media.

2.3 This activity has resulted in c.15 applications, including one from a tenant of the Association. Initial screening interviews will be undertaken by David Bond before a recommended shortlist is put to the agreed Recruitment Panel for interview. The applicant who is a tenant of the Association had a more informal screening interview with the Managing Director and will be recommended for consideration by the Panel.

- 2.4 The proposed timescale is for recommendations on successful candidates to be made to the June Board meeting, including relevant applications for membership of the Association, and subsequent election to the Board at the Annual General Meeting in September.

### **3 Repairs and Maintenance Tendering Governance**

- 3.1 Following discussion at the March Board meeting regarding oversight and governance of the repairs and maintenance tender process, it is proposed that documents and information will be made available to Board for comment at key stages throughout the process.

- 3.2 Due to timescales, the draft Service Specification, Tender Evaluation Criteria, and General Requirements proposals have been sent by email to all Board members,

[REDACTED]

- 3.3 An outline of each submission that is received will be made available to Board, along with a report detailing the evaluation scores and reasons for the recommended successful bidder. Two tenants will be part of the evaluation panel. The Board are asked to consider if Board member representation on the panel would strengthen the oversight and governance.

- 3.4

[REDACTED]

### **4 Rebranding**

- 4.1 The action plan for the rebranding of the Association as Riverside Scotland continues to be progressed. A detailed timeline has been developed and draft communications for key stakeholders, including customers and colleagues, have been prepared. The action plan includes engagement with the Association's tenants to get their views on the Association's brand and proposals for it to change.

- 4.2 The branding change can be ready for implementation from early July 2021. Consideration of other factors going on in the business will influence the exact implementation date, but the timeline for the plan can be altered accordingly.

### **5 One Housing Group**

- 5.1 As Board members will be aware Riverside has announced that it is in partnership discussions with the London based Registered Provider, One Housing Group. There is a briefing session available to Board members on Monday 28<sup>th</sup> June. This agenda item will give Board members the opportunity to discuss any related matters.

## **6 Recommendation**

- 6.1 It is recommended that Board Members note and comment on the contents of this Report.