Appendix 1

RSH Consumer Standards: SHDC Self-Assessment (January 2025)

Introduction

As part of our ongoing commitment to regulatory compliance, we have conducted a comprehensive self-assessment against the Regulator of Social Housing's Consumer Standards. This self-assessment aims to evaluate our performance towards meeting the outcomes of the Standards and identify areas for improvement.

The Consumer Standards are designed to ensure that social landlords provide high-quality services and maintain safe, decent homes for tenants. As of April 2024, the standards include:

1. Safety and Quality Standard: Ensures that landlords provide safe and good-quality homes, along with high-quality landlord services.
2. Transparency, Influence and Accountability Standard: Requires landlords to be open with tenants, treat them with fairness and respect, and allow tenants to access services, raise concerns, influence decision-making, and hold their landlord accountable.
3. Neighbourhood and Community Standard: Mandates that landlords engage with relevant parties to ensure tenants live in safe, well-maintained neighbourhoods and feel secure in their homes.
4. Tenancy Standard: Sets requirements for the fair allocation and letting of homes, as well as the management of tenancies by landlords.

These standards aim to protect tenants and improve the overall service they receive from social landlords.

By reviewing our practices and outcomes in these areas, we aim to enhance our service quality, foster greater transparency, and strengthen our accountability to the Members, Senior Leaders and tenants. This self-assessment is a crucial step in our journey towards continuous improvement and excellence in social housing management.

Self-assessment process against the specific expectations of the consumer standards

The HRA Transformation Programme Manager in conjunction with the Assistant Director – Housing have completed this self-assessment. Self-assessing will be completed a minimum of every 12 months, as part of best practice. Progress towards delivering the action required to meet the specific expectations will be reported to Cabinet on a quarterly basis.

Expectations have been RAG rated using the following definitions:

Green – meeting specific expectations.

Amber – partially meeting specific expectations.

Red – not currently meeting specific expectations but with comprehensive plans in place.

Reference to 'TP' scores relate to the relevant Tenant Satisfaction Measures based on resident surveys.

Position statement

The table below summarises our current position towards meeting the specific expectations of the Standards.

Position		Number of expectations
	Meeting specific expectations	32
	Partially meeting specific expectations	25
	Not currently meeting specific expectations	3
	Not applicable	2

Following a self-assessment against the draft consumer standards, a Housing Transformation Team was established in December 2023. A Transformation and Service Improvement Programme was adopted by Cabinet in February 2024, sponsored by Deputy Chief Executive Corporate and S151 Officer. A Transformation Board comprising of a variety of Assistant Directors, chaired by the Portfolio Holder of Strategic and Operational Housing has oversight of the progress of the programme.

Whilst there are a number of specific expectations that are partially met/not met, these items are included in the Programme with evidenced plans in place to deliver them. Transformation resources were increased in October 2024 to prioritise delivering the expectations of the Safety and Quality Standard.

Having reviewed the content of the self-assessment, the Assistant Director- Housing/Person Responsible for Compliance with the Consumer Standards, does not consider there to be any material issues that relate to non-compliance or potential non-compliance with the consumer standards that are necessary to communicate to the Regulator of Social Housing.

1. Safety and quality standard

Stock Quality and decency					
Outcome 1.1.1 Registered providers must have an accurate, up to date and evidenced understanding of the condition of their homes that reliably informs their provision of good quality, well maintained and safe homes for tenants. 1.2.1 Registered providers must ensure that tenants' homes meet the standard set out in section five of the Government's Decent Homes Guidance and continue to maintain their homes to at least this standard unless exempted by the regulator.	**Code of Practice** 9. Providing safe and well-maintained homes is a fundamental responsibility of all registered providers. Having a sufficiently detailed understanding of the condition of their homes at an individual property level is vital to registered providers being able to achieve this and helps to ensure that they meet all applicable requirements. In achieving this outcome, private registered providers should be mindful of the regulator's requirement in the Governance and Financial Viability Standard in relation to maintaining a thorough, accurate and up to date record of their assets and liabilities. 10. Registered providers are expected to undertake regular physical assessments of the inside and the outside of homes where they have a legal responsibility. They should assess whether homes are: • safe and free from serious hazards • kept in good repair • meet relevant standards prescribed in law. 11. Registered providers should assess the condition of homes frequently enough and in sufficient depth to maintain their assurance on their quality and safety. Appropriate frequency and depth will be influenced by a range of factors, including but not limited to, property age, construction, and archetypes as well as data from complaints and reports from repairs and maintenance programmes. For some registered providers a five-year rolling programme of stock condition surveys across all homes might be appropriate; however for some registered providers or for some homes, more frequent assessments might be needed, for example where there are high levels of responsive repair requests or recurring problems which might be indicative of wider issues. 12. Registered providers should ensure their approach to assessing and recording the conditions of their homes is robust and kept up to date by using information from a range of relevant sources such as repairs, complaints, health and safety assessments and energy performance certificate (EPC) data to maintain a rounded view of condition. 13. To ensure registered providers have an understanding of all homes, their approach to assessing homes should consider the different opportunities where the inside of a home can be assessed e.g. when gas safety checks are being carried out. Where access is needed, registered providers should take all reasonable steps to access homes. 14.Registered providers should consider their understanding of the condition of homes in the context of the needs of individual tenants living in them. Taking into account the potential risk to tenants, registered providers should have appropriate systems in place to ensure they act upon identified investment and repair requirements in an appropriate and timely manner. 15. Registered providers are required to meet section 5 of the Government's Decent Homes Guidance, and should have an approach to repairs, maintenance and planned improvements which ensures that their homes are maintained to meet all criteria of the Decent Homes Standard, including being free from Category 1 hazards. 16. Registered providers' understanding of the condition of their homes should include meeting all criteria of the Decent Homes Standard. In addition, registered providers should have an effective plan in place to ensure they meet all criteria of the Decent Homes Standard. 17. Where a registered provider has agreed a period of non-compliance with the Decent Homes Standard with the regulator, it should ensure that it meets all applicable health and safety legal requirements for the duration of the period and should communicate the non-compliance with the Decent Homes Standard and its implications to affected tenants.			
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectations 2.1.1 Registered providers must have an accurate record at an individual property level of the condition of their homes, based on a physical assessment of all homes and keep this up to date.		Stock data available for all properties dated between 2015 and 2020. Interrogated by Savills as part of business plan modelling. Stock condition surveys currently being carried out on all stock, due for completion by Autumn 2025. Approx 40% of stock surveyed to date. Surveys include energy assessment, decent homes and HHSRS. 78% of properties currently have an in-date EPC. Warm Homes and a capital programme are established focussed on bringing homes to EPC C standard. Data has been utilised to submit a Warm Homes bid for additional works to 980 properties within EPC D rating.	<u>Strategy/policy/process</u> N/A <u>Quantitative/qualitative data</u> Data aged between 2015-2020 feeds into corporate programme. Interrogated by Savills as part of drafting Asset Management Strategy. 40% of stock survey data from 2024. <u>Transparency with Senior Officers and Members</u> Report to Cabinet highlighting current position and seeking approval to award contract. Capital programme (as part of budget). <u>Transparency with tenants incl website</u> Letters written to individual tenants advising of inspection appt and reasons why.	Quality assurance approach to be established for 2024-2026 stock condition surveys. Report produced to DCX Corporate and Portfolio Holder/Cabinet summarising findings of stock surveys at set stages highlighting areas requiring additional investment. Asset Management Strategy and 30-year business plan. Improved communication with tenants about the surveys and benefits to the Council and tenants.	<u>Strategy/policy/process</u> Asset Management Strategy Business Plan <u>Quantitative/qualitative data</u> QA approach for 2024-2026 data. Analysis of data received from 2024 and impact on services. KPI reported on for 2024-2026 surveys. <u>Transparency with Senior Officers and Members</u> Report to Members on findings of surveys and progress of survey 2024-26 contract and implications on HRA finances. Consultation as part of Asset Management Strategy <u>Transparency with tenants incl website</u>

					Statement on website regarding stock condition surveys
2.1.2 Registered providers must use data from across their records on stock condition to inform their provision of good quality, well maintained and safe homes for tenants including: a) compliance with health and safety legal requirements b) compliance with the Decent Homes Standard c) delivery of repairs, maintenance and planned improvements to homes, and d) allocating homes that are designed or adapted to meet specific needs appropriately		Performance of compliance with health and safety, damp and mould, decent homes, repairs volumes (including works in progress) and timescales reported monthly at Compliance Clinic and quarterly to SLT and Cabinet. Capital programme in place based on 2015-2020 data. Business plan and asset management strategy being drafted. Stock condition surveys currently being carried out on all stock, due for completion by 2026. Approx 40% of stock surveyed to date. These surveys included collating information on compliance with decent homes, adaptations in situ. A process is in place to address any category 1 hazards identified immediately so that issues can be rectified within 7 days. Allocations policy ensures adapted properties are let to households in need of them. Adaptations kept in voids. Additional funding has been made available in 25/26 to ensure additional remedial repairs identified through stock condition surveys can be completed. 23/24 TP04: Satisfaction that the home is well-maintained = 71.4% 23/24 TP05: Satisfaction that the home is safe = 85.7%	<u>Strategy/policy/process</u> Repairs and habitation policy. <u>Quantitative/qualitative data</u> Data aged between 2015-2020 feeds into corporate programme. Interrogated by Savills as part of drafting Asset Management Strategy. 40% of stock survey data from 2024. <u>Transparency with Senior Officers and Members</u> Capital programme as part of budget setting. Compliance Clinic, Corporate Governance Clinic and PMP reports. <u>Transparency with tenants incl website</u> TSMs published online and in annual report. Quarterly performance reported online against TSMs. Repairs and habitation policy published online.	2024-26 stock data to be modelled into business plan and drive priorities within the Asset Management Strategy (including a revised capital programme). Stock condition data will be used to inform and determine our planned maintenance programmes going forward. Programme for keeping business plan and asset management strategy updated. Rolling stock condition survey programme to be determined and resourced appropriately. Report to set out programme, how frequency has been determined and lead officer. Including surveying at void and prior to programmed works. Approach to non-decent homes and how this is communicated with tenants. Repairs data to be incorporated into Asset Management Strategy. Approach to refusals for upgrades recorded (impacting Decent Homes stats, and whether these are removed from returns, legitimately).	<u>Strategy/policy/process</u> Asset Management Strategy Business Plan. Programme for how we survey stock. Approach to keeping business plan and ASM up to date. <u>Quantitative/qualitative data</u> 2024-2026 data KPI established for monitoring future programme (once established). <u>Transparency with Senior Officers and Members</u> Annual reports on review of AMS and B/plan. Enhanced reporting on non-decent homes and how we are addressing this with members and tenants. Report to Members setting out programme determined and annual updates against this. Report to Members on compliance with the Decent Homes Standard and robustness of underlying evidence. <u>Transparency with tenants incl website</u> Information on website about how we invest in our stock and what informs this, our approach to non-decent homes.
Health and safety					
Outcome 1.3.1 When acting as landlords, registered providers must take all reasonable steps to ensure the health and safety of tenants in their homes and associated communal areas.	**Code of Practice** 18. As part of delivering this outcome, registered providers must ensure they understand and meet all applicable health and safety legal requirements, including secondary legislation (in relation to, for example, gas safety, fire safety, electrical safety, water safety, lift safety, asbestos safety, smoke alarms and carbon monoxide). Registered providers are expected to have regard to appropriate statutory guidance and to meet the legal requirements relating to the role of the health and safety lead. 19. Registered providers should ensure that they maintain sufficient assurance that they meet all relevant health and safety requirements, which reflects the level of potential risk and impact on tenants. They should have a full understanding of what the data is telling them about how safe tenants are, the effectiveness of controls in place and how tenants' needs are being met. 20. Where a third party has the legal responsibility for tenants' homes and/or communal areas, registered providers should hold the third party to account for ensuring health and safety requirements are met. 21. All required actions arising from legally required health and safety assessments should be carried out as soon as possible. When prioritising these actions registered providers should take into account any statutory timescales as well as the potential risk to tenants, so that remedial actions are carried out within appropriate timescales. 22. As part of ensuring the wider safety of tenants in the design and delivery of landlord services, registered providers should have an effective approach to proactively identifying the risks to tenants' safety and eliminating or mitigating those risks. Examples of actions that registered providers may take to ensure the safety of tenants include, housing tenants together appropriately when allocating shared properties, assessing the vulnerability and risk of anti-social behaviour victims in considering what action to take, and taking into account, where appropriate, individual tenants' safety, security and health when prioritising repairs.			

Self-Assessment	Current RAG rating	Current position	Evidence available	Action needed to meet the specific expectations/other improvements	Evidence required to meet the specific expectations
Specific expectations 2.2.1 Registered providers must identify and meet all legal requirements that relate to the health and safety of tenants in their homes and communal areas.		Performance of compliance with health and safety, damp and mould, decent homes, repairs volumes (including works in progress) and timescales reported monthly at Compliance Clinic and quarterly to SLT and Cabinet. Programme of works in place for safety checks to be completed annually. Facilities Team conduct health and safety checks in communal areas. Property Services away day completed to test certification evidence Sample audit checks carried out by managers Annual estate inspections completed Internal audit completed Housing Compliance (2022/23). Follow up audit completed autumn 2024. Health and safety audits conducted by PSPS Health and Safety Lead appointed Morgan and Lambert audit gas installs and servicing.	<u>Strategy/policy/process</u> Repairs and habitation policy. Governance Framework appendix: SHDC Housing Landlord Services Responsible Persons: Roles, Responsibilities and Assurance Arrangements. Fire safety arrangements document. Allocations and Lettings Policy. Sample audit checks. Responsible persons appointed. H&S audits completed by PSPS. <u>Quantitative/qualitative data</u> Compliance data on 'big 6' Reports from Morgan and Lambert. <u>Transparency with Senior Officers and Members</u> Compliance Clinic, Corporate Governance Clinic and PMP reports. Report to Cabinet on quality and safety standard away day. Report to Cabinet on Grenfell Inquiry. Internal audit. Risk assessment shared with Members (public). <u>Transparency with tenants incl website</u> TSM data published online and included in annual report. Website section on safety and fire safety in flats. Responsible persons published on website.	Separate KPIs for communal areas considered. Annual statement on health and safety summarising position incl fire safety actions. Contract awarded for audit checks on electrical safety checks. Stair lift servicing to be reported at Compliance Clinic.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> KPIs on communal areas. <u>Transparency with Senior Officers and Members</u> Annual report summarising position on health and safety – compliance summary to Members as part of year end stats. Report to Person Responsible for Fire Safety. Reporting of audit checks for gas and electric to Governance Clinic/similar. <u>Transparency with tenants incl website</u> Review webpage content regarding our approach to health and safety of homes AND communal areas.
2.2.2 Registered providers must ensure that all required actions arising from legally required health and safety assessments are carried out within appropriate timescales.		Repairs in progress and overdue fire safety actions reported monthly at Compliance Clinic and quarterly to SLT and Cabinet. Fire safety action closure process Sample audit checks carried out by managers including checks to confirm actions completed. Risk assessment for fire safety and electrical safety checks.	<u>Strategy/policy/process</u> Repairs and fitness for habitation policy. Governance Framework appendix: SHDC Housing Landlord Services Responsible Persons: Roles, Responsibilities and Assurance Arrangements. Fire safety arrangements document. Sample audit checks. Compliance spreadsheet. DCM Policy. <u>Quantitative/qualitative data</u>	Statement recording our approach to actions including what is fixed immediately on site by contractor and timescales for rectifying others. Enhanced reporting on DCM to Members Formal reporting of environmental health judgements, official disrepair claims, Housing Ombudsman and Building Safety Regulator findings – consider adding to PMP and Corporate Governance Clinic data.	<u>Strategy/policy/process</u> Review of repairs policy with statement around how we prioritise and deliver on actions arising from health and safety checks. <u>Quantitative/qualitative data</u> Enhanced KPIs on DCM <u>Transparency with Senior Officers and Members</u> Reports to Members on the identification and management

		Compliance spreadsheet tracks the status for all health and safety checks. Works in progress repairs reported. Number of capped gas properties reported to Housing Compliance Clinic.	KPIs on repairs, works in progress, fire safety actions. <u>Transparency with Senior Officers and Members</u> Compliance Clinic, Corporate Governance Clinic and PMP reports. Performance published with TSMs online and in annual report. Data scrutinised by PMP quarterly and published on tenant web page Internal audit report on statutory compliance. <u>Transparency with tenants incl website</u> TSM data published online and included in annual report.		of damp and mould in tenants' homes. Report to Members and Senior Officers on environmental health judgements, official disrepair claims, Housing Ombudsman and Building Safety Regulator findings. Enhanced KPIs on DCM reported at Compliance Clinic. <u>Transparency with tenants incl website</u> Literature for tenants to understand gas and electrical safety certificates, and upload on website. Include statement online about how we prioritise health and safety actions.
2.2.3 Registered providers must ensure that the safety of tenants is considered in the design and delivery of landlord services and take reasonable steps to mitigate any identified risks to tenants.		DCM triage process prioritises repairs based on health and safety of tenant and property. Risk assessments recorded by Housing Repairs and supplied by contractors for works. Risk assessments completed by Housing Options for new tenants. Local lettings plans in place for allocations and sensitive lets. Corporate Cautionary Contact Database for people that may put staff and contractors at risk. Personal Emergency Evacuation Plans completed and publicised. Vulnerable Adults Panel, Housing Assessment Panel, MARAC, ASBRAC, Team Around the Adult/Child meetings held regularly to review and mitigate risk to tenants. (Referrals made for each case).	<u>Strategy/policy/process</u> Repairs policy Allocations procedure including risk assessments of people. Unreasonable Behaviour and Vexatious Contact policy. DCM policy <u>Quantitative/qualitative data</u> Tenant census data <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u>	Timescales and approach to repairs reviewed based on individual tenant safety, security and health, and adoption of approach by contractors as part of revisions to contracts and/or when procuring new contracts. Process to be determined whereby all prospective tenants for sensitive lets and local lettings plans are reviewed, prior to letting. Liaison with Community Safety Team around reporting of cases and outcomes at VAP, MARAC, ASBRAC, MAPPA for Council Tenants and reporting to Governance Clinic, including completion of actions. Reporting of cases and outcomes at HAP for Council Tenants and reporting to Governance Clinic, including completion of actions.	<u>Strategy/policy/process</u> Review of repairs policy. Review of sensitive lets and local lettings plans. <u>Quantitative/qualitative data</u> Repairs data <u>Transparency with Senior Officers and Members</u> Reports to Governance Clinic on cases heard at multi agency meetings and outcomes. <u>Transparency with tenants incl website</u> Revised repairs timescales published.
Repairs, maintenance and planned improvements					
Outcome 1.4.1 Registered providers must provide an effective, efficient and timely repairs, maintenance and planned improvements service for the homes and communal areas for which they are responsible.	**Code of Practice** 23. In delivering an effective, efficient and timely repairs maintenance and planned improvement service, registered providers should coordinate effectively with all parties involved, so that work is completed within set timescales, in as few visits as possible and is fit for purpose. Registered providers are expected to have in place and comply with effective policies, procedures and processes in relation to repairs, maintenance and planned improvements that take into account tenants' views and diverse needs. This may include, for example, increasing the priority of repairs for some older tenants and where a household member is disabled, and installing extra locks and security lights for tenants experiencing domestic abuse or anti-social behaviour, in order to safeguard them. 24. Registered providers should communicate promptly with tenants about repairs, maintenance and planned improvements and keep them regularly updated on progress and how they are resolving any issues. For example, they should aim to consult affected tenants in a timely manner before the start of any planned improvement programmes, and update affected tenants if registered providers foresee any delays to the programme. In doing so, they should be mindful of the regulator's requirements in relation to the diverse needs of tenants.				

	25. In relation to communal areas, where there is an arrangement in place for a third party to manage a communal area on a registered provider's behalf, the registered provider is required to ensure that the communal area is well-maintained, and to hold the third party to account if it is not.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectations 2.3.1 Registered providers must enable repairs and maintenance issues to be reported easily.		Repairs reported by telephone (emergency service available outside of office hours). Equality impact assessment completed on accessing the service showing areas for improvement. Plans to deliver online reporting for repairs.	<u>Strategy/policy/process</u> Repairs policy. <u>Quantitative/qualitative data</u> Repairs call data. <u>Transparency with Senior Officers and Members</u> Presentation to Chief Exec and Leader on EIA findings. <u>Transparency with tenants incl website</u> Repairs policy available online. Section on reporting a repair on website including definitions of emergency repairs and timescales.	Accessibility actions to be completed (from EIA) Housing repairs to go live online. Communications campaign to be delivered on how to report a repair, emergency repairs service and repairs timescales. (Following feedback from tenants via Housing Repairs and ILOs). Tenant census data to be uploaded onto NEC.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> Data around mechanism used for reporting repairs. <u>Transparency with Senior Officers and Members</u> Reports on repairs going online and reduction in calls volume to Customer Contact. <u>Transparency with tenants incl website</u> Involve tenants with testing and designing online repairs system. Communications campaign on new system. Review web page on reporting a repair – link incorporated once system operational.
2.3.2 Registered providers must set timescales for the completion of repairs, maintenance and planned improvements, clearly communicate them to tenants and take appropriate steps to deliver to them.		Performance on repairs timescales reported to Compliance Clinic, SLT and PMP. Enhanced voids standard for sheltered. Tenants informed at the start of the programme year of planned works due to be completed on their home during the year, followed up with further communication, setting dates. Sanctuary scheme in place for Domestic Abuse victim. Tenant Liaison Officers appointed for each contracts and Green Homes work (internal). Literature provided to tenants on key contracts (kitchen and bathrooms) setting out key contacts and timescales involved. 23/24 TP02: Satisfaction with repairs = 69.9% 23/24 TP03: Satisfaction with time to complete repairs = 61.9%	<u>Strategy/policy/process</u> Repairs policy. <u>Quantitative/qualitative data</u> Repairs performance data including works in progress. <u>Transparency with Senior Officers and Members</u> Compliance Clinic, Corporate Governance Clinic and PMP reports regarding repairs. Website sets out timescales and tenants informed at point of reporting repairs. Annual report shared data on TSMs and how to report a repair. <u>Transparency with tenants incl website</u> Section on reporting a repair on website including definitions of emergency repairs and timescales.	Communications campaign to be delivered on how to report a repair, emergency repairs service and repairs timescales as well as how we take diverse needs into account. Data dive to be completed around process for reporting a repair and back office logging on NEC. Process map start to finish and review definitions in line with TSMs/best practice. Emergency repairs definition and timescale to be benchmarked. Approach and enhanced service offer to be established to take diverse needs into timescales based on age, disability, ASB and DA victims for repairs and programmed works. Performance KPIs for contractors to be monitored and reported to Compliance Clinic. Satisfaction surveys for contracted work to be established. Review existing arrangements in place for programmed works, including a review of timescales involved and how we inform tenants. (Map out the approach contractors have in place at present, review this and publish with tenants). Establish surveys on satisfaction including timescales. Document setting out the approach for each contract around how tenants are informed and updated. Timescales to be reviewed with tenants at point of procuring contracts. Approach to diverse needs of tenants to be set out in this document.	<u>Strategy/policy/process</u> Revised Repairs policy. <u>Quantitative/qualitative data</u> Contractor KPI data including satisfaction. <u>Transparency with Senior Officers and Members</u> Report to Compliance Clinic on findings of process mapping for repairs. Report to compliance clinic on KPIs for contractors. Report to Members setting out Council's assurance on the robustness of the data and processes underpinning its reported repairs and maintenance performance. <u>Transparency with tenants incl website</u> Section regarding programmed works to be reviewed including who our contractors are and the timescales involved. Communications campaign on reporting repairs and

				Exercise to be completed for each planned contract recording current approach for planned maintenance contracts and complete gap analysis based on this.	timescales. Review web content regarding sanctuary scheme.
2.3.3 Registered providers must keep tenants informed about repairs, maintenance and planned improvements to their homes with clear and timely communication.		23/24 TP07: Satisfaction that we keep residents informed about things that matter to them = 72.7% Appointments booked at time of reporting repairs for all repairs completed by Housing Repairs. Tenants informed at the start of the programme year of planned works due to be completed on their home during the year, followed up with further communication, setting dates. Tenant Liaison Officers appointed for each contracts and Green Homes work (internal). Literature provided to tenants on key contracts (kitchen and bathrooms) setting out key contacts and timescales involved.	<u>Strategy/policy/process</u> Repairs policy <u>Quantitative/qualitative data</u> TSM data on being informed including Works in Progress for repairs. <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Section on reporting a repair on website including definitions of emergency repairs and timescales.	Review approach to publicising planned improvements including steer from tenants on when and how we inform them. Text messaging service established for Housing Repairs and included as a requirement in procurement for contractors. Explore ways that tenants can be involved in procuring contractors. Transactional surveys on repairs and programmed work established including a question around being kept informed. Review existing arrangements in place for programmed works, including a review of timescales involved and how we inform tenants. (Map out the approach contractors have in place at present, review this and publish with tenants). Establish surveys on satisfaction including timescales. Exercise to be completed for each planned contract recording current approach for planned maintenance contracts and complete gap analysis based on this.	<u>Strategy/policy/process</u> Revised Repairs policy. Review procurement procedure with tenants playing a part in this, potential to review scoring and add customer service to scoring for awarding contracts. <u>Quantitative/qualitative data</u> Survey data on being informed Tenant satisfaction on repairs and programmed works. <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Section regarding programmed works to be reviewed including who our contractors are and How we decide when to renew kitchens, bathrooms, windows, heating systems and external decorations. Communications campaign on reporting repairs and timescales.
2.3.4 Registered providers must understand and fulfil their maintenance responsibilities in respect of communal areas.		SLAs with Facilities and Grounds Maintenance. Audits carried out on site. Annual estate inspections completed. Community centre upgrades being completed as part of Sheltered Housing Review. 23/24 TP10: Satisfaction that we keep communal areas clean and well maintained = 67.3%	<u>Strategy/policy/process</u> Sample audits, SLAs <u>Quantitative/qualitative data</u> Repairs data <u>Transparency with Senior Officers and Members</u> Compliance clinic reports on compliance. <u>Transparency with tenants incl website</u> Sheltered tenants informed of works as part of service charging consultation.	KPIs reported on facilities and grounds maintenance Programme of estate inspections established and published. Communal areas KPIs to be established, separating performance reporting. Programme of works completed for community centres and communal areas.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> KPIs on SLA performance for Facilities and Grounds maintenance <u>Transparency with Senior Officers and Members</u> KPIs reported at Compliance Clinic for communal areas (separately) <u>Transparency with tenants incl website</u> Section added to website around how we maintain communal areas. Calendar of estate inspections published online, in annual report and community centres.
2.3.5 Registered providers must ensure that the delivery of repairs, maintenance and planned		Housemark cost mapping and cost per unit calculation completed for 2024/25.	<u>Strategy/policy/process</u>	Establish mechanism to calculate value for money figure annually and update cost per unit.	<u>Strategy/policy/process</u>

improvements to homes and communal areas is informed by the needs of tenants and provides value for money, in addition to the requirement at 2.1.2.		All contracts subject to procurement frameworks and associated rules. Aids and adaptations service. Cost per unit calculation published.	<u>Quantitative/qualitative data</u> Financial data to ascertain VFM. Tenant census data informing needs. <u>Transparency with Senior Officers and Members</u> Housemark cost mapping shared with Leader and CEO as part of presentation. <u>Transparency with tenants incl website</u> Cost per unit shared with tenants in annual report and on website. Value for money statement on the website around procurement of housing contracts.	Approach and enhanced service offer to be established to take diverse needs into timescales based on age, disability, ASB and DA victims for repairs and programmed works.	Process adopted for annual VFM calculation. <u>Quantitative/qualitative data</u> VFM data <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Cost per unit published in every annual report.
Adaptations					
Outcome 1.5.1 Registered providers must assist tenants seeking housing adaptations to access appropriate services.	**Code of Practice** 26. Not all registered providers directly provide a housing adaptations service, but nonetheless they should all have a process in place to assist tenants in need of housing adaptations, which they must communicate to tenants. As part of this communication, registered providers are expected to inform tenants about the application process, and where relevant, registered providers should make clear any local variations to the application process that may apply. Assistance to tenants requiring a housing adaptation may take the form of, for example, registered providers applying for an adaptation to the relevant organisation on a tenant's behalf or establishing clear timescales with the relevant organisation providing the adaptation. 27. Where the housing adaptations service is provided by a third party, the registered provider should not unreasonably withhold permission for a housing adaptation to be installed in a tenant's home. Where the registered provider provides a housing adaptations service, they should not unreasonably refuse a tenant's request for a housing adaptation. Where a registered provider does not meet a tenant's request for a housing adaptation, the registered provider should consider whether it is appropriate to offer alternative measures in order to support the affected tenant, for example offering to transfer them to a home that is accessible or that can be adapted to meet their needs.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectations 2.4.1 Registered providers must clearly communicate to tenants and relevant organisations how they will assist tenants seeking housing adaptations services.		Adaptations service offered and publicised online. Trusted assessors in Sheltered Housing reduce waiting times for adaptations.	<u>Strategy/policy/process</u> Tenancy management policy <u>Quantitative/qualitative data</u> Data on spend on adaptations and cases. <u>Transparency with Senior Officers and Members</u> Budget on spend on adaptations. Data on adaptations completed. <u>Transparency with tenants incl website</u> Website sets out service and how to access it. Tenancy management policy published.	Processes to be shared with tenants and support available where they cannot apply themselves. KPIs to be established on performance of service. Adaptations policy to be written and reviewed by tenants ensuring the outcome is that tenants are informed adequately throughout the process. Satisfaction surveys to be established.	<u>Strategy/policy/process</u> Adaptations policy produced. <u>Quantitative/qualitative data</u> KPIs on performance and satisfaction <u>Transparency with Senior Officers and Members</u> Performance incl tenant satisfaction reported at Governance Clinic along with trends and themes of adaptations. <u>Transparency with tenants incl website</u> Website to advise on support available and literature to be produced for tenants also. Adaptations policy uploaded onto website.

2.4.2 Registered providers must co-operate with tenants, appropriate local authority departments and other relevant organisations so that a housing adaptations service is available to tenants where appropriate.		Adaptations service offered, adaptations recommended by Occupational Therapists that are feasible ad economically viable are approved. Trusted assessors in Sheltered Housing reduce waiting times for adaptations.	<u>Strategy/policy/process</u> <u>Tenancy Management Policy.</u> <u>Quantitative/qualitative data</u> Data on adaptations completed. <u>Transparency with Senior Officers and Members</u> Budget on spend on adaptations. <u>Transparency with tenants incl website</u> Website sets out service and how to access it. Tenancy management policy published. Service promoted by Independent Living Officers and in newsletters.	Adaptations policy to be written and reviewed by tenants ensuring the outcome is that tenants are informed adequately throughout the process. Communications campaign with partner agencies making them aware of how to refer into the service. Terms of Reference to be adopted regarding relationship with LCC Occupational Therapy Teams.	<u>Strategy/policy/process</u> Adaptations policy produced <u>Quantitative/qualitative data</u> Adaptations KPIs to be reported. <u>Transparency with Senior Officers and Members</u> Adaptations KPIs to be reported at Compliance Clinic. <u>Transparency with tenants incl website</u> Adaptations policy uploaded onto website and web-page reviewed.

2. Transparency, Influence and Accountability Standard

Fairness and respect					
Outcome 1.1.1 Registered providers must treat tenants and prospective tenants with fairness and respect.	**Code of Practice** 28. Tenants and prospective tenants should be treated with fairness and respect and this principle should underpin how registered providers deliver all landlord services. 29. Registered providers should foster a strong culture throughout their organisation of fairness, courtesy and respect, where tenants are listened to and can trust their landlord. In treating tenants fairly, registered providers should consider how they can adapt their services and communications to meet individual tenants' needs.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Not provided by RSH		23/24 TP08: Agreement that the landlord treats tenants fairly and with respect – 86%. Trends and themes of complaints monitored. Tenant feedback from TPAS work. Corporate Code of Conduct Training matrix and corporate training plan. Equality and diversity assessment on access to services. Service standards published for sheltered housing tenants as part of 2024 review. Enhanced void standard for tenants.	<u>Strategy/policy/process</u> Equality Impact Assessment. Sheltered voids standard. <u>Quantitative/qualitative data</u> Compliments and complaints Tenant census data informing of communication needs. TSM data. TPAS reengineering engagement report. First4HR training log. <u>Transparency with Senior Officers and Members</u> Annual Report on feedback provided to MRC and Cabinet. TSMs scrutinised by PMP. Equality Impact Assessment reported to Cabinet and SLT. <u>Transparency with tenants incl website</u> TSMs published. Sheltered void standard published.	Contractor code of conduct Service standards/pledge written with tenants. Equality impact assessment actions completed and revisions shared with tenants. Revised approach to repairs timescales in meeting the needs of diverse tenants.	<u>Strategy/policy/process</u> Service standards Vulnerabilities policy/similar <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Summary of tenant feedback as part of transactional surveys <u>Transparency with tenants incl website</u> Service standards published with tenants, shared as part of sign ups and online. Communication campaign when goes live. Contractor code of conduct Improvements made to accessibility shared and added to website. Statement on reasonable adjustments on website.
Diverse Needs					
Outcome 1.2.1 In relation to the housing and landlord services they provide, registered providers must take action to deliver fair and equitable outcomes for tenants and, where relevant, prospective tenants	**Code of Practice** 30. Registered providers are expected to consider the diverse needs of their tenants (and prospective tenants, where relevant) in relation to the housing and landlord services they provide. This consideration should be integral to the culture of the organisation. Examples of how registered providers can take action to deliver fair and equitable outcomes for tenants may include investigating any complaints of alleged discrimination from tenants promptly and implementing any relevant learning, providing regular equality, diversity and inclusion training for staff, board members or councillors, and carrying out work to understand the barriers different groups of tenants might face in accessing services and working to remove those barriers. 31. Registered providers are expected to have robust information about their tenants so that they can deliver fair and equitable outcomes for tenants in relation to the housing and landlord services they provide. This should include, but not be limited to, relevant information on protected characteristics, and any support or communication needs. 32. It is for registered providers to work with tenants to decide the most effective approach to gathering this information and keeping it up to date, and to share with tenants how they will make use of the data. Registered providers should explore a range of methods for collecting this information from tenants to encourage a good response rate. For example, via periodic face-to-face contact with tenants or other appropriate points of contact with tenants. As part of their approach registered providers should process personal information in compliance with relevant legislation and the Information 33. In delivering this outcome, registered providers may also want to consider using other data and information about tenants, for example the census and/or English Housing Survey, to inform the design and delivery of their strategies, policies and landlord services. 34. Registered providers should regularly assess whether their housing and landlord services deliver fair and equitable outcomes for tenants and, where relevant, prospective tenants. Registered providers should take account of the findings of their assessments and should be able to demonstrate actions they have taken as a result. 35. Registered providers should make tenants aware of the different ways in which services are tailored to meet their needs. This could include, for example, by informing tenants when they report a repair that a choice of appointment time is available, or that information can be supplied in alternative formats, such as pictorial, and in different languages on request.				

	36. Registered providers should have in place an effective, simple and accessible process to enable tenants and prospective tenants to nominate a representative to act on their behalf in interactions with the landlord about landlord services, for example, in order to report a complaint on a tenant's behalf and to discuss progress of a repair or a housing application.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectation 2.1.1 Registered providers must use relevant information and data to: a) understand the diverse needs of tenants, including those arising from protected characteristics, language barriers, and additional support needs; and b) assess whether their housing and landlord services deliver fair and equitable outcomes for tenants.		Equality impact assessment completed on access to the services with action plan set (based on national census and tenant census data). Equality impact assessment completed for each policy. Corporate EDI training. Tenant census completed in 2023 collating demographic data about tenants and 4 yearly programme for keeping data up to date (with process). Third party authority approach and process. Digital support sessions offered to sheltered tenants, and residents. EDI project group established corporately. EDI considered as part of all reports presented to Member Committees 23/24 TP08: Agreement that the landlord treats tenants fairly and with respect = 83.5%	<u>Strategy/policy/process</u> Tenant census report Equality impact Assessment Third party authority procedure. Translations SLA. <u>Quantitative/qualitative data</u> Census data <u>Transparency with Senior Officers and Members</u> Our typical tenant campaign around the buildings <u>Transparency with tenants incl website</u> Tenant census uploaded onto website.	EIA Action plan to be adopted and actions delivered. Housing EDI training for staff. Census data built into NEC and being utilised. Page to be added to website setting out support available and included in tenant handbook/sign up packs. Approach to be determined on how we inform tenants of the ways we tailor services incl formats. Review key letters with tenants Digital support offered to general needs tenants	<u>Strategy/policy/process</u> Reasonable adjustments policy <u>Quantitative/qualitative data</u> Data on translations and reasonable adjustments to communication <u>Transparency with Senior Officers and Members</u> Report on how we meet diverse needs and improved adjustments delivered <u>Transparency with tenants incl website</u> Webpage with support available
2.1.2 Registered providers must ensure that communication with and information for tenants is clear, accessible, relevant, timely and appropriate to the diverse needs of tenants.		Equality impact assessment completed on access to the services with action plan set (based on national census and tenant census data). We provide all our housing information in multiple formats upon request. Translation service available. Equality impact assessment completed on access to the services with action plan. Equality impact assessment completed for each policy. Corporate EDI training. Tenant census completed in 2023 collating demographic data about tenants and 4 yearly programme for keeping data up to date (with process).	<u>Strategy/policy/process</u> Equality impact Assessment. Third party procedure. <u>Quantitative/qualitative data</u> First4HR Training log. Translation data. <u>Transparency with Senior Officers and Members</u> Equality Impact Assessment published to Cabinet. <u>Transparency with tenants incl website</u> Tenant census published online.	EIA Action plan to be adopted and actions delivered. Easy read guides adopted for reporting repairs and understanding tenancy agreement. Translation service and reasonable adjustments to communications advertised on website and promoted on literature. Census data uploaded onto NEC. Involving tenants with reviewing key items of literature and communications incl annual report, consider adding strapline to these letters. Rent letter to meet these requirements.	<u>Strategy/policy/process</u> Reasonable adjustments policy <u>Quantitative/qualitative data</u> Tenant Census data Translation data Review of documents by tenants. <u>Transparency with Senior Officers and Members</u> Report on how we meet diverse needs and improved adjustments delivered. <u>Transparency with tenants incl website</u> Easy read guides uploaded online and shared with staff to use. Translation service and

		Third party authority approach and process. Digital support sessions offered to sheltered tenants, and residents. EDI project group established corporately. EDI and Human Rights considered as part of all reports presented to Member Committees			reasonable adjustments to communications advertised on website and promoted on literature.
2.1.3 Registered providers must ensure that landlord services are accessible, and that the accessibility is publicised to tenants. This includes supporting tenants and prospective tenants to use online landlord services if required.		Equality impact assessment completed on access to the services with action plan. Digital sessions delivered corporately and for sheltered housing tenants. Recite me and Readability tool available online.	<u>Strategy/policy/process</u> Equality Impact Assessment <u>Quantitative/qualitative data</u> Tenant census data <u>Transparency with Senior Officers and Members</u> Cabinet report including equality impact assessment and action plan <u>Transparency with tenants incl website</u>	EIA Action plan to be adopted and actions delivered. Digital sessions delivered for general needs tenants including accessing online repairs.	<u>Strategy/policy/process</u> Reasonable adjustments policy <u>Quantitative/qualitative data</u> Online repairs reporting data – monitoring access to service <u>Transparency with Senior Officers and Members</u> Report on how we meet diverse needs and improved adjustments delivered. <u>Transparency with tenants incl website</u> Translation service and reasonable adjustments to communications advertised on website and promoted on literature.
2.1.4 Registered providers must allow tenants and prospective tenants to be supported by a representative or advocate in interactions about landlord services		Third party authority arrangements established.	<u>Strategy/policy/process</u> Third party authority arrangements procedure. <u>Quantitative/qualitative data</u> Data on third party accounts <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u>	Information to be added to website and promote service with partner agencies such as social services and NHS	<u>Strategy/policy/process</u> Third party authority arrangements procedure to be adopted. Reasonable adjustments policy <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Website to publicise this service
Engagement with tenants					
Outcome 1.3.1 Registered providers must take tenants' views into account in their decision-making about how landlord services are delivered and communicate how tenants' views have been considered.	**Code of Practice** 37. Genuine consideration of tenants' views should be at the heart of registered providers' different levels of decision-making about the delivery of landlord services. This may include, for example, in relation to agreeing their asset management strategy, the setting of service standards, agreeing responsive repair timescales and setting performance targets for different landlord services. 38. Tenants' views can be gathered in different ways. Boards and councillors of registered providers should assure themselves that tenants' views have been actively sought and considered as part of their decision-making about their organisation's landlord services. Registered providers should also communicate to tenants how tenants' views have been taken into account in their decision making about how landlord services are delivered. In addition, consideration of how to improve and tailor landlord service delivery should be an ongoing activity taking place at all levels of the organisation and across all areas of service delivery.				

	39. Registered providers should take reasonable steps to ensure that all tenants have an equitable opportunity to be involved in influencing and scrutinising strategies, policies and services, taking into account the diverse needs of tenants. 40. Registered providers should take reasonable steps to assist tenants wishing to implement tenant-led activities to influence and scrutinise their landlord's strategies, policies and services. Assistance may include, for example, providing venues for meetings, administrative support, funding and training. 41. Where a registered provider is considering a change in landlord or a significant change in management arrangements, it is important that in their consultation with affected tenants they tailor their communication methods and take all reasonable steps to ensure that all affected tenants have access to and can understand the landlord's proposals. This should include tenants who may experience communication barriers, have additional support needs and/or are unable to use online services. 42. Consultation with tenants must be meaningful, which includes engaging with affected tenants in a range of ways. Registered providers should begin their consultation with affected tenants at an early stage in the process, while there is scope to influence the decision and/or outcome. They should run the consultation for a sufficient amount of time to give affected tenants an equitable opportunity to consider and respond to the proposals. Registered providers should make clear any potential material impacts, positive and negative, of the proposed changes, for example, any impact on rent and service charge levels, service delivery or security of tenure. They should also set out clearly the main reasons for the changes being proposed to affected tenants. Board and councillors of registered providers should assure themselves that feedback from affected tenants has been genuinely considered in their decision-making about proposals, and the registered provider should demonstrate this to affected tenants.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectation 2.2.1 Registered providers must give tenants a wide range of meaningful opportunities to influence and scrutinise their landlord's strategies, policies and services. This includes in relation to the neighbourhood where applicable.		Sheltered Housing Focus groups established Sheltered Housing consultation completed during 2023/24, heavily involving tenants in shaping the service offer. TPAS re-engineering engagement work completed, draft framework produced on tenant engagement. Online surveys completed for policy feedback including recent landlord strategy. Meet the Housing Ombudsman event October 2024. Complaints campaign. 23/24 TP06: Satisfaction that the landlord listens to tenant views and acts upon them = 60.1%	<u>Strategy/policy/process</u> Tenant engagement framework <u>Quantitative/qualitative data</u> Sheltered Housing consultation responses. TPAS responses. Landlord Strategy responses. <u>Transparency with Senior Officers and Members</u> Sheltered Housing review reports to Members. Informal briefings on re-engineering engagement. Annual Complaints Performance and Service Improvement Report. Sheltered Housing consultation reports. <u>Transparency with tenants incl website</u> Tenant engagement framework online. TPAS work involved tenant survey and focus groups. Tenant engagement page on the website welcoming engagement. Annual report included TSMs, how to complain and improvements made in response to feedback. Sheltered Housing Focus Groups (minuted). Sheltered Housing consultation reports.	Tenant engagement strategy to be drafted and adopted Variety of tenant engagement mechanisms to be established. Tenant Influencing Vehicle to be established. Asset Management Strategy consultation and business plan. Approach determined so that all decisions requested of Members involve tenant consultation. Meet the Managers day. Tenant Influence Working Group to be established (with tenants). Outputs reviewed of tenant opportunities by Members. Guidance and support for staff to embed influence as part of BAU including accessibility. Consideration should be given to all changes to the landlord service and how tenant feedback and engagement has informed delivery.	<u>Strategy/policy/process</u> Tenant engagement framework and strategy. Menu of involvement. <u>Quantitative/qualitative data</u> Asset Management Strategy consultation and business plan. Participation levels. <u>Transparency with Senior Officers and Members</u> Tenant Influencing Vehicle report. Tenant voice and impact added to all reports. Annual summary report on tenant influence and outcomes including participation levels. <u>Transparency with tenants incl website</u> 'You said we did' section. Meet the Managers – aware of the team. Tenant influence working group.
2.2.2 Registered providers must assist tenants who wish to implement tenant-led activities to influence and scrutinise their landlord's strategies,		Sheltered Housing Group tenant run groups and activities hosted in SHDC venues (at no charge).	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u>	Guidance to be produced for tenants on how we can assist tenants wishing to implement tenant-led activities venues, administrative support, training and funding.	<u>Strategy/policy/process</u> Tenant engagement strategy.

policies and services. This includes in relation to the neighbourhood where applicable.		Tenant engagement strategy drafted and tenants had input in drafting it.	<u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u>	Establish dedicated budget for tenants.	<u>Quantitative/qualitative data</u> Number of groups established and participation levels. <u>Transparency with Senior Officers and Members</u> Briefing paper for Members promoting services available. <u>Transparency with tenants incl website</u> Guidance on hosting activities online and literature.
2.2.3 Registered providers must provide accessible support that meets the diverse needs of tenants so they can engage with the opportunities in 2.2.1 and 2.2.		Equality impact assessment completed for tenant engagement. Website promotes variety of ways tenants can get involved currently. TPAS sessions hosted online and face to face including evenings. Offer of support with accessing events such as taxis. Corporate working group. Corporate EDI strategy being written. Plain English check being carried out on entire website during next 12 months. (Crystal)	<u>Strategy/policy/process</u> Equality Impact Assessment <u>Quantitative/qualitative data</u> Tenant census data. <u>Transparency with Senior Officers and Members</u> Cabinet report – Equality Impact Assessment <u>Transparency with tenants incl website</u> Tenant engagement web page	Equality Impact Assessment completed for each activity. Dedicated Tenant Engagement Officer. Accessibility statement added to all literature. Assessments completed of accessibility of community centres.	<u>Strategy/policy/process</u> Tenant engagement strategy. <u>Quantitative/qualitative data</u> Data on adjustments made. <u>Transparency with Senior Officers and Members</u> Report to Members adopting tenant strategy. Reports to Members/Officers showing how we have been successful in facilitating tenant influence and scrutiny and whether there is sufficient accessible support that meets the diverse needs of tenants. Reports to include the impact of tenant views on service delivery. <u>Transparency with tenants incl website</u> Tenant engagement web page kept up to date
2.2.4 Registered providers must support tenants to exercise their Right to Manage, Right to Transfer or otherwise exercise housing management functions, where appropriate.		Section on website advising of rights.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Section on website.	Outline approach to right to manage for staff and tenants.	<u>Strategy/policy/process</u> Right to manage guidance <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Enhanced section on website regarding right to manage, reviewing section on tenant rights and landlord responsibilities.

2.2.5 Registered providers, working with tenants, must regularly consider ways to improve and tailor their approach to delivering landlord services including tenant engagement. They must implement changes as appropriate to ensure services deliver the intended aims.		Complaints working group established reviewing tenant feedback to improve and tailor services. Sheltered Housing Focus Groups.	<u>Strategy/policy/process</u> Complaints Policy and Landlord Strategy <u>Quantitative/qualitative data</u> Feedback data. <u>Transparency with Senior</u> Trends and themes of complaints and learnings reported to Governance Clinic and Cabinet <u>Transparency with tenants incl website</u> Learnings from complaints and improvements made. Landlord Strategy and Transformation programme on website. Focus groups minutes and action plan.	Tenant engagement strategy to be drafted and adopted Variety of tenant engagement mechanisms to be established. Tenant Influencing Vehicle to be established. Asset Management Strategy consultation and business plan. Approach determined so that all decisions requested of Members involve tenant consultation. Meet the Managers day. Tenant Influence Working Group to be established (with tenants). Outputs reviewed of tenant opportunities by Members. Guidance and support for staff to embed influence as part of BAU including accessibility. Consideration should be given to all changes to the landlord service and how tenant feedback and engagement has informed delivery.	<u>Strategy/policy/process</u> Tenant engagement framework and strategy. Menu of involvement. <u>Quantitative/qualitative data</u> Asset Management Strategy consultation and business plan. Participation levels. <u>Transparency with Senior Officers and Members</u> Tenant Influencing Vehicle report. Tenant voice and impact added to all reports. Annual summary report on tenant influence and outcomes including participation levels. <u>Transparency with tenants incl website</u> 'You said we did' section. Meet the Managers – aware of the team. Tenant influence working group.
2.2.6 Where a registered provider is considering a change in landlord for one or more tenants, or a significant change in management arrangements, it must consult affected tenants on its proposals at a formative stage and take those views into account in reaching a decision. The consultation must: a) be fair and accessible b) provide tenants with adequate time, information and opportunities to consider and respond c) set out actual or potential advantages and disadvantages (including costs) to tenants in the immediate and longer term, and) demonstrate to affected tenants how the consultation responses have been taken into account in reaching a decision.		Not applicable. The Council is not currently considering a change in landlord and/or significant change in management arrangements.		None.	
Information and landlord services					
Outcome 1.4.1 Registered providers must communicate with tenants and provide information so tenants can use landlord services, understand what to expect from their landlord, and hold their landlord to account	**Code of Practice** 43. Effective communication with tenants and the provision of clear and accessible information is at the heart of an effective tenant/landlord relationship. Registered providers should make tenants aware of the services and standards of service they provide, and the different ways in which tenants can contact their landlord. 44. Where registered providers are delivering a service directly to a tenant, they should communicate with them from the start through to the completion of that service. For example, where a tenant reports a repair to their landlord, the registered provider should keep them updated about the progress of the repair on a regular and ongoing basis, particularly where there is going to be a delay in carrying out the repair, or where multiple trades and visits are required. 45. The expectation that registered providers must make information available to tenants about the relevant roles and responsibilities of senior level employees or officers applies to all registered providers, whether they employ paid staff or not.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectation		EIA completed on accessibility to services.	<u>Strategy/policy/process</u> Tenancy agreement	Tenant handbook to be reviewed	<u>Strategy/policy/process</u> Tenant handbook

2.3.1. Registered providers must provide tenants with accessible information about the: a) available landlord services, how to access those services, and the standards of service tenants can expect b) standards of safety and quality tenants can expect homes and communal areas to meet c) rents and service charges that are payable by tenants, and d) responsibilities of the registered provider and the tenant for maintaining homes, communal areas, shared spaces and neighbourhoods.		Tenant census collate communication preferences and vulnerabilities of households. Tenant handbook and sign up pack Dedicated webpage for tenants Documents available in different formats upon request. Rent increase letters are sent annually by post including details of service charging. NEC portal provides up to date information on rent balance and updating personal info. Lettable standard is provided with offer letters. Tenancy agreement and associated policies outline the service and standards expected. Sheltered housing handbook Website: Rent section online including variety of ways to pay and how to access these Repairs section includes how to report a repair and timescales Feedback cards provided	Income collection policy Equality Impact Assessment Tenant census <u>Quantitative/qualitative data</u> Tenant census data on communication preferences <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Dedicated tenant web page All policies published online. Rent Letter and FAQ posted (and published online).	EIA actions Tenant census data uploaded into NEC and utilised when communication including mass communications Guidance provided for staff on providing items in different formats Review key items of literature with tenants to ensure they are easy to understand, including rent review letter Review sign up pack to ensure these items are covered	<u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Enhanced web page making sure these items are clear Communal safety area section to be added. Revised literature for new tenants. Mass mailouts take census data into account.
2.3.2 Registered providers must provide tenants with accessible information about tenants' rights in respect of registered providers' legal obligations and relevant regulatory requirements that registered providers must meet in connection with the homes, facilities or landlord services they provide to tenants. This must include information about: a) the requirement to provide a home that meets the government's Decent Homes Standard; b) the registered provider's obligation to comply with health and safety legislation; c) the rights conferred on tenants by their tenancy agreements including rights implied by statute and/or common law, in particular— (i) the right to a home that is fit for human habitation; and (ii) the right to receive notice of a proposed visit to carry out repairs or maintenance or to view the condition and state of repair of the premises; and d) the rights of disabled tenants to reasonable adjustments.		Tenancy agreement sets out tenants rights, supported by service policies, published on the website. These are detailed in offers of accommodation and tenancy agreements. Residents receive an annual rent and service charge statement; they can get access to their account via the portal via the rent section of our website. We have a dedicated area on our website which covers how we keep residents safe.	<u>Strategy/policy/process</u> Tenancy management policy. Tenancy agreement. <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Tenancy agreement	Website refresh on these sections.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Review web content on tenant rights

2.3.3 Registered providers must communicate with affected tenants on progress, next steps and outcomes when delivering landlord services. For example, where a tenant reports a repair to their landlord, the registered provider should keep them updated about the progress of the repair on a regular and ongoing basis, particularly where there is going to be a delay in carrying out the repair, or where multiple trades and visits are required.		Complaints acknowledgement letters set out next steps and deadlines. DCM letters set out process and next steps including timescales and contacts. ASB letters set out timescales and process. Appointments made for repairs when they are reported. Programmed works letters set out timescales and programmed works include literature on timescales for the works. Works in progress TSM reported monthly to Compliance Clinic. 23/24 TP07: Satisfaction that the landlord keeps tenants informed about things that matter to them = 72.7%	<u>Strategy/policy/process</u> Repairs policy <u>Quantitative/qualitative data</u> Works in progress data <u>Transparency with Senior Officers and Members</u> Works in progress data reported on repairs <u>Transparency with tenants incl website</u> Repairs timescales published online.	Test messaging service rolled out for repair appointments KPIs set with Contractors and reported ensuring they are keeping tenants informed Improved communications with tenants around aids and adaptations progress Approach to be established whereby we ensure tenants are kept informed, particularly where there is going to be a delay. Discussions with contractors about how they keep tenants informed, and whether additional steps are required of the Council around communication on programmed works Work with tenants to understand where and how we can improve communications. Consultation with tenants around timescales for repairs and informing them. Improved communications with tenants when repairs will be delayed.	<u>Strategy/policy/process</u> Aids and adaptations procedures <u>Quantitative/qualitative data</u> Contractor KPIs reported including works in progress <u>Transparency with Senior Officers and Members</u> Contractor KPIS reported to Compliance Clinic <u>Transparency with tenants incl website</u> You said we did section. Key letters set out timescales and next steps. Upload key programme works timescales.
2.3.4 Registered providers' housing and neighbourhood policies must be fair, reasonable, accessible and transparent. Where relevant, policies should set out decision-making criteria and appeals processes.		Appeals process for housing register – policy published and negative decisions sets out this right Introductory appeals procedure – process and appeal paperwork included with negative decisions All policies reviewed by solicitors. Equality impact assessments completed for all policies from 2024 and published with policy Equality impact assessment completed Tenants consulted on some policies	<u>Strategy/policy/process</u> Allocations policy, tenancy management policy, income collection policy <u>Quantitative/qualitative data</u> Housing register appeals and introductory appeals <u>Transparency with Senior Officers and Members</u> Equality impact assessment presented to Cabinet <u>Transparency with tenants incl website</u> Policies published online	Appeals process to be established for aids and adaptations Equality Impact Assessment actions. Handbook to include reference to policies and where to find them or request them.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Appeal outcomes</u> <u>Transparency with Senior Officers and Members</u> Reports on appeals and outcomes <u>Transparency with tenants incl website</u> Tenants involved with reviewing policies prior to adoption
2.3.5 Registered providers must make information available to tenants about the relevant roles and responsibilities of senior level employees or officers, including who has responsibility for compliance with the consumer standards		Responsible persons set out in Governance Framework and on web page. Posters displayed in communal areas and community centres. Senior Leadership team published online.	<u>Strategy/policy/process</u> Governance Framework <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Governance Framework. <u>Transparency with tenants incl website</u> Annual report, website, communal posters	None	

Performance information					
Outcome 1.5.1 Registered providers must collect and provide information to support effective scrutiny by tenants of their landlord's performance in delivering landlord services.	**Code of Practice** 46. Tenants having access to reliable and accurate performance information about landlord services helps to ensure transparency and to drive effective tenant scrutiny. 47. In addition to meeting the requirement to publish their performance against the tenant satisfaction measures (TSMs) in a form required by the regulator, registered providers should, following engagement with their tenants, also consider publishing some or all TSM data at a more granular level and/or on a more frequent basis, in order to support tenant scrutiny. For example, they may report some or all TSM data separately for: • entities within their group • specific property types such as general needs or housing for older people and/or • different geographical areas, and/or • specific tenant groups (relevant to the TSM tenant perception measures: TP01-TP12) such as tenants who share different protected characteristics. 48. Where a registered provider publishes TSM data in more detail as set out in paragraph 48, they should ensure, as far as possible, that they calculate and report the data in accordance with the regulator's TSM requirements. Any significant deviation from these requirements should be clearly set out alongside the reported TSM data. 49. It is important that tenants and other stakeholders are able to trust what TSM data tells them about landlords' performance. Registered providers should ensure they have adequate assurance that they meet the regulator's TSM requirements. 50. Registered providers should be able to demonstrate that they understand their performance, including where and why performance has changed over time. They should have clear and measurable plans in place to improve performance where required and should be able to demonstrate that they are effectively delivering to those plans. 51. In providing tenants with accessible information about their performance, registered providers should consider all performance information, including the regulator's judgements. Registered providers should consider how they can support tenants to understand the information being presented, including relevant performance action plans, for example, by including contextual and benchmarking information. In providing information about how they have taken tenants' views into account, registered providers should be able to demonstrate any changes they have made to landlord services as a result of insight from tenants' views, including learning from complaints. 52. In providing information to tenants on directors' remuneration and management costs, registered providers should consider the regulator's note on how to calculate these costs, which can be found on our website				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectation 2.4.1 Registered providers must meet the regulator's requirements in relation to the tenant satisfaction measures set by the regulator as set out in Tenant Satisfaction Measures: Technical requirements and Tenant Satisfaction Measures: Tenant survey requirements.		Collection of the tenant satisfaction measures submitted within the specific timeframe for 23/24 and surveys being completed currently for 2024/25. Annual publishing of our performance against the tenant satisfaction measures including information on how we have met the survey requirements. Data for perception surveys collected by independent company.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> TSM data <u>Transparency with Senior Officers and Members</u> TSM reported quarterly on management data and annually on satisfaction at Compliance Clinic, SLT and PMP. Report to Members on TSMs including assurance on meeting the technical requirements. <u>Transparency with tenants incl website</u> TSM data and method of collation published online and in annual report. Quarterly management data published online	Engage with tenants to establish whether they would like the data provided at a more granular level and/or on a more frequent basis. Consider easy read guides for tenants to support them in understanding the information that is being presented including the associated action plans. Data Strategy – should include our method of collecting TSMs plus other KPIs and their calculations.	<u>Strategy/policy/process</u> Data strategy <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Guidance on website about how to scrutinise this data
2.4.2 Registered providers must: a) collect and process information specified by the regulator relating to their performance against the tenant satisfaction measures. The information must be collected within a timeframe set by the regulator and must meet the regulator's		Collection of the tenant satisfaction measures submitted within the specific timeframe for 23/24 and surveys being completed currently for 2024/25. RSH confirmed receipt of 23/24 figures.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> TSM data	Review layout of publishing TSMs for 24/25 following tenant feedback. Review accessible version format for 23/24.	<u>Strategy/policy/process</u> Statement setting out why we have adopted the survey collection we have. (Telephone). <u>Quantitative/qualitative data</u>

requirements in Tenant Satisfaction Measures: Technical requirements and Tenant Satisfaction Measures: Tenant survey requirements b) annually publish their performance against the tenant satisfaction measures. This should include information about how they have met the regulator's requirements set out in Tenant Satisfaction Measures: Technical requirements and Tenant Satisfaction Measures: Tenant survey requirements. This information must be published in a manner that is timely, clear, and easily accessed by tenants; and c) annually submit to the regulator information specified by the regulator relating to their performance against those measures. The information must be submitted within a timeframe and in a form determined by the regulator.		Information published on the website and shared with tenants as part of annual report. Webpage includes section on how we have met the survey requirements. Accessible version published. Data for perception surveys collected by independent company. Contract awarded for the next 3 years to complete surveys. Member of Housemark to compare our position against other landlords.	<u>Transparency with Senior Officers and Members</u> TSM reported quarterly on management data and annually on satisfaction at Compliance Clinic, SLT and PMP. Report to Members on TSMs including assurance on meeting the technical requirements. <u>Transparency with tenants incl website</u> TSM data and method of collation published online and in annual report. Quarterly management data published online. Document setting out how we have met technical requirements on the website.		<u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Revised layout and colours for TSMs for 24/25 23/24 accessible document updated.
2.4.3 In meeting 2.4.1 and 2.4.2 above, registered providers must ensure that the information is an accurate, reliable, valid, and transparent reflection of their performance against the tenant satisfaction measures.		Mid year review of data completed for 23/24 management data to ensure it was being calculated correctly. Data benchmarked against Housemark data for management data.	<u>Strategy/policy/process</u> Mid-year review notes. Report from consultant collating TSMs. <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> PMP report <u>Transparency with tenants incl website</u> Approach published on website.	To ensure the data being collected for the TSM's meets the regulatory requirement we will instruct external quality assurance for 24/25.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u>
2.4.4 Registered providers must provide tenants with accessible information about: a) how they are performing in delivering landlord services and what actions they will take to improve performance where required b) how they have taken tenants' views into account to improve landlord services, information and communication c) how income is being spent, and d) their directors' remuneration and management costs.		Landlord strategy sets out transformation programme. TSMs published with RSH benchmarking Section on website and annual report about how we spent rent for 23/24 including cost per unit Directors remuneration published online Annual report on complaints and improvements published Sheltered Housing newsletters – "you said, we did" section Management cost per unit calculated and published on website.	<u>Strategy/policy/process</u> Landlord strategy <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Quarterly reports to Cabinet and PMP on performance and service improvement Complaints reports and improvements published to Cabinet <u>Transparency with tenants incl website</u> Strategy published online and improvement referred in annual report	Arrangement set for updating management cost data annually Communications campaign on regulatory inspections and why we are changing our approach "You said, we did" section to be developed online and in annual report, ensuring tenants understand how their feedback is improving the service Policies and reports to set out changes made following consultation with tenants Greater focus on 24/25 report on how we have improved services based on tenant feedback	<u>Strategy/policy/process</u> Process for updating management cost per unit annually (with Housemark?) incl annual Member update <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Policies adopted as part of Scrutiny process <u>Transparency with tenants incl website</u> Communications with tenants on new regulated environment

			TSMs on website and annual report. Quarterly updates on management data online Annual report on complaints and improvements published		You said we did section on the website and greater focus as part of annual report
Complaints					
Outcome 1.6.1 Registered providers must ensure complaints are addressed fairly, effectively, and promptly.	**Code of Practice** 53. Addressing complaints fairly, effectively and promptly is essential for registered providers to build trust with tenants. Registered providers should make every effort to ensure that tenants are aware of their complaints process. Tenants should be able to raise a complaint easily and should be listened to by their landlord when they do so. 54. In addressing complaints, registered providers should ensure that they provide regular updates to affected tenants about the progress they have made to resolve the complaint fairly and the next steps they plan to take, with clear timescales. 55. In meeting this outcome, registered providers are expected to consider relevant requirements of other bodies, including those of the Housing Ombudsman and specifically their Complaint Handling Code. 56. Complaints present registered providers with valuable insight into tenants' experiences of interacting with their landlord. Registered providers should make good use of this learning in order to improve services for tenants, bringing about change at a service or organisational level where appropriate. As part of this learning, registered providers should analyse trends and themes from complaints data.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectation 2.5.1 Registered providers must ensure their approach to handling complaints is simple, accessible and publicised.		Training provided to staff on complaint handling. Clear straightforward process for submitting complaints communicated to tenants. This sets out the timescales for replies and escalation in line with the Housing Ombudsman Complaint Handling Code. Implementation of a central tracking spreadsheet to track complaints from receipt through to resolution. This ensures accountability and allows for monitoring of trends. Complaints working group established for monitoring of trends and themes, driving service improvement. Complaint satisfaction survey launched to follow up with tenants on how satisfied they were with the complaint handling processes. Website publicises the complaint handling process and policy. Complaints letters set out next steps and deadlines for a response. When investigating complaints, reasonable adjustments are discussed. 23/24 TP09: Satisfaction with complaint handling = 27.7% (Significant improvements made since this survey was completed).	<u>S Strategy/policy/process</u> Complaints policy <u>Quantitative/qualitative data</u> Complaints and compliments <u>Transparency with Senior Officers and Members</u> Self-assessment against HOS code reported to MRC. Annual report published to Cabinet setting out themes, learnings and improvements. Compliance Clinic and Governance Clinic scrutinise complaints data. <u>Transparency with tenants incl website</u> Annual report and website set out process and policy and how to contact the Ombudsman. Annual report on complaints published online and themes referred to in annual report	None.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u>

2.5.2 Registered providers must provide accessible information to tenants about: a) how tenants can make a complaint about their registered provider b) the registered provider's complaints policy and complaints handling process c) what tenants can do if they are dissatisfied with the outcome of a complaint or how a complaint was handled, and d) the type of complaints received and how they have learnt from complaints to continuously improve services.		Feedback cards promote the service Website reviewed ensuring tenants can report a complaint easily including e-forms set up Complaints policy published online Self-assessment against HOS code completed and published online Process online and included in annual report All letters set out right to escalate to Ombudsman (and website) Housing Ombudsman Event held in October 2024 Annual Complaint Performance and Service Improvement Report published on the website Clear timescales are set out on the website and in communication with tenants.	<u>Strategy/policy/process</u> Complaints policy <u>Quantitative/qualitative data</u> Complaints and compliments <u>Transparency with Senior Officers and Members</u> Self-assessment against HOS code reported to MRC. Annual report published to Cabinet. Compliance Clinic and Governance Clinic scrutinise complaints data <u>Transparency with tenants incl website</u> Annual report and website set out process and policy and how to contact the Ombudsman. Annual report on complaints published online and themes referred to in annual report	Website to be kept up to date with learnings and improvements made from complaints	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> You said, we did section to highlight complaint improvements.
Self-referral					
Outcome Not provided by RSH	**Code of Practice** 57. The regulator requires registered providers to tell it at the earliest opportunity about any material issues that relate to non-compliance or potential non-compliance with the standards. If a registered provider is unsure as to whether an issue is material, they should contact the regulator to discuss the matter further. Being open and transparent with the regulator is an essential part of registered providers meeting their co-regulatory responsibilities.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectation 2.6.1 Registered providers must communicate in a timely manner with the regulator on all material issues that relate to non-compliance or potential noncompliance with the consumer standards.		Procedure adopted by SLT on self referrals. Referral procedure established and literature produced for staff on how to determine whether to refer. Near miss log reported to DCX quarterly	<u>Strategy/policy/process</u> Procedure for referrals <u>Quantitative/qualitative data</u> Near miss log <u>Transparency with Senior Officers and Members</u> Reports of near misses to DCX <u>Transparency with tenants incl website</u>	None.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u>

3. Neighbourhood and community standard

Safety of shared spaces					
Outcome 1.1.1 Registered providers must work co-operatively with tenants, other landlords and relevant organisations to take all reasonable steps to ensure the safety of shared spaces	**Code of Practice** 58. 'Shared spaces' as defined in the standards can include both internal and external areas associated with a registered provider's homes used by their tenants, that are not the responsibility of the registered provider. While registered providers do not have direct responsibility for these areas, they are expected to work cooperatively with tenants, other landlords and relevant organisations to take all reasonable steps to ensure the safety of these spaces. This may entail, for example, liaising with relevant organisations so that hazardous fly tipping can be removed or to arrange for defective lighting to be repaired where it presents a safety issue for their tenants				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectation Not provided by RSH		SLAs with Facilities and Grounds Maintenance. Audits carried out on site. Annual estate inspections completed. 23/24 TP05 Thinking about the condition of the property or building they live in, how satisfied or dissatisfied are they that we provides a home that is safe = 85.7% 23/24 TP10 Satisfaction that we keep communal areas clean and well maintained = 67.3%	Strategy/policy/process Sample audits, SLAs with Facilities and Grounds Maintenance (including specifying HRA play areas and open space) Quantitative/qualitative data Transparency with Senior Officers and Members Compliance clinic reports on compliance. Transparency with tenants incl website	KPIs reported on facilities and grounds maintenance. Programme of estate inspections established and published.	Strategy/policy/process Estate inspections policy Quantitative/qualitative data KPIs on SLA performance for Facilities and Grounds maintenance Transparency with Senior Officers and Members Programme of inspections and findings. Transparency with tenants incl website Section added to website around how we maintain communal areas. Calendar of estate inspections published online, in annual report and community centres.
Local cooperation					
Outcome 1.2.1 Registered providers must co-operate with relevant partners to promote social, environmental and economic wellbeing in the areas where they provide social housing.	**Code of Practice** 59. The regulator acknowledges that the roles registered providers play in promoting social, environmental and economic wellbeing in the areas in which they operate are likely to vary, as registered providers need to take account of their strategic objectives, the views of tenants and their presence in those areas, among other considerations				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectation 2.1.1 Registered providers, having taken account of their strategic objectives, the views of tenants and their presence within the areas where they provide social housing, must: a) identify and communicate to tenants the roles registered providers play in promoting social, environmental and economic wellbeing and how those roles will be delivered; and b) co-operate with local partnership arrangements and the strategic housing function of local		SELCP Sub-Regional Strategy sets out strategic objectives focussed on the following priorities: • Growth and Prosperity • Healthy Lives • Safe and Resilient • Environment. These priorities were set as part of resident consultation. A Local Priority for SHDC of the Sub-regional strategy for 2024-2029 is to	Strategy/policy/process Sub-Regional Strategy 2024-2029 Quantitative/qualitative data Sub-Regional Strategy 2024-2029 consultation evidence Transparency with Senior Officers and Members	Housing Strategy Tenant engagement to be established to evidence that we are taking tenants views into account and promoting social, environmental and economic wellbeing through to tenants.	Strategy/policy/process Housing strategy Quantitative/qualitative data Transparency with Senior Officers and Members Transparency with tenants incl website

authorities where they are able to assist local authorities in achieving their objectives.		engage with housing tenants to help shape service delivery in the district. 23/24 result for TP11: Satisfaction that the landlord makes a positive contribution to neighbourhoods = 65.7% The council is part of the following partnerships with local authorities: MARAC, MAPPA, Vulnerable Adults Panel, Child in Need, ASBRAC, Housing Assessment Panel. Distribution point for foodbank vouchers.	TSM reported to PMP and Cabinet. Sub-Regional Strategy progress tracker. <u>Transparency with tenants incl website</u> TSM published online.		
Anti-social behaviour and hate incident					
Outcome 1.3.1 Registered providers must work in partnership with appropriate local authority departments, the police and other relevant organisations to deter and tackle anti-social behaviour (ASB) and hate incidents in the neighbourhoods where they provide social housing.	**Code of Practice** 60. Anti-social behaviour (ASB) and hate incidents can have a significant negative impact on tenants of social housing, both for those experiencing them directly and for those living in the community where the ASB and hate incidents are occurring. 61. In order to deter and tackle ASB and hate incidents effectively in areas where they operate, registered providers must work with appropriate partners, with a common aim of trying to reduce ASB and hate incidents. Joint initiatives may include, for example, providing mediation services to try to resolve disputes before they escalate, undertaking security measures and environmental improvements, and providing diversionary activities. 62. It is vital that registered providers have effective policies and processes to tackle ASB and hate incidents, and they should communicate these to tenants. These should include their approaches to investigating reports of ASB and hate incidents (including the roles of other relevant agencies), the support available to affected tenants and the actions they take to deal with perpetrators of ASB and hate incidents. 63. Registered providers should take into account the diverse needs of tenants in considering how tenants report ASB and hate incidents to them and eliminate any barriers to reporting such incidents. 64. In managing reports of ASB and hate incidents, including keeping tenants informed about the progress of their ASB case, registered providers should be mindful of their data protection obligations and any ongoing legal proceedings. 65. We expect registered providers to take a victim-centred approach to supporting tenants affected by ASB. This support can take different forms such as, for example, making a referral to an external support agency or, where appropriate, taking into account the wishes of the complainant when determining the course of action the registered provider will take. As part of this approach, registered providers should consider how they support vulnerable perpetrators of ASB, to help them to sustain their tenancy.			
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectations 2.2.1 Registered providers must have a policy on how they work with relevant organisations to deter and tackle ASB in the neighbourhoods where they provide social housing.		Tenancy Management Policy makes reference to ASB. Annual report to PMP on crime and disorder (SHDC) SHDC part of Safer Lincolnshire partnership – Country group setting core priorities for Lincolnshire. ASBRAC group attended by Housing, Community Safety, Police, Victim Support and other agencies focussed on high risk ASB cases. South and East Lincs Community Safety Partnership - 5 key areas of focus, one of which being ASB.	<u>Strategy/policy/process</u> Tenancy management policy Safer Lincolnshire Partnership Delivery Plan. Community Safety Partnership ASB strategy. South and East Lincs Community Safety Partnership strategy. <u>Quantitative/qualitative data</u> Number of ASB cases <u>Transparency with Senior Officers and Members</u> Number of ASB cases reported to Compliance Clinic and PMP as part of quarterly performance. Annual Crime and Disorder report to PMP <u>Transparency with tenants incl website</u>	Housing specific ASB Policy Increased monitoring and oversight of ASB cases including case reviews Develop ASB service standards and report on them SLA to be produced for Community Safety Team Annual report to PMP on Crime and Disorder to have a Housing section Noise Monitoring Code of Practice. Good Neighbourhood Management Policy Guide to Tackling ASB for customers which includes information on witness support.	<u>Strategy/policy/process</u> Housing specific ASB Policy <u>Quantitative/qualitative data</u> Trends, themes on ASB as well as case management. <u>Transparency with Senior Officers and Members</u> Policy Reports/KPIs on ASB case management ASB service standards and how we perform including lessons learned and improvements in approach. Performance against SLA with Community Safety Team. Crime and Disorder report incl Housing section. <u>Transparency with tenants incl website</u>

			ASB section on web page including “report it tool” TSM section on website and included in annual report, quarterly performance on website.		Performance published on ASB and how we tackle ASB. ASB service standards and how we perform
2.2.2 Registered providers must clearly set out their approach for how they deter and tackle hate incidents in neighbourhoods where they provide social housing.		Hate crime is a priority with the South and East Lincs Community Safety Partnership Strategy, focused on raising awareness including reporting mechanisms and the Hate Crime Charter. Draft Safeguarding Policy has reference to hate crime.	<u>Strategy/policy/process</u> South and East Lincs Community Safety Partnership Strategy <u>Quantitative/qualitative data</u> Cases opened <u>Transparency with Senior Officers and Members</u> No. of hate crime and ASB cases reported to Cabinet and PMP <u>Transparency with tenants incl website</u> ASB (and hate crime) section on web page including “report it tool”. TSM section on website and included in annual report, quarterly performance on website.	Housing specific ASB Policy including reference to hate crime. Increased monitoring and oversight of hate crime cases including case reviews. Satisfaction surveys on ASB and hate crime. Lincs Police Force Lead focussed on Hate Crime – expecting strategy to be written by them 2025.	<u>Strategy/policy/process</u> Housing specific ASB Policy (incl Hate Crime). Lincs Police strategy on Hate Crime. <u>Quantitative/qualitative data</u> Trends, themes on hate crime as well as case management. Satisfaction <u>Transparency with Senior Officers and Members</u> Policy Reports/KPIs on ASB case management (incl Hate Crime) incl satisfaction <u>Transparency with tenants incl website</u> Performance published on hate crime and how we tackle hate crime
2.2.3 Registered providers must enable ASB and hate incidents to be reported easily and keep tenants informed about the progress of their case.		ASB can be reported in person, over the telephone, in writing, via email or through the website. 23/24 TP12: Satisfaction with the landlord’s approach to handling anti-social behaviour = 49.7% South Holland survey 2024 to residents in conjunction with Lincs Police on accessibility to the Council and Police services.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> Cases opened <u>Transparency with Senior Officers and Members</u> No. of hate crime and ASB cases reported to Cabinet and PMP <u>Transparency with tenants incl website</u> ASB (and hate crime) section on web page including “report it tool” TSM section on website and included in annual report, quarterly performance on website.	Approach determined about the minimum standards of case handling for ASB cases, ensuring tenants are informed on progress of their case. Review ‘report it’ section on website ensuring hate crime reportable also.	<u>Strategy/policy/process</u> ASB Policy <u>Quantitative/qualitative data</u> KPIs reported on ASB <u>Transparency with Senior Officers and Members</u> Report on outcome of Police and Council accessibility survey. Enhanced reporting of ASB to Cabinet and PMP <u>Transparency with tenants incl website</u> Revised ‘report it’ section
2.2.4 Registered providers must provide prompt and appropriate action in response to ASB and hate incidents, having regard to the full range of tools and legal powers available to them.		Range of tools and legal powers used by the Council including Community Protection Warnings/Notices, notice and injunctions. Tenancy Management Policy makes reference to enforcement tools.	<u>Strategy/policy/process</u> Tenancy Management Policy <u>Quantitative/qualitative data</u> Cases opened and enforcement data	Approach determined about the minimum standards of case handling for ASB cases. KPI/reporting mechanism on ASB established Mediation service to be sourced	<u>Strategy/policy/process</u> ASB Policy <u>Quantitative/qualitative data</u> Enhanced KPI data

		Monthly case review meetings for complex cases, held with the Police and Community Safety Team.	<u>Transparency with Senior Officers and Members</u> No. of hate crime and ASB cases reported to Cabinet and PMP. Enforcement stats reported to Compliance Clinic. <u>Transparency with tenants incl website</u>	ASB policy makes reference to tools and legal powers utilised.	<u>Transparency with Senior Officers and Members</u> Enhanced reporting of ASB to Cabinet and PMP <u>Transparency with tenants incl website</u>
2.2.5 Registered providers must support tenants who are affected by ASB and hate incidents, including by signposting them to agencies who can give them appropriate support and assistance		ASBRAC considers vulnerable ASB cases. Strategy on support set out as part of ASBRAC Mediation sourced via solicitors. Signposting to agencies including Victim Support, GP. Communications campaigns annually on ASB.	<u>Strategy/policy/process</u> ASBRAC operating procedures <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> ASB section on website	Mediation service to be sourced ASB policy makes reference to support available and appropriate literature produced. Risk assessments adopted	<u>Strategy/policy/process</u> Risk assessments <u>Quantitative/qualitative data</u> Mediation uptake and outcome <u>Transparency with Senior Officers and Members</u> Policy adopted. Enhanced reporting of ASB to Cabinet and PMP <u>Transparency with tenants incl website</u> Review content online and literature around support available.
Domestic abuse					
Outcome 1.4.1 Registered providers must work co-operatively with other agencies tackling domestic abuse and enable tenants to access appropriate support and advice.	**Code of Practice** 66. Registered providers should understand the significant impact that domestic abuse can have both on tenants experiencing it and their household members. In achieving this outcome registered providers should have a victim-centred approach to assisting tenants who experience domestic abuse. 67. Registered providers policies should set out their approach to recognising and effectively responding to cases of domestic abuse. They should consider, among other things, how they • raise awareness and understanding among relevant staff so they are able to recognise the signs of domestic abuse, particularly those linked to a tenant's housing circumstances • make tenants aware of appropriate support and advice available regarding domestic abuse, including from third party organisations • offer tenants affected by domestic abuse referrals to specialist domestic abuse Agencies • provide staff supporting tenants experiencing domestic abuse with appropriate specialist training, and • offer appropriate staff members to support tenants experiencing domestic abuse. 68. To be able to recognise and respond appropriately to reports of domestic abuse, registered providers should ensure they have an appreciation of the different specific needs of tenants who experience it, including those arising from the tenant's protected characteristics, such as disability and race. As part of their approach, registered providers must handle sensitive information relating to cases of domestic abuse in compliance with relevant legislation. 69. The duty referred to in 2.3.2 refers to the duty placed on local authorities in the Domestic Abuse Act 2021 (the Act) to develop and implement a strategy for accommodation-based support (which according to the Act is support in relation to domestic abuse, provided to victims of domestic abuse, or their children, who reside in relevant accommodation) in its area. Further information about this duty can be found in the government's statutory guidance: Domestic Abuse Act 2021 - GOV.UK (www.gov.uk)				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**

Specific expectations 2.3.1 Registered providers must have a policy for how they recognise and effectively respond to cases of domestic abuse.		Tenancy Management Policy makes reference to domestic abuse. Council signed up to Lincs Domestic Abuse Partnership. Annual data on crime and disorder reported to PMP Sanctuary scheme currently being reviewed for consistency across Safer Lincs Partnership DA training completed by all Housing staff in 2024 DAHA accreditation to commence 2025– project plan being drafted.	<u>Strategy/policy/process</u> Lincs Domestic Abuse Partnership strategy <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> PMP report on district crime and disorder <u>Transparency with tenants incl website</u>	Domestic abuse policy to be produced. Procedures written. Review sanctuary scheme from a landlord perspective.	<u>Strategy/policy/process</u> Domestic abuse policy. DAHA accreditation. <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Policy adopted. DAHA accreditation progress. <u>Transparency with tenants incl website</u> Policy available on website and enhanced section on DA.
2.3.2 Registered providers must co-operate with appropriate local authority departments to support the local authority in meeting its duty to develop a strategy and commission services for victims of domestic abuse and their children within safe accommodation.		Council signed up to Lincs Domestic Abuse Partnership. Housing organisations are responsible for sharing vital and timely information to Multi Agency Risk Assessment Conferences (MARAC) ensuring we protect victims of Domestic Abuse and Violence. DAHA accreditation to commence 2025– project plan being drafted.	<u>Strategy/policy/process</u> Allocations Policy. Lincs Domestic Abuse Partnership. <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Membership of Linc Domestic Abuse Partnership. <u>Transparency with tenants incl website</u>	None.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u>

4. Tenancy Standard

Allocations and Lettings					
Outcome 1.1.1 Registered providers must allocate and let their homes in a fair and transparent way that takes the needs of tenants and prospective tenants into account	**Code of Practice** 70. Registered providers should have effective policies and processes in place for allocating their homes and should work effectively with local authorities to help meet identified local housing need. They should clearly set out their decision-making criteria, including in relation to transfers. 71. In order to be able to take the needs of tenants and prospective tenants into account in the allocations process, registered providers need to have a robust and accurate understanding of local housing need and their homes, including in relation to which homes have been designed or adapted to meet specific needs. 72. Tenancy fraud can take a number of forms. Actions registered providers can take to prevent and tackle tenancy fraud include carrying out effective checks before the start of and during a tenancy, publicising their approach including outcomes to tackling tenancy fraud, and providing guidance to staff on how to prevent, detect and take action against suspected tenancy fraud. 73. Information on the government's CORE (Continuous Recording of Lettings and Sales in Social Housing in England) system is available at: CORE - CORE - Home				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectations 2.1.1 Registered providers must co-operate with local authorities' strategic housing functions and assist local authorities to fulfil their duties to meet identified local housing need. This includes assistance with local authorities' homelessness duties, and through meeting obligations in nominations agreements.		Allocations policy adopted 2024. Properties are allocated transparently through Housing Register, with allocation processes clearly detailed on SHDC's website. Nominations arrangements with PRPs and Housing Assessment Panel established with PRPS members. Strong partnership working with lettings teams in PRPs SELCP commissioned consultant to provide Partnership with key data, analysis and initial reports that can then be utilised to develop the strategy. Stock condition surveys includes updating data regarding adapted properties.	<u>Strategy/policy/process</u> Allocations Policy and procedure Lincolnshire Homelessness and Rough Sleeper Strategy <u>Quantitative/qualitative data</u> Lettings data available on NEC – not monitored currently <u>Transparency with Senior Officers and Members</u> Allocations policy published online <u>Transparency with tenants incl website</u>	SELCP Housing Strategy to be produced Lettings data to be reported to Officers, Members and tenants including nominations and housing register applications	<u>Strategy/policy/process</u> Housing strategy <u>Quantitative/qualitative data</u> KPIs on Lettings data established <u>Transparency with Senior Officers and Members</u> Allocations data published online, in annual report added to KPIs reported to Housing Clinics, SLT and PMP <u>Transparency with tenants incl website</u>
2.1.2 Registered providers must seek to allocate homes that are designated, designed, or adapted to meet specific needs in a way that is compatible with the purpose of the housing.		Allocations policy recognises the benefit of letting adapted properties to disabled households as well as prioritising lettings to households living in adapted properties and no longer in need of the adaptations. Adaptations data being updated as part of stock condition surveys.	<u>Strategy/policy/process</u> Allocations Policy and procedure <u>Quantitative/qualitative data</u> Lettings data available on NEC – not monitored currently. Stock condition survey data. <u>Transparency with Senior Officers and Members</u> Allocations Policy published online. <u>Transparency with tenants incl website</u>	Reporting of lettings data.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Reporting of lettings. <u>Transparency with tenants incl website</u> Lettings data published.
2.1.3 Registered providers must develop and deliver services that seek to address under-occupation and overcrowding in their homes. These services should be focused on the needs of tenants.		Allocations policy awards additional priority to households under-occupying social housing. The policy also recognises households living in overcrowded accommodation.	<u>Strategy/policy/process</u> Allocations policy. Mutual Exchange Procedure <u>Quantitative/qualitative data</u>	Underoccupancy policy/downsizing scheme	<u>Strategy/policy/process</u> Underoccupancy policy and downsizing scheme <u>Quantitative/qualitative data</u>

		Register data is accessed by the Delivery Team and used as part of modelling the business case to acquire properties. Overcrowded tenants have access to housing register and House Exchange to find a more suitable home. Staff support vulnerable applicants to access the allocation process, with a dedicated officer.	Underoccupancy data from tenant census – not monitored currently. <u>Transparency with Senior Officers and Members</u> Allocations Policy published online. <u>Transparency with tenants incl website</u>		Data on uptake on underoccupancy scheme and cost <u>Transparency with Senior Officers and Members</u> Scheme published with tenants and uptake reported to tenants, officers, members <u>Transparency with tenants incl website</u> Underoccupancy scheme published.
2.1.4 Registered providers must take action to prevent and tackle tenancy fraud.		Take part in the National Fraud Initiative. Settling in visits during first 12 months. Tenancy checks completed prior to commencement including credit checks Allocations Policy outlines measures to prevent and detect fraud, ensuring that housing allocations are fair and transparent. It includes provisions for verifying the information provided by applicants and acting against those who provide false information.	<u>Strategy/policy/process</u> Tenancy management policy. NFI reports. <u>Quantitative/qualitative data</u> Settling in visits. <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Tenancy fraud section on website.	Communication campaigns to encourage reports of fraud Webpage review - publicising approach to fraud including outcomes to tackling tenancy fraud, Guidance to be produced for staff on how to prevent, detect and take action against suspected tenancy fraud. Tenancy Fraud Training for Staff Membership with Tenancy Fraud Forum Plan ahead for Tenancy Fraud Awareness week.	<u>Strategy/policy/process</u> Tenancy fraud policy <u>Quantitative/qualitative data</u> Data on fraud cases <u>Transparency with Senior Officers and Members</u> Reporting on tenancy fraud – checks completed and outcomes/outcomes from NFI initiative <u>Transparency with tenants incl website</u>
2.1.5 Registered providers must have a fair, reasonable, simple and accessible appeals process for allocation decisions.		All letters advise of a right to appeal and method of contact includes post, email or telephone to request an appeal. Housing Assessment Panel attended by multiple registered providers.	<u>Strategy/policy/process</u> Allocations policy. Housing Appeals Panel minutes. <u>Quantitative/qualitative data</u> Appeals data, not monitored. <u>Transparency with Senior Officers and Members</u> Allocations Policy published online. <u>Transparency with tenants incl website</u>	Terms of reference to be produced for Housing Appeals Panel Performance data reported on appeal outcomes.	<u>Strategy/policy/process</u> Housing Appeals Panel terms of reference <u>Quantitative/qualitative data</u> Appeals outcome reported <u>Transparency with Senior Officers and Members</u> Appeals data published online, in annual report added to KPIs reported to Housing Clinics/SLT/Members <u>Transparency with tenants incl website</u>
2.1.6 Registered providers must record all lettings and sales as required by the Continuous Recording of Lettings (CORE) system		CORE reports completed for every letting.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> CORE data submitted to RSH <u>Transparency with Senior Officers and Members</u>	Explore use of CORE data to understand local housing need.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u>

			Transparency with tenants incl website		Transparency with tenants incl website
Tenancy sustainment and evictions					
Outcome 1.2.1 Registered providers must support tenants to maintain their tenancy or licence. Where a registered provider ends a tenancy or licence, they must offer affected tenants advice and assistance.	**Code of Practice** 74. Registered providers may provide support directly to tenants to help them maintain their tenancy or licence, or they may use appropriate organisations to provide this support. Examples of support that may be provided include helping tenants to manage their money and maximise their income, offering energy advice, and helping vulnerable tenants to be able to live independently, including those who experience mental health issues, or drug and alcohol dependency. 75. Where a registered provider ends a tenancy or licence they must offer those affected timely advice and assistance. This assistance can take the form of, for example, helping affected tenants to apply for alternative housing or signposting them to appropriate support and advice services. Registered providers should ensure that any advice and assistance about housing options is offered at the earliest opportunity in the process, to enable those affected to understand the process of finding suitable alternative accommodation. 76. Alongside other objectives, such as minimising loss of rental income, registered providers should bear in mind their objectives as landlords of social housing, including in relation to preventing homelessness and helping tenants to maintain their tenancies, when considering whether to escalate eviction proceedings.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectations 2.2.1 Registered providers must provide services that support tenants to maintain their tenancy or licence and prevent unnecessary evictions.		Cost of Living Team (floating support for all tenures) focussed on maximising income, managing debt, brokering support from other agencies. Independent Living Team supporting Sheltered Housing tenants to live independently, improved wellbeing and accessing support services. RSAP/NSAP accommodation to end the cycle of homelessness including addressing drug and alcohol dependency. Process that all evictions have to be authorised by Director of Housing prior to proceeding. All Court applications authorised by Housing Services Manager prior to proceeding. Hardship fund established to support tenants overcome hardship. CA dedicated debt advisor for tenants. Vulnerable Adults Panel	Strategy/policy/process Income management policy and Tenancy Management Policy. Hardship fund procedure Quantitative/qualitative data Data on cases, outcomes and closure – not reported on Transparency with Senior Officers and Members Income management policy and Tenancy Management Policy available online Transparency with tenants incl website	Consider rebranding of COLRO team to ensure tenants understand the service and how to access it. Literature for tenants setting out the support we offer. Analyse data on tenancy support and report on trends, themes and outcomes and report on this	Strategy/policy/process Document summarising how we support our tenants Quantitative/qualitative data Trends, themes and outcomes of support cases – “homelessness preventions”. Transparency with Senior Officers and Members Webpage promoting support available Reports to Members, Officers and tenants on tenancies sustained Transparency with tenants incl website Literature for tenants setting out the support we offer.
2.2.2 Registered providers must provide tenants required to move with timely advice and assistance about housing options before the tenancy or licence ends		Enforcement letters set out rights to appeal and next steps including support form Housing Options and other agencies. Internal approach whereby cases referred to Housing Options and independent advice is given regarding accessing the Housing Register, presentations of homelessness and emergency accommodation. Rent in advance and deposit scheme available from the Council. Corporate campaigns on homelessness and support available. Citizens Advice Bureau contracts for debt advice.	Strategy/policy/process Income management policy and tenancy management policy Quantitative/qualitative data Terminations data incl reasons collated but not reported. CA referral data. Transparency with Senior Officers and Members Housing Options webpage	Reporting of tenancy terminations and reasons	Strategy/policy/process Quantitative/qualitative data Improved analysis of tenancy termination data Transparency with Senior Officers and Members Reports to Members and Officers and tenancy terminations and trends. Transparency with tenants incl website

			Transparency with tenants incl website		
Tenure					
Outcome 1.3.1 Registered providers shall offer tenancies or terms of occupation which are compatible with the purpose of the accommodation, the needs of individual households, the sustainability of the community, and the efficient use of their housing stock. 1.3.2 They shall meet all applicable statutory and legal requirements in relation to the form and use of tenancy agreements or terms of occupation.	**Code of Practice** 77. Registered providers should consider the suitability of the tenancies that they issue, taking into account the tenants' needs and the purpose of the accommodation. They must comply with all relevant law in issuing tenancies or terms of occupation. Where appropriate, they may wish to seek legal advice. 78. Registered providers that make use of licences as the basis of occupation should ensure that they use them appropriately. 79. As part of setting out their approach to tenancy management, registered providers should help tenants understand both their own responsibilities and those of their landlord in relation to their tenancy. 80. In relation to 2.3.1b and 2.3.1d, registered providers should only grant tenancies for a minimum fixed term of less than five years in exceptional circumstances and should not adopt a blanket approach to granting such tenancies. For example, all tenants in a particular area or all tenants of a certain age. Where a registered provider makes use of fixed term tenancies for a term of less than five years, they should set out in a policy the circumstances in which they will do so. 81. As part of meeting 2.3.1g, registered providers should be able to demonstrate how they have taken into account the needs of vulnerable households in their approach to tenancy management. 82. For clarity, reference to the use of probationary tenancies in our requirements includes the use of introductory or other equivalent tenancies				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectations 2.3.1 Registered providers shall publish clear and accessible policies which outline their approach to tenancy management, including interventions to sustain tenancies and prevent unnecessary evictions, and tackling tenancy fraud, and set out: (a) The type of tenancies they will grant. (b) Where they grant tenancies for a fixed term, the length of those terms. (c) The circumstances in which they will grant tenancies of a particular type. (d) Any exceptional circumstances in which they will grant fixed term tenancies for a term of less than five years in general needs housing following any probationary period. (e) The circumstances in which they may or may not grant another tenancy on the expiry of the fixed term, in the same property or in a different property. (f) The way in which a tenant or prospective tenant may appeal against or complain about the length of fixed term tenancy offered and the type of tenancy offered, and against a decision not to grant another tenancy on the expiry of the fixed term. (g) Their policy on taking into account the needs of those households who are vulnerable by reason of age, disability or illness, and households with children, including through the provision of tenancies which provide a reasonable degree of stability. (h) The advice and assistance they will give to tenants on finding alternative accommodation in the event that they decide not to grant another tenancy.		Tenancy strategy adopted in 2024 setting out our approach to tenancy management. Note the Council does not offer fixed term tenancies. Introductory Tenancies are of 12 months duration and move to Secure if the initial 12 months have been successful. During this period, a range of visits are undertaken to verify the tenant is complying with the Tenancy Agreement in place, e.g., paying rent and keeping the property in good condition. In addition, these checks also ensure housing fraud is not taking place and the property is being properly occupied.	Strategy/policy/process Tenancy strategy Quantitative/qualitative data Data on lettings, terminations Transparency with Senior Officers and Members Tenancy strategy adopted. Transparency with tenants incl website Tenancy strategy published. Tenancy agreement.	None.	

(i) Their policy on granting discretionary succession rights, taking account of the needs of vulnerable household members.					
2.3.2 Registered providers must grant general needs tenants a periodic secure or assured (excluding periodic assured shorthold) tenancy, or a tenancy for a minimum fixed term of five years, or exceptionally, a tenancy for a minimum fixed term of no less than two years, in addition to any probationary tenancy period.		Tenancy strategy (fixed term tenancies not issued.	Strategy/policy/process Tenancy strategy Quantitative/qualitative data Transparency with Senior Officers and Members Transparency with tenants incl website	None.	
2.3.3 Before a fixed term tenancy ends, registered providers shall provide notice in writing to the tenant stating either that they propose to grant another tenancy on the expiry of the existing fixed term or that they propose to end the tenancy.		N/A we do not issued fixed term tenancies.	Strategy/policy/process Quantitative/qualitative data Transparency with Senior Officers and Members Transparency with tenants incl website	N/A	
2.3.4 Where registered providers use probationary tenancies, these shall be for a maximum of 12 months, or a maximum of 18 months where reasons for extending the probationary period have been given and where the tenant has the opportunity to request a review.		Introductory tenancies issued for maximum of 18 months.	Strategy/policy/process Tenancy management policy and Allocations policy. Introductory to secure procedure. Home visits procedure. Quantitative/qualitative data Lettings data including intro to secure available Transparency with Senior Officers and Members Allocations and tenancy management policy available on the website along with information around introductory tenancies Transparency with tenants incl website	Reporting of failed introductory tenancies including extensions and trends and themes.	Strategy/policy/process Updated Tenancy Strategy Quantitative/qualitative data Analysis of extension of introductory tenancies and why Transparency with Senior Officers and Members Report on intro tenancy outcomes. Transparency with tenants incl website
2.3.5 Registered providers shall grant those who were social housing tenants on the day on which section 154 of the Localism Act 2011 comes into force, and have remained social housing tenants since that date, a tenancy with no less security where they choose to move to another social rented home, whether with the same or another landlord. (This requirement does not apply where		Secure tenancies let to assured tenants.	Strategy/policy/process Allocations policy and Tenancy Strategy Policy. Quantitative/qualitative data Allocations data. Transparency with Senior Officers and Members	None	

tenants choose to move to accommodation let on Affordable Rent terms).			Adoption of Allocations and Tenancy Strategy Policy. Transparency with tenants incl website Allocations policy available online. Tenancy Strategy Policy.		
2.3.6 Registered providers shall grant tenants who have been moved into alternative accommodation during any redevelopment or other works a tenancy with no less security of tenure on their return to settled accommodation		Secure tenancies let to assured tenants.	Strategy/policy/process Tenancy strategy and allocations policy and procedure. Decant procedure. Quantitative/qualitative data Transparency with Senior Officers and Members Allocations policy available online. Tenancy Strategy adopted by members. Transparency with tenants incl website	None.	
Mutual Exchange					
Outcome 1.4.1 Registered providers must support relevant tenants living in eligible housing to mutually exchange their homes.	**Code of Practice** Support to relevant tenants wishing to mutually exchange may include, for example, registered providers supplying them with clear and simple information about the mutual exchange process, including the associated responsibilities of the landlord and of the tenant, and helping tenants to register with an online mutual exchange service if required.				
Self-Assessment	**Current RAG rating**	**Current position**	**Evidence available**	**Action needed to meet the specific expectations/other improvements**	**Evidence required to meet the specific expectations**
Specific expectations 2.4.1 Registered providers must offer a mutual exchange service which allows relevant tenants potentially eligible for mutual exchange, whether pursuant to a statutory right or a policy of the registered provider, to easily access details of all (or the greatest practicable number of) available matches without payment of a fee.		House Exchange provided free of charge to tenants.	Strategy/policy/process Mutual exchanged procedure and Tenancy Management Policy. Quantitative/qualitative data Data on mutual exchanges – not monitored Transparency with Senior Officers and Members Tenancy Management Policy published online along with literature on mutual exchange and how to access the service Transparency with tenants incl website Mutual exchange referenced in tenancy agreement and section on line	Reporting on mutual exchanges Mutual Exchange policy and revised procedure	Strategy/policy/process Mutual Exchange policy and revised procedure Quantitative/qualitative data Analysis of ME data. Transparency with Senior Officers and Members Reporting on mutual exchanges Transparency with tenants incl website

2.4.2 Registered providers must publicise the availability of any mutual exchange service(s) it offers to its relevant tenants.		House Exchange provided free of charge to tenants, publicised on our website.	<u>Strategy/policy/process</u> Mutual exchanged procedure and Tenancy Management Policy. <u>Quantitative/qualitative data</u> Data on mutual exchanges – not monitored <u>Transparency with Senior Officers and Members</u> Tenancy Management Policy published online along with literature on mutual exchange and how to access the service <u>Transparency with tenants incl website</u> Mutual exchange referenced in tenancy agreement and section on line	Reporting on mutual exchanges Mutual Exchange policy and revised procedure Promotion of free service to tenants	<u>Strategy/policy/process</u> Mutual Exchange policy. <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Communications campaign on ME service available
2.4.3 Registered providers must provide support for accessing mutual exchange services to relevant tenants who might otherwise be unable to use them.		Service not provided at present formally, however it is understood that Officers assist wherever possible. Digital access sessions promoted corporately. Booklet available on our website explaining the rights and implications involved with mutual exchange. Hard copy posted out to tenants where required. The team support tenants throughout the mutual exchange process. We offer advice and support over the phone, appointments with residents in their homes and we can provide support by appointment in our office.	<u>Strategy/policy/process</u> Mutual exchanged procedure and Tenancy Management Policy. <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Booklet on the website	Support offered to enhance digital access specifically around mutual exchange. Communications campaign on options and support available. Mutual Exchange policy and revised procedure including support. Review content on website and booklet advising to contact Housing Officer - additional support available upon request. Future ‘Drop in Sessions/monthly surgeries’ focussed on mutual exchanges.	<u>Strategy/policy/process</u> <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Publicity on support available for tenants <u>Transparency with tenants incl website</u> Webpage updated including reference to Housing Officer. Publicity on support available for tenants
2.4.4 Registered providers must offer tenants seeking to mutually exchange information about the implications for tenure, rent and service charges		Booklet available on our website explaining the rights and implications involved with mutual exchange.	<u>Strategy/policy/process</u> Tenancy Management Policy <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> <u>Transparency with tenants incl website</u> Booklet on the website	Review application form to merge booklet with it. Mutual Exchange policy and revised procedure including highlighting implications of tenures etc Review information in letters to residents, website, booklet	<u>Strategy/policy/process</u> Mutual Exchange policy <u>Quantitative/qualitative data</u> <u>Transparency with Senior Officers and Members</u> Hardcopy of ME included with form <u>Transparency with tenants incl website</u> Mutual Exchange policy

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