



Report to:	<b>STOCKPORT HOMES MEMBER COMMITTEE</b>		
	<i>11 October 2021</i>		
Report of:	<b>ASSISTANT CHIEF EXECUTIVE</b>		
Contact Officer and contact details	Rob Lloyd, Strategy and Insight Manager 0161 474 3279 <i>Rob.lloyd@stockporthomes.org</i>		
Type of Report	<i>Assurance</i>		
Title of Report:	<b>CORPORATE PERFORMANCE REPORT</b>		
Purpose of Report:	To provide an update on performance against indicators and on progress in implementing the Service Improvement Plan (SIP) for 2021/22.		
Recommendation(s):	That the Member Committee: <ul style="list-style-type: none"> <li>i. Notes performance and improvement actions outlined in this report;</li> <li>ii. Raises any issues of concern about the explanations presented where targets or objectives have not been met.</li> </ul>		
Confidentiality	Non-Confidential		
Resource Implications	Any resource implications of the Service Improvement Plan actions have been considered as part of the budget setting process for 2021/22.		
Impact on Risk Appetite and Risk Register	SHG seeks to manage risks in line with its risk appetite. Overall, SHG's risk appetite in relation to decision making is 'minimal' and by reporting regularly on the key corporate performance indicators, the Board can make decisions in line with current information.		
	Risk Number	Risk Description	Risk Mitigation

	5	Health and safety obligations to customers aren't fulfilled, including gas safety, electrical safety, fire safety, legionella, lift safety, and asbestos	The risk is mitigated in several ways, including by monitoring and reporting on these key indicators. Any potential problems are highlighted, and action planning is triggered to address poor performance
	14	Rent and water arrears increase to unsustainable levels	This risk is mitigated in several ways, one of which is to monitor and manage key performance indicators related to the impact of Welfare Reform. A performance report is provided quarterly to the Board, the Stockport Homes Customer Monitoring Group and the Stockport Homes' Member Committee. These highlight potential problems, helping ensure financial reforecasting and action planning for improvement.
Customer Voice		The performance indicators reflect the priorities agreed in the Delivery Plan and customers are involved in the formulation of that Plan.	

<p>Equality, Diversity &amp; Inclusion implications</p>	<p>There are no equality and diversity implications arising from the recommendations of this report.</p>
<p>Regulatory compliance</p>	<p>The performance indicators enable Stockport Homes to monitor performance on its regulatory obligations, such as compliance with health and safety indicators that form part of the Consumer Standards.</p>
<p>Comments of the Stockport Homes Monitoring Group</p>	<p>The Stockport Homes Monitoring Group provided comments relating to the Corporate Performance Report. The comments covered:</p> <ul style="list-style-type: none"> <li>• The customers praised Stockport Homes' performance on the installation of sprinklers in high rise buildings.</li> <li>• Overall performance exceptional given the circumstances of 18 months. The fact that there are only two indicators outside the parameters is excellent.</li> <li>• The reduction in staff sickness is encouraging, demonstrating that previously discussed staff initiatives are working. It is also good to see new performance indicators added to the list.</li> </ul>

## 1. INTRODUCTION

- 1.1. This report summarises performance against Stockport Homes' key performance indicators and measures for the year to August. It also provides an overview of progress against the Service Improvement Plan actions for 2021/22.
- 1.2. The full list of Service Improvement Plan actions and updates is provided in Appendix One.

## 2. SUMMARY OF PERFORMANCE

- 2.1. At the end of August, 14 of the 16 corporate performance indicators were rated as 'green', having met their targets. Three indicators were outside of the target but remained within the tolerance and was rated 'amber'. None of the indicators fell outside the tolerance.
- 2.2. Actions to implement the Service Improvement Plan are progressing well, with all but one action on target for completion. The action that requires a date change relates to a development scheme and a date change is requested to March 2022.

## 3. ANALYSIS OF KEY PERFORMANCE INDICATORS

Name	2021/22 YE target	2021/22 Tolerance	April to Aug 2020	April to Aug 2021
Percentage of properties and communal areas with a valid gas safety certificate (excluding leasehold)	100%	n/a	99.9%	100%
Percentage of properties and communal areas with a satisfactory electrical installation certificate	100%	n/a	99.9%	100%
Percentage of compliant Fire Risk Assessments	100%	n/a	100%	100%
Percentage of fire-safety follow-on actions completed within timescale per Fire Risk Assessment	100%	99.5%	New	99.9%
Percentage of passenger lifts that have had a thorough examination completed within the last six months	100%	n/a	New	100%
Percentage of communal areas with a valid water risk assessment	100%	n/a	100%	100%
Percentage of communal areas with asbestos materials that have been periodically re-	100%	n/a	100%	100%

Name	2021/22 YE target	2021/22 Tolerance	April to Aug 2020	April to Aug 2021
inspected in line with the agreed inspection frequency (12 or 24 months)				
Percentage of ASB complainants satisfied with the outcome of their case	98.5%	95.5%	99.6%	100%
Satisfaction with the repair	98%	95%	99.8%	97.1%
Percentage of repairs completed at the first visit	95%	92%	96.2%	96.1%
Rent collected as a percentage of rent due	n/a (Aug conservative estimate 98.61%)	Year-end business critical level 98.26%	98.9%	103.30%
Rent arrears as a percentage of rental debit	n/a (Aug conservative estimate 2.52%)	Year-end business critical level 3.00%	2.49%	1.96%
Number of evictions where the tenant is still in situ	No target	No target	New	1
Average time taken to re-let empty dwellings (all re-lets)	11 days	12.5 days	13.2 days	11.0 days
Availability of core IT systems	99.75%	97.0%	99.9%	100%
Percentage of estate inspections rated at least 'good'	98%	95%	98.9%	98.7%
Percentage of people threatened with homelessness where homelessness is then prevented	No target	No target	New	67.6%
Average days lost due to sickness per employee	5.75 days (July target 2.02)	6.25 days (July tolerance 2.19)	1.58 days*	1.90 days*

\* July figures, August unavailable at time of writing report

3.1. Three indicators fell slightly outside the target but remained within an acceptable tolerance and was rated as 'amber'. Commentary is provided below:

**AMBER Percentage of fire-safety follow-on actions completed within timescale per Fire Risk Assessment: 99.9 per cent (target 100 per cent, tolerance 99.5 per cent)**

At the end of the August, 3,031 of 3,034 actions are complete, with four going beyond the due date. One action relates to the door on a leasehold property. The leaseholder has been engaged and the work is being scheduled for completion in conjunction with the leaseholder. On the remaining two actions, one is a trip hazard that has been allocated to repairs and the second relates to door guards which have been assessed and parts are on order.

**AMBER Satisfaction with the repair: 97.1 per cent (target 98 per cent, tolerance 95 per cent)**

The service has completed 749 surveys with 727 customers satisfied with the outcome of the repair. Performance improved month-on-month between April and July, with five negative responses in April and May, four in June and zero in July. However, eight negative responses were received in August. In several cases, the customer stated that they were not satisfied but did not provide a reason for the response and it was not possible to identify a reason from the job details. The service will ensure that it requests further details during the satisfaction survey call so that any learning can be identified. The service continually analyses responses to identify learning themes and in two cases it identified that further advice could be given to customers in preparation for heating works. However, wider analysis of the negative responses shows that in many instances the service attended the job either on the same day or within a short period of time and ahead of service standards. In a small number of cases a return visit was required, and the customer was informed, but in most instances the job was resolved at the first visit

- 3.2. There are two measures without targets in the report, covering evictions and homelessness preventions. There has been one eviction during the period, which occurred in July. The eviction was a result of work carried out by the Anti-social Behaviour Team to tackle various issues at a property including drug use, criminal behaviour, and violence. Homelessness was prevented in 193 cases, which is 67.3 per cent of the cases where people were at risk of homelessness. The relief duty, which is a statutory duty owed to people that are already homeless or in cases where prevention has not been successful, was met in 178 cases during the period.

## **4. SERVICE IMPROVEMENT PLAN**

- 4.1. The 2021/22 Service Improvement Plan contains 14 actions that reflect the short-term business growth and service delivery aims of Stockport Homes Group. At the end of August, all but one of the actions are progressing well and remain on target for completion. However, there is one action that required a date change.

*Deliver high specification development at St. Thomas's hospital within Mayoral Development Corporate (MDC) area. Deadline date refers to signing of building contract.*

**Date change from September 2021 to March 2022:** The joint delivery team from SHG and Stockport Council is assessing costs submitted by potential

contractors to ensure the project can be delivered within budget. However, it is anticipated that the contracts and the start on site will be delayed.

4.2. The full list of actions and updates in provided in Appendix One.

## **5. CONCLUSION**

5.1. At the end of August, all indicators remain on target or within an acceptable tolerance. Where indicators are within tolerance, the reasons for performance is understood.

5.2. Actions to implement the 2021/22 Service Improvement Plan are progressing well, although one action required a date change.

## **6. RECOMMENDATION(S)**

That the Member Committee:

- i. Notes performance and improvement actions outlined in this report;
- ii. Raises any issues of concern about the explanations presented where targets or objectives have not been met.