

MINUTES of the Management Committee Meeting held on 26th October 2021 at 6pm Location – 65 Golspie Street, Govan, Glasgow, G51 3EW and Zoom

Item	Agenda Item			
1.0	Welcome & Apologies –			
	Committee Present	In Attendance	Apologies	Special Leave
	Lindsay Roches Maureen McDonald (Secretary) Ann McEachan Kirsty Stoddart Karen Fee Maureen McKinnon (Co-opted) Stephen Williamson	Gary Dalziel (CEO) Kerry Clayton (CGO) David Adam (DMS) Aidan McGuinness (DHCS) (part meeting)	Janet Evans (Chair) Janice Shields Kirsty Wilson Duncan Smith (Co-opted) James McGeough (DFCS)	
2.0	Declaration of Interest			
There	e were no declaration on Interests.			

3.0	Minutes		
3.1	Minutes of Previous Management Committee Meeting held on 28th September 2021	The Minutes were agreed as a true record Proposed by: Ann McEachan Seconded by: Maureen McDonald	Signed by Chairperson: [REDACTED – PERSONAL DATA] Signed by CEO: [REDACTED – PERSONAL DATA]
3.2	Matters Arising	As neither the Chair nor Vice-Chair were in attendance Lindsay Roches agreed to Chair the meeting. LR introduced herself for the benefit of the new members. Updates were provided on the following actions from the previous minutes that are not otherwise on the agenda: [REDACTED – CONFIDENTIAL AND COMMERCIAL INFORMATION] The 1-2-1's with staff will now be done by Directors as suggested by Committee due to constraints on the CEO's time Lettings and Void Policy is being updated to include a section on consultation [REDACTED – CONFIDENTIAL INFORMATION] 	
3.3	Draft Minute of the Audit, Finance and Risk Sub-committee meeting held on 17 th August 2021	Draft minutes provided for information at this stage ahead of approval in November. There were no queries from the draft minute.	
3.4	Draft Minute of the Housing and Maintenance Sub-committee meeting held on 19 th August	Draft minutes provided for informa queries from the draft minute.	tion at this stage ahead of approval in November. There were no
4.0	Governance		
4.1	Assurance Report Q2 Progress Update	report, providing an overview of th submit an Annual Assurance Stater	evisions to the Assurance Action Plan and talked through the detailed e assurance process adopted by Elderpark and the requirements to nent (AAS) to the Scottish Housing Regulator (SHR). The CGO advised, incides with the approval of the AAS the report also sought to

provide information on key areas actioned throughout the year as well as highlight key evidence to support the AAS.
Discussing the Action Plan the CGO advised during the initial full review 68 non-material actions were
identified. 7 months after the development of the action plan, 30 of these actions have been completed
giving a completion rate of 44% to date. The CGO highlighted the good progress here and in relation to
the 3 year cycle stated there is adequate time to implement the remaining actions.
Moving on to talk through the areas for improvement mentioned in the AAS 2020 the CGO highlighted the follow:
The introduction of the revised KPI Framework and regular reporting
 Progress made on reviewing the Tenant Engagement Strategy and the use of CX Feedback to
explore how we engage via different methods
The revised Business Planning process which was supported by an external consultant and the
production of the new Business Plan 2021-24
 Working towards meeting requirements in relation to equalities and human rights which has
included the development of an Equality and Diversity Policy, embedding Equality Impact
Assessments into our policy process and training being provided to both Committee and staff.
The Governance review was cited as a key piece of evidence here and the CGO highlighted the report
from North Star stated Elderpark has 'high levels of compliance with good systems in place to self-assess,
provide assurance and ensure evidence is collated to demonstrate compliance.'
The CGO also reminded Committee that all evidence to support our assurance comes through
Committee in the form of reports and minutes. However, for ease of reference there is an evidence
bank on Decision Time which contains key pieces of evidence such as the Business Planning Process and
Business Plan, all governance policies, external consultant reports, calendars of submissions, Registers
of Decisions and training materials.
Committee agreed progress against the actions is good but felt target dates especially those relating to
November / December were possibly to tight and causing pressure of staff responsible for them.

		 Following a discussion it was agreed the CGO and Senior Managers would review dates and look at what actions can be extended into 2022. Committee asked the DHCS to provide an update on the Tenant Engagement strategy. The DHCS advised that as per the report a desktop review of the literature has been carried out and the association is now engaging with TPAS. It was advised that CX Feedback is being well utilise to get feedback from users immediately after a service is accessed. Committee sought assurance that the Strategy would be ready by December as agreed and suggested TPAS could be used to elevate pressure on staff time. It was commented that there is lots of good work in this but getting a formal strategy in place was needed. The DHCS advised that the Strategy will be presented for approval at the meeting in January 2022. Committee. Committee approved the revisions to the action plan and noted progress.
4.2	Annual Assurance Statement	 The CEO sought approval of the AAS and provided a brief overview of the introduction of the ASS from SHR, the requirement for the process to be led by Committee and for Committee to feel assurance the association is fully complaint with the Regulatory Framework based on the evidence they have seen. The CEO further detailed the assurance process is used as a self-assessment tool to ensure organisations are actively reviewing how they comply with the Framework and how it raises awareness with senior staff to ensure they are delivering at an operational level. The CEO also highlighted the excerpt from SHR's guidance which has been included within the report and sets out how Committee should be assured of compliance. The CEO provided a summary of the process to date and highlighted some key actions including the external governance review and the external health and safety audit. The CEO advised the health and safety audit is still ongoing with audits providing 'adequate assurance' received for 4 out of the 6 areas subject to the audit. A Committee member commented on how robust a process this has been having been part of it through the organisation they are employed by and the vast amount of evidence which required to be presented during the audit. Other forms of external support where also highlighted

		 external support provides a level of assurance that Committee have access to the best possible advice and support to assist in effective decision making. The CEO moved on to the ASS itself, stressing again that Committee must feel assured in order to approve submission. Committee suggested members not in attendance tonight be given a further opportunity to comment before the AAS is submitted. The CEO advised he would email Committee after the meeting to ensure a final opportunity to comment. Post meeting note: Given the limited timescales available this was not circulated for further comment as approval had been granted and would have been challenging to get further approval prior to the 31st October 2021. Committee collectively approved the ASS
4.3	Governance Report	The CEO talked through the report, advising Committee the purpose of this regular report is to ensure Committee are well informed on key governance areas. This month these key areas are: the co-option of 2 new Committee members, the formation of the Sub-committees, recommendations from the collaborative governance review, the Committee induction process and training programme. Co-option
		The CEO provided a brief background on both Maureen McKinnon who is a local resident keen to support the organisation and Duncan Smith who has a keen interest in Govan with expertise in retrofit and energy efficiency. The CEO stated both would help strengthen the already strong Committee and sought approval for the co-option of both.
		Committee approved the Co-option of Maureen McKinnon and Duncan Smith.Proposed: Ann McEachanSeconded: Maureen McDonald
		Seconded. Madreen McDonaid

Formation of Sub-committees
The CEO advised that following the AGM each year the Sub-committees must be reformed and highlighted the 3: Audit, Finance and Risk, Housing and Maintenance and Staffing. Rather than looking for interest at the meeting the CSA will be in touch with Committee to gauge interest and form the memberships of each in advance of the next meetings due to be held in November.
Collaborative Governance Review
The CEO advised the collaborative governance review had highlighted some recommendations for improvement. As previously advised the recommendations are for minor improvements with nothing material involved. The CEO talked through each recommendation in turn and asked for comments on whether each should be accepted and implemented.
There was a detailed discussion on each of the recommendations set out in the report. From the discussion the following points were agreed:
 Review the suite of governance polices – agreed this will be reviewed Develop a Committee Recruitment, Induction and Succession Planning Policy – agreed this in on the assurance action plan but delayed as awaiting the outcome of GWSF research Review the description of assurance approaches adopted by others – agreed to review but Committee are satisfied with the approach taken in Elderpark and don't envisage any changes as a result
 Review the layout and format of Clydebank's framework – the CGO advised this was reviewed in 2020 and the Elderpark framework produced as an improvement upon this. Committee agreed the framework in place works well and no requirement to change Develop a compliance level dashboard – the CGO advised this is already in place and appears at the start of our framework document Include questions from SFHA Toolkit in Framework – the CGO advised the Framework is laid out in line with the Toolkit so the documents are read in tandem and felt adding the questions

	 unnecessary as the Toolkit is not designed to be prescriptive. Committee agreed this was not required Introduce questions which demonstrate understanding of Committee role within the annual review process – agreed to discuss this with external consultant who will support the process Set out methodology to assess compliance with nine year rule – agreed and this will be included in the Policy to be developed as above Use finding to publish minutes – agreed and CGO currently working this Develop a minute taking protocol – agreed this will be developed Ensure Chairperson reviews registers – registers are presented to Committee annually therefore the Chair does review Review Clydebank paper relating to AGM – this has been reviewed and very similar to our approach Endure formal processes in place to elect Officer Bearers – agreed and this has been implemented as per discussions at the last meeting The CEO also highlighted some of the good practice noted in the report around the associations Standing Orders, assurance approach and framework and the Committee Review process. Committee asked what feedback there had been from the other RSL's involved and had they found it beneficial. Another Committee member was able to comment as employed by one of the other participating RSL's and commented it had been very a very useful and informative process. The CEO advised as this is the first this type of project had been done the intention now was to look at publicity opportunities and inform SHR. Committee approved accepting the agreed recommendations set out above. Proposed: Ann McEachan
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		Committee Induction
		The CEO advised of the intention to hold an induction session for new members which will include hearing from the CEO, DFCS, DMS and DHCS on background information for the association, information on Committee role and key activities from each area of service. The session will also include a run through of Decision Time from the CGO. In addition the implementation of a 'buddy system' is intended and the CEO advised those interested in being paired with a 'buddy' should contact the CGO or CSA who will arrange this. Following on from this various training will be highlighted for update to help new members settle into their roles.
		Committee collectively agreed the proposed induction process.
		Training Programme
		The CEO advised the programme had been disrupted due to other priorities and the busy calendar Committee have had over recent months with business planning and additional meetings. The intention is to contact Alison Smith to agree dates for the session to be delivered as part of the review process. In addition to this the CEO highlighted the themes which had come from the review process contained within the report.
		Committee noted this.
4.4	Code of Conduct Committee Members	The CGO sought approval of the updated Code of Conduct: Committee Members Policy. The CGO advised that the Summary of changes had not been completed with this Policy as the changes were minimal and related to the language used as opposed to any changes of the principles underlying the Policy. The CGO also advised that following approval Committee would be asked to sign the updated acceptance page.
		Committee approved the Code of Conduct: Committee Members Policy.

		Prosper: Maureen McDonald Seconder: Ann McEachan
4.5	KPI Framework Report Q2	The CEO provided an overview of the detail report previously circulated and advised the purpose of the KPI framework is to provide Committee with a system to monitor how the association is performing in key areas. Following discussion at the August meeting when the new framework was presented the indicators have been reduced to 14 as requested by Committee. The CEO further advised the KPI's presented to Committee are supported by more detailed analysis of performance via the Sub-committees.
		The CEO highlighted areas where performance is being reported as below target and provided context to these KPI's. Arears highlighted were: complaints, repairs (days / hours), repairs satisfaction, re-let times. The CEO also mentioned arrears here, stating performance remains reflective of target but needs to be monitored closely due to concerns within the sector that an increase may be seen in the near future.
		Committee discussed some of the issues that may be impacting upon repairs satisfaction and what can be done to improve this. It was suggested the CX Feedback survey process needs refined as surveys are being received for completion by tenants before the work has been carried out. The DMS will look in to why this is happening as the trigger for the survey is a job being complete.
		At this point there was a discussion on SHQS and the CEO advised there had been misreporting on the SHN presentation which had shown 50% of our properties as failing when in fact they are exempt. The DMS provided a very detailed reason for the exemptions being applied had talked Committee through the space standard relating to cubic meters within the kitchen as the reason not all Elderpark properties can be fully complain with SHQS.
		Committee had a detailed discussion on the various indicators and the benefits of seeing them. Following this it was agreed to reintroduce indicator C1, change the wording on indicator 12 to reflect quarterly reporting, remove indicator 17 and amend indicator 27 to current arrears.

		Committee also queried why satisfaction indicators have been removed. The CEO advised this is due to the information being dated and they will be reintroduced when face-to-face surveys are taking place again. The tender for this has been done and the intention is for this to begin again in early 2022. Committee noted the current performance.
5.0	Health and Safety	
5.1	Health and Safety Report October 2021	The DMS advised the report was to provide Committee with information around key H&S issues to ensure Committee are fulfilling their responsibilities. The DMS advised that there were no accidents, incidents or near misses to report this month and the main focus for the report was setting out Committees responsibility in relation to H&S to enable them to sign the collective responsibilities statement that would be circulated for after the meeting. The DMS further explained the Policy statement will be signed by the Chair and CEO and following on from this all staff will be asked to sign responsibility statements too. The DMS talked through the detailed report setting out Committee responsibilities and how this cascades down throughout the organisation. The DMS also advised Committee the H&S control manual is available on Decision Time together with a summary handbook which Committee should read to
		ensure they fully understand their responsibilities on H&S.
		Post meeting note : H&S Policy statement signed by CEO and Chair. Collective responsibilities statement circulated and signed by those present.
5.2	Asbestos Safety Audit	The DMS sought approval for the external audit report provided by H&S Housing Compliance UK Ltd and the management responses contained within the audit report.
		The DMS advised the report has given 'adequate assurance' and provided a number of recommendations for improvement. Management responses have been provided to the auditor on how these findings will be addressed and implemented. Key areas which were picked up included more effective internal oversight of the Asbestos Register, improved sharing of is now done through providing contractors direct access to the portal, consultant and contractor management, improved record

	keeping on remediation works and reviewing 'in-house' audit arrangements and the development of targeted KPI's. Talking through the management responses the DMS advised many actions have already been implemented including: controls introduced to ensure effective oversight of the Asbestos Register, access to the portal has been given to contractors to ensure they have the current data on asbestos ahead of carrying out any work, due diligence on Bradleys approved list of contractors, improvements to record keeping and systems in place to ensure certification received upon completion of works and KPI's have been developed to report to the Sub-committee on numbers of surveys completed, inspections carried out and any work done to remove or encapsulate. The DMS advised that positive progress has been made. However it has resulted in additional spend on surveys of approximately £20k. Committee discussed the findings and management responses in detail before querying the timescales set for completion as felt this was perhaps too ambitious and may put undue pressure of staff time. The DMS agreed with this and advised with the legionella audit report due soon and any recommendations coming from that timescales may need to be extended for full implementation of the improvements. Committee approved the audit report and management responses.
	Committee approved the audit report and management responses. Proposed: Maureen McKinnon Seconded: Kirsty Stoddart
6.0 AOCE	
	The CEO advised that Govan Housing are celebrating 50 years and had provided places for Elderpark at the celebratory dinner. Anyone interested should contact the CSA who will arrange attendance.
	The CEO informed Committee the Annual Report has been published and is being delivered to tenants this week.
	An update on progress with the Maintenance Manager posts was given and the CEO advised an offer has been made and further details will be provided to Committee upon formal acceptance of the post.

		The CEO also advised that Elspeth Millen, former Chair, had now received her BEM which was given to her at a ceremony held in Glasgow City Chambers earlier in the month.
		[REDACTED – CONFIDENTIAL INFORMATION]
		Finally the CEO advised Committee on the intervention from SHR at Arklet Housing and encouraged Committee to read the publications on this which have been added to Decision Time within the Resources Library.
		Committee commented on how quiet things have been in relation to publicity and media recently. The CEO advised this has been the case but he had met with [REDACTED – PERSONAL DATA] yesterday and there were a number of publications due to be realised over the coming weeks and months.
7.0	Date of Next Meeting	Tuesday 30 th November 2021 at 6pm

Approvals

Item No	Agenda Item	Proposed (P) & Seconded (S) by	Lead Officer
3.1	Minutes of the Meeting held on 28 th September 2021	Ann McEachan and Maureen	CEO
		McDonald	
4.1	Assurance Report Q2 Progress Update	Maureen McDonald and Ann	CGO
		McEachan	
4.2	Annual Assurance Statement (ASS)	Collectively Approved	CEO
4.3	Governance Report – Co-option of Maureen McKinnon and	Ann McEachan and Maureen	CEO
	Duncan Smith	McDonald	
4.3	Governance Report – collaborative governance review –	Ann McEachan and Kirsty Stoddart	CEO / CGO
	implement agreed recommendations		
4.3	Governance Report – Induction process	Collectively approved	CEO / CGO
4.4	Code of Conduct: Committee Members	Maureen McDonald and Ann	CGO
		McEachan	
5.2	Asbestos Audit Report	Maureen McKinnon and Kirsty Stoddart	DMS

Additional Actions from Meeting

ltem No	Agenda Item	Action Required	Lead Officer / Date to be Actioned by
4.1	Assurance Report Q2 Progress Update	Review target dates of actions due before the year end	CGO
4.2	Annual Assurance Statement (ASS)	CEO to ask absent Committee for any further comments. Chair to sign and ASS to be submitted to SHR	CEO
4.3	Governance Report	Formation of the Sub-committees	CGO
4.3	Governance Report	Induction session to be arranged	CEO / CGO
4.4	Code of Conduct: Committee Members Policy	Signing acceptance of the Code / updated Policy to be circulated and published	CGO
4.5	KPI Framework	Investigate why CX Feedback survey is being issued ahead of work being completed	DMS
4.5	KPI Framework	Further revise indicators in line with discussion	CGO
5.1	H&S Report October 2021	Policy statement to be signed by Chair who was absent / collective responsibilities statement to be signed by those who were absent	CGO