

Minutes of Berneslai Homes Board held 24th July 2025 4.00 p.m. Gateway Plaza

Present:

Ken Taylor (KT) - Chair

Richard Fryer (RF) - Board Member
Adam Hutchinson (AH) - Board Member
Mark Johnson (MJ) - Board Member
Rebecca Mather (RM) - Board Member
Jo Sugden (JS) - Board Member
Sarah Tattersall (ST) - Board Member

In attendance

Amanda Garrard (AGa) - CEO

Dave Fullen (DF) - Executive Director, Customer & Estate Services

Arturo Gulla (AGu) Executive Director, Property Services

Rachel Taylor (RT) - Executive Director, Resources and Company Secretary

Paul Clifford (PC) - Service Director BMBC

Observing

Sarah Clyde (SC) Head of Strategic Housing BMBC (attended for part of

meeting)

	ACTION
<u>Item 1 – Apologies</u>	
Apologies were received from Kevin Osborne, Gez Morrall and David Leech – Board Members.	
<u>Item 2 – Declarations of Interest</u>	
None were declared.	

<u>Item 3 – Governance Update</u>

RT presented the report highlighting the 2 key areas.

Following the May Board meeting, a Task and Finish Group was established to review Board and EMT self-assessment feedback. Board's attention was drawn to the agreed actions at Appendix A.

The Board Code of Conduct has also been reviewed; this requires a formal review every two years. Only slight changes were made, which are outlined in the report. To improve governance in this area Board members will now be asked to sign the code annually. Previously this was signed by Board members at their induction. The revised code is attached at Appendix B.

RT confirmed that there were no instances of non-compliance highlighted from the self-assessment.

Resolved

Board approved:-

- 1. The Board Action Plan based on the recommendations from the Board task and finish group following the Board Self Evaluation.
- 2. The formal 2-year review of the Board Code of Conduct and noted the requirement for Board members to sign up to this annually.

<u>Item 4 – Risk Management Year End Report</u>

RT presented the report noting that it had already been considered by the Audit and Risk Committee.

The report gives an overview of the activities undertaken in 2024/25 and outlines the position on the strategic risk register, including a new risk added after the EMT assessment.

Attention was drawn to the contingent liability which has re-emerged concerning the legal case. BH did win the case last year, however, an appeal was lodged and granted, which will not be heard until December. BH may need to disclose this in the financial statements. Although it will not be provided for, it may be noted as a potential liability, as it exists and BH are aware of it when signing the financial statement. The Board noted that the appeal pertains to the process, not new evidence.

RT referred to Section 11 of the report and the zero based review of strategic risks appetite, informing Board this was undertaken on 16th July and the outcome will be reported to Board in September. Thanks were extended to all involved. The action to complete a zero-based review of strategic risks is on track to be completed by the deadline of 31 March 2026.

AH informed Board that Audit and Risk Committee had a productive discussion, concluding that risk is managed appropriately, although the Committee do not define the risk or the Board's appetite for engaging risk.

The Board discussed cyber risk and measures being taken to address it. RT advised that BH collaborates closely with the Council on protection efforts, working diligently to mitigate risks. BMBC's lead officer is attending the October Audit and Risk Committee to provide assurance. Vigilance by staff is crucial, and it is everyone's responsibility. The importance of having robust passwords was discussed, noting that necessary actions have been taken. Assurance was provided to the Board regarding e mail security when someone leaves the organisation.

PC requested that mitigations against risk be included in future reports and RT agreed to incorporate following the planned review of the strategic risks.

RT

Resolved

- 1. Board noted the Risk Management Annual Report for 2024-25.
- 2. Board noted the Quarterly Risk Management update.
- 3. Board reviewed the linked risk registers and note any updates.
- 4. Board noted the proposed 2025-26 Action Plan at Section 11
- 5. Board agree Board feel sufficiently informed about risk management.

<u>Item 5 – Employee Health and Safety Report</u>

RT presented the report which reviews the employee health and safety performance for 2024/25, highlighting improvements and areas needing attention, and requests Board approval of the updated Health and Safety Policy. It emphasises ongoing governance, monitoring, and staff engagement in safety practices.

Board noted that health and safety responsibilities have shifted to the People and Culture Team.

Key points to note are:-

The robust monitoring regime continues, through group meetings and quarterly updates to EMT.

Days lost due to accidents has improved compared to 23/24, though vigilance remains necessary.

Violence and aggression incidents have increased. However, BH take a zero tolerance approach and this message is actively communicated to staff, encouraging reporting through the mechanisms in place.

RF expressed his concern, following the limited assurance opinion by CA on lone working safety and requested assurance that the actions highlighted in the Corporate Assurance report are being implemented on a timely basis. RT

confirmed the actions are underway, mainly focussing on estate and repairs staff. This includes enhanced monitoring, staff support, security contract reviews and managerial responsibility to ensure compliance. Work has also been done to encourage colleagues to make witness statements. DF confirmed he was satisfied this is being given the priority operationally that it requires and actions are being followed up.

JS noted the improvement in days lost, which is positive, but felt it would be beneficial if the report provided analysis for work related mental health versus other causes. RT advised that the forthcoming sickness update will address this.

RT

Clarifications were requested on the incident rate calculations, mandatory training, including mental health awareness attendance by Managers. RT to circulate information.

RT

MJ on behalf of DL (not in attendance) advised he had expressed his concerns on the number of sickness days and seeks clarification on the process for staff returning to the workplace and how they are managed i.e. through OH/GP. RT assured that the Head of Governance and Strategy would provide the necessary information to DL as part of his induction. The information will also be included in the next sickness absence report. RT also mentioned that OH is an essential element of the service, however staff are unable to self-refer it must be through their manager.

RT

Clarity was requested for future reports on the information contained in the table titled Occupational Health Contacts by Practitioner. RT explained that the table illustrates the increase in contacts for the year 23/24, assuring Board the table would be improved in the next report, without disclosing any personal information.

RT

The Chair noted that 'near misses' were relatively low and questioned the accuracy. Board were assured that staff are encouraged to report near misses, they are reported to EMT and included in reports.. The Chair also emphasised the importance of fulfilling organisational competencies and the responsibility of both the organisation and Board in this regard.

Resolved

- 1. Board noted the performance of the health and safety systems and procedures that are operational within the company.
- 2. Board approved and signed the refreshed 2025-2026 Health and Safety Policy.
- 3. Approved the areas of further development and monitoring identified at Section 10.

<u>Item 6 – Building Safety Compliance and Disrepair Year End Report</u> 2024/25

AGu presented highlighting the key points.

Building safety compliance at the end of 24/25 was strong, with a 99.67% compliance rate across six key areas. The report highlights completed priorities, ongoing challenges and upcoming regulatory changes.

The focus areas were brought to Board's attention, noting the outstanding fire safety equipment, servicing and maintenance were prioritised and are now complete. The 12 outstanding electrical compliance reports have now reduced to 10, and work continues with the Council's Legal Team to address those that remain. Outstanding domestic lifting issues are minimal, and revisits are taking place.

The Government's announcement on electrical safety testing regulations in the social rented sector was summarised. From November everyone will be working towards a 5 year inspection programme, which will include furnished tenancies. A tenant communication plan will be developed.

Awaab's Law, effective October 2025 will be onerous on the sector and claims are expected. Pennington choices are assisting the dedicated damp and mould team formulate policies and procedures. When ratified they will be submitted to Board for approval. AGu stressed the importance of certificated training being arranged for technical staff. Other staff will require additional training and will include the Contact Centre. A proposal is awaited.

Board noted that disrepair claims have decreased significantly in the first quarter of 2025, vastly below some other providers. However there is an expectation from October onwards there may be an escalation.

The Building Safety Board meet on a regular basis, with a new Building Safety Manager commencing in September.

AGu added that BH has successfully achieved a C1 rating and a recent electrical inspection audit concluded with a reasonable assurance outcome, reflecting ongoing strong performance by staff.

AH commended the report, but raised concern about tenant safety in properties where access has been denied, possibly resulting in multiple non compliance issues. AGu emphasised that the safety of our tenants is a top priority and provided assurance that every effort is made to gain access, gather evidence etc. It was suggested that the new regulations may strengthen the position.

PC noted the positive position and the reductions in disrepair claims. He also referred to the positive proactive approach being taken to gain access to homes, which he acknowledges is very challenging. He stressed the importance of preparing resources in anticipation of Awaab's Law.

Resolved:

The Board approved the 2024/25 year-end report and noted the areas of focus.

<u>Item 7 – HRA Capital Investment 2024/25 Year End Financial and Activity</u> Report

AGu presented the report, bringing Board's attention to the key points.

It was noted that 22- elements on the BHS programme were not delivered due to no access or tenant refusals. 2513 major BHS works were completed. 929 major adaptations were completed, 140 heating system replaced,169 major voids completed.

Of the 139 completed areas of work on structural extensive, the majority were around disrepair, with 20 relating to major damp and 11 large re-roofs, therefore costs were significant.

Work continues with the Council on the action to complete the 6 outstanding timber floor replacements, noting that 15 were completed in 2024/25.

The £4.182M end of year underspend situation was discussed, noting the issues i.e. PRIP mechanism and final costs coming in significantly higher. However, the review of the PRIP contract should address forecasting issues in the future.

RF queried the barriers for tenants refusing works. AGu explained they are mainly down to age and/or health issues, refusing due to the significant disturbance the work entails. Other organisations face similar issues. Every effort is however made to persuade tenants to agree to the upgrades, but refusals remain high. The correlation to the voids issue was noted as significant costs are incurred when works have not been carried out.

MJ advised of a potential opportunity to improve refusals in the elderly as used by another organisation. They introduced a scheme called Golden Years Helping Hands, a specialist team that engages with older people using a sympathetic approach

PC emphasised the significance of dynamic financial control monitoring going forward, also noting the value of having a forward looking report with projections on budget allocations.

Discussion followed on the high number of reactive replacements. AGu noted this is driven by demand. From a major repair perspective they are one offs, such as damaged kitchens, water damage etc. where work has to be undertaken quickly. AGu reminded Board of the 2 year strategy reallocating funds from the DH budget to the reactive budget to address the backlog. The referral process has also been reviewed with the contract partner, resulting in a significant reduction. However, reactive work is expected to increase with the implementation of Awaab's Law in October.

Resolved

Board reviewed and provided feedback to the 2024/25 capital investment programme financial and activity outturn reported.

<u>Item 8 – Value For Money Annual Report</u>

RT presented the report which was also considered at the last Audit and Risk Committee. The Committee provided challenge in relation to the VFM Strategy presented to Board in February being embedded in the organisation. RT acknowledged it is not yet fully embedded but remains work in progress

The £181K of external funding was highlighted, which enhanced services to tenants.

The importance of collecting rent was acknowledged, noting the difficulty in collecting former tenants arrears, however £128K of former tenants has been collected.

RF referred to the success of Voicescape and whether it could be used in other areas. DF advised Voicescape is only used for income collection and gathering insight.

PC expressed satisfaction with the benchmarking information. RT advised the impact on value for money will be evident in the subsequent reports on the agenda, which are linked. In addition to our own expenditure RT advised of the importance of achieving vfm for the Council

Resolved

Board noted the report.

Date of Next Meeting – 25th September 2025 and AGM.