

**Berneslai Homes Public Board Meeting**  
**24/7/2025**  
**4.00 p.m. Gateway Plaza**

**1.0 Apologies - Kevin Osborne**

**2.0 Declarations of Interest**

**3.0 Governance Update**

*For Approval*

**4.0 Risk Management Year End Report**

*For Approval*

**5.0 Employee Health and Safety Year End Report**

*For Approval*

**6.0 Building Safety Compliance and Disrepair Year End Report 2024/25**

*For Approval*

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**7.0 HRA Capital Investment 2024/25 Year End Financial and Activity Report**

*For Information*

**8.0 VFM Annual Report**

*For Information*

**9.0 Minutes of Last meeting and actions**

<b>Report Title</b>	<b>Governance Update</b>	<b>Confidential</b>	No
<b>Report Author</b>	<b>Head of Governance and Strategy</b>	<b>Report Status</b>	Approval
<b>Report To</b>	<b>Board 24/7/2025</b>	<b>Officer Contact Details</b>	<a href="mailto:samantharoebuck@berneslaihomes.co.uk">samantharoebuck@berneslaihomes.co.uk</a> <a href="mailto:clairedenson@berneslaihomes.co.uk">clairedenson@berneslaihomes.co.uk</a>

<b>1. Executive Summary</b>	<p>1.1 This <b>Governance Update Report</b> provides key updates on governance issues for the Board.</p> <p>1.2 This report provides an update on the Board Self Evaluation Task and Finish Group session and the formal review of the Board Code of Conduct.</p> <p><b><u>Customer Voice/Impact</u></b></p> <p>1.3 This report is an update around the governance of the Board and therefore customer views have not been sought specifically for this report. Good governance supports tenants by ensuring their needs and concerns are central to decision making.</p>
<b>2. Recommendations</b>	<p><b>Board are recommended to:</b></p> <ol style="list-style-type: none"> <li>1. Approve the Board Action Plan based on the recommendations from the Board task and finish group following the Board Self Evaluation.</li> <li>2. Approve the formal 2-year review of the Board Code of Conduct and note the requirement for Board members to sign up to this annually.</li> </ol>

### 3. Background

- 3.1 The purpose of this report is to provide an update to Board on a range of governance issues.
- 3.2 To be a successful well-managed company, Berneslai Homes must uphold good governance as a priority.

### 4. Current Position /Issues for Consideration

#### **Board Self Evaluation**

- 4.1 The Board Self Evaluation formed part of the Governance update report to Board on 27th May 2025. At the Board meeting it was agreed that a task and finish group would be set up of Board members to review the feedback in detail and propose an action plan to Board for their approval.
- 4.2 The task and finish group met on the 16<sup>th</sup> of June and consisted of Ken Taylor (Chair), Richard Fryer, Jo Sugden and was facilitated by Rachel Taylor and Sam Roebuck.
- 4.3 The task and finish group considered both Board and EMT feedback during the session.
- 4.4 The agreed actions are attached at Appendix A for Board review and approval.

#### **Board Code of Conduct (Appendix B)**

- 4.5 The Board Code of Conduct outlines the ethical and professional standards expected of board members. It provides a framework for behaviour, ensuring integrity, accountability, and responsible decision-making. Key aspects include confidentiality, conflict of interest, and adherence to the corporate values.
- 4.6 The 2023-25 Board Code of Conduct was reviewed in line with the then newly introduced NHF Code of Conduct 2022.
- 4.7 The Code is signed by all new Board and Committee members during their induction. To improve our governance in this area all Board members will be asked to sign up to the code of conduct on an annual basis following approval of the new code of conduct today.
- 4.8 The Code requires 2-yearly formal reviews and has therefore been reviewed for 2025-27 and requires Board to approve the review (Appendix B).
- 4.9 The changes have been highlighted for Board. Key changes are:
  - Removed reference to the Remuneration Committee
  - Aligned to section 3.2 of the Board Gifts and Hospitality Policy
  - Amended to include independent Committee Members.

## **Governance Handbook**

- 4.10 The [Governance Handbook](#) in Decision Time Resources is a great tool for information related to internal and external governance information.

### **Annual Governance Statement Action Plan**

- 4.11 Whilst monitored by Audit and Risk Committee as part of the Risk Management reports, it is included in this report for oversight - [Annual Governance Statement Action plan 24-25](#)

## **5. Risk and Risk Appetite**

- 5.1 Strategic Risk Appetite – Risk Adverse: We aim to comply with all relevant legislation and have zero tolerance for regulatory compliance issues. We give high priority to internal audit recommendations and take immediate action to resolve concerns. We have zero tolerance for failure to meet deadlines from regulators.
- 5.2 There is a risk that the Board do not appreciate Berneslai Homes' key vulnerabilities and take appropriate action to manage them. The assurances provided within this report ensures that effective mechanisms are in place for the management of associated risks.

## **6. Strategic Alignment**

- 6.1 The report aligns to the requirements from BMBC for the effective governance of Berneslai Homes. Good governance links to the successful achievement of all our ambitions:
- Hearing Customers
  - Keeping Tenants Safe
  - Growth of Homes and Services
  - Technology and Innovation
  - Employment and Training
  - Zero Carbon

## **7. Data Privacy**

- 7.1 There are no data privacy implications arising from this report. No personal data has been processed and no DPIA (Data Protection Impact Assessments) is required.

## **8. Consumer Regulatory Standards**

- 8.1 This report relates to the Transparency, Influence and Accountability Standard, as it reviews performance reporting and decision-making to ensure best practice.

## **9. Other Statutory/Regulatory Compliance**

- 9.1 To provide Board with assurance around our governance arrangements.

## **10. Financial**

- 10.1 There are no financial implications arising directly from this report.

11. Human Resources and Equality Diversity and Inclusion

11.1 The Board Code of Conduct outlines the ethical and professional standards expected of Board members.

12. Sustainability Implications

12.1 No specific zero carbon implications from this report

13. Associated Background Papers

13.1 [Governance Handbook](#)

14. Appendices

14.1 Appendix A – Board Self Evaluation Action Plan

14.2 Appendix B – Board Code of Conduct

# Governance Action Plan

## Appendix A

Topic	Action	Owner	Timeline	Updates
Governance Indicators	Remove the shareholder approval metric as it is not meaningful.	Governance Team	Immediate	
Board Diversity	Address gender and ethnicity diversity in next recruitment and as part of Customer Services committee changes.	Board, Governance & Customer Services and Engagement team	Next recruitment cycle	
Training Attendance	Further clarify mandatory Board development sessions vs optional sessions. Measure only the mandatory sessions.	Governance Team	Before the next training cycle	These are already separated but will make it clearer on the invites which sessions are mandatory. Currently only record the KPI attendance against mandatory.
NHF Code of Governance Self-Assessment	Include stress testing in Q4 for HRA R&M and BH budgets.	Executive Director of Resources	Q4 25/26	
CEO Performance Assessment	Formalise process for Board to receive CEO appraisal outcomes and objectives.	Board Chair and Head of Strategy, Governance and IT	As Part of next appraisal cycle	
Strategic vs Operational Focus	Improve report clarity and strategic framing. Avoid pre-empting Board questions.	Report Authors, EMT	Training with DTP by December Board papers	

Topic	Action	Owner	Timeline	Updates
Board Papers Quality	Enhance performance reporting to support strategic discussions.	DTP, Report Authors	In line with DTP review papers by December Board meeting.	
EDI and Chair's Challenge	Keep Chair's Challenge on agenda. To be fed back by EDI champion as part of Board update.	Jo Sugden	Each Board meeting	
Understanding Key Partnerships	Organise informal sessions with BMBC. Develop stakeholder maps and partnership strategy. Include stakeholder engagement in Board Away Day.	Ken Taylor & EMT to discuss with BMBC attendance at Board Strategic Planning day	Next Strategic Planning Day – 3 <sup>rd</sup> September 2025	
Board Culture and Effectiveness	Improve understanding of organisational culture. Ensure all Board voices are heard. Provide training and support to enhance challenge and balance.	Board and Governance Team	Through appraisals and training calendar	

## **BERNESLAI HOMES POLICIES & PLANS**

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### **Board and Committee Code of Conduct 2025 to 2027**

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## Document Control

<b>Title</b>	<i>Board and Committee Code of Conduct</i>
<b>Responsible Officer</b>	<i>Sam Roebuck</i>
<b>Author</b>	<i>Claire Denson</i>
<b>Subject</b>	<i>Board Code of Conduct</i>
<b>Information Asset Owner</b>	<i>Sam Roebuck</i>
<b>Approved by</b>	<i>Board</i>
<b>Approved date</b>	<i>21 July 2022</i>
<b>Review date</b>	<i>May 2025</i>
<b>Review responsibility</b>	<i>Claire Denson</i>
<b>Applicable to</b>	<i>Board, Committee, Independent and Co-optee Members</i>
<b>DPIA Completion Date</b>	<i>n/a</i>
<b>EIA Completion Date</b>	<i>n/a</i>
<b>Regulatory Framework</b>	<i>NHF Code of Governance</i>

## Revision History

<b>Date</b>	<b>Version</b>	<b>Author</b>	<b>Comments</b>
<b>June 2019</b>	<b>2.0</b>	<b>Claire Denson</b>	<b>Approved by EMT and Board</b>
<b>July 2022</b>	<b>2.2</b>	<b>Claire Denson</b>	<b>Approved by EMT and Board</b>
<b>May 2023</b>	<b>2.3</b>	<b>Claire Denson</b>	<b>Reviewed and aligned to NHF Code of Conduct. Approved by Remuneration Committee for approval to Board</b>
<b>May 2023</b>	<b>2.3</b>	<b>Claire Denson</b>	<b>Approved by Board</b>
<b>May 2025</b>	<b>2.4</b>	<b>Claire Denson</b>	<b>Removed reference to Remuneration Committee. Aligned section 3.2 to the Board Gifts and Hospitality Policy , Amended to reflect any Board or committee member  To be approved by Board</b>

## Consultation and distribution

<b>Type</b>	<b>Details</b>
<b>Consultation</b>	<i>Board and EMT</i>
<b>Distribution</b>	<i>Board sign up to the Code of Conduct as part of their induction</i>

## 1. Introduction

The Board Code of Conduct sets out clear expectations of behaviour of all Board and Committee Members (referred to as Members throughout this document). It outlines the actions to be taken in the event of any breaches of the Code. It should also help Members understand their legal duties and the nature of their relationship with both Berneslai Homes Limited ('Berneslai Homes' or 'the Company') and the Executive.

This Code applies to every committee, working party or other subsidiary body of the Board. Its objective is to promote effective and well-informed company governance. It is not intended to be a definitive or authoritative statement of the law.

In addition to the Code, Members need to familiarise themselves with the following, which will be supplied to them on appointment, namely:

- [The Memorandum and Articles of Association of Berneslai Homes](#)
- Berneslai Homes' Strategic Plan
- [The Members' Governance Handbook](#)
- [The Agreement of Service](#)

A Member must observe this Code of Conduct whenever they conduct the business of Berneslai Homes or acts as its representative.

Members should always think carefully about potential conflicts of interest, and the impact of their behaviour on the reputation of Berneslai Homes.

It is expected that all Members will undertake their duties to the best of their abilities and will comply with the terms of the Agreement of Service.

Failure to comply with the Code of Conduct may lead to potential disciplinary action in accordance with this Disciplinary Procedure (section 7).

## 2. Role of the Board and Committees

The Board and Committees consist of non-executive Members who direct and oversee the affairs of Berneslai Homes. The Board / Committees ensure day-to-day management is delegated effectively and carried out properly by the Chief Executive and the staff of Berneslai Homes.

### 2.1 Functions

The functions of the Board / Committees are to:

- support the mission, vision and values of Berneslai Homes
- ensure compliance with the Management Agreement between Berneslai Homes and the Council
- define and ensure compliance with the Strategic Plan through the agreement of:
  - policies for action
  - budgets
  - a framework of delegation and system control, including performance monitoring

- ensure the affairs of Berneslai Homes are conducted lawfully, ethically and within the terms of its constitution
- ensure arrangements are in place for urgent decisions to be made in between meetings
- appoint the Chief Executive
- appoint the Company Secretary.

## **2.2 Exercise of Powers**

The Board and Committees may only exercise the powers granted to them by Berneslai Homes' Memorandum and Articles of Association. Unless specific powers and authority have been delegated to a named Member or Committee, it will usually be the case powers can only be exercised by the full Board acting together as a body.

## **2.3 Delegation**

Members should be aware that when they delegate any of their duties to others, including the Company Secretary and Committees, the responsibility and liability for fulfilling those duties remains with Members.

# **3. Principles**

You must fulfil your duties and obligations responsibly, acting at all times in good faith and the best interests of the company and its customers and other service users.

## **3.1 Conflicts of interests**

You must take all reasonable steps to ensure that no undeclared conflict arises, or could reasonably be perceived to arise, between your duties and your personal interests, financial or otherwise.

## **3.2 Bribery, gifts and hospitality**

You must not offer, seek or accept bribes or inducements to act improperly or corruptly. You must not seek or accept gifts, hospitality or other benefits from individuals or organisations that might reasonably be seen to compromise your judgment or integrity or place you under an obligation to those individuals or organisations. Gifts which are of an insignificant value, and which can be regarded as in the nature of advertising matter, can be accepted. If the gift is of a 'significant value', it must be politely but firmly refused.

Meals or refreshments which are connected with a public or semi-public occasion, such as an opening ceremony associated with new premises, in which Berneslai Homes have an interest, such as owners or partners in the scheme, and where the Member attends in an official capacity as representative of Berneslai Homes, can be accepted.

An important role of a Member may involve attendance at corporate functions which have a social element as well as networking and company promotion. Attendance at such events should be proportionate and not excessive with checks in place to ensure probity is upheld and disclosure documented

If a Member is unsure about accepting a gift or attendance at any function, then they are able to seek clarity from the Board Chair or Company Secretary.

All offers of gifts or hospitality must be recorded in the Register of Hospitality and Gifts using a Notification of an Offer form available from the Governance Team.

The Gifts and Hospitality Policy for Board Members is available to view in the Governance Handbook on Decision Time.

### **3.3 *Funds and resources***

Members should not place themselves under any financial or other obligation to others who might seek to influence them in the performance of their role.

You must not misuse the company's funds or resources for yourself, your family, your friends or the company.

You must not invite or influence a customer, unless they are a person who you are closely connected to, to make a will or trust under which you are named as executor, trustee or beneficiary.

### **3.4 *Confidentiality***

In carrying out your role, you have access to confidential information. You must handle information in accordance with the law and the company's policies and procedures, ensuring confidential material is handled sensitively, appropriately and with due care.

### **3.5 *Disclosure and Sharing Information***

Berneslai Homes regards compliance with the UK GDPR and Data Protection Act (DPA) 2018, and any future update along with information security standards, as a matter of the utmost importance. All Members are required to respect individuals' privacy at all times and are required to comply with current and any future UK data protection laws. Non-compliance may result in individuals being prosecuted under section 170 of the DPA, 2018 and Computer Misuse Act 1990 if there is no business reason to handle or share personal information of other Members, employees, contractors, suppliers, customers and members of the public to non-authorised individuals or organisations or to their own personal devices.

### **3.6 *Health, safety and security***

Your conduct must not endanger the health, safety or security of yourself or others.

If you have any concerns about the health, safety, security or wellbeing of yourself, another individual or a group of individuals connected with the organisation, you must report this immediately through the appropriate channels.

### **3.7 Conduct at meetings**

Your conduct at board / Committee and other meetings must meet a high standard of integrity, commitment, and courtesy.

### **3.8 Representing the company**

Members also have a legal duty to promote the success of Berneslai Homes. You should therefore consider yourself as an ambassador for the Company, and act accordingly.

You must not seek to officially represent the views or position of the company without prior authority.

In representing the company at external events and in dealings with outside bodies, you must set an example by demonstrating the highest standards of integrity and ethics and your alignment with the values, policies and objectives of the company.

You should not conduct yourself in a manner, which could reasonably be regarded as bringing the office of the Board or Berneslai Homes into disrepute.

If you intend to engage in an activity, including political or campaigning activity, which may reasonably be regarded to affect the company, you must obtain prior consent. Such consent must not be unreasonably withheld unless your activity poses a material risk to the company.

You must adhere to Berneslai Homes policies in the use of email, intranet and internet services including social media.

### **3.9 Reporting concerns**

You must report any reasonable and honest suspicions you may have about possible wrongdoing.

You must report any behaviour by another Member you reasonably believe involves a failure to comply with the Code of Conduct in accordance with the procedure set out in section 7.

### **3.10 Performance**

The Board has ultimate responsibility for the governance of Berneslai Homes and should have a diverse range of skills, competencies, experience and knowledge. It is important that the Board rigorously appraises its performance and that of individual members on a regular basis. Where performance falls below expectations and the required competency for a Member, the Board will actively deal with this.

The appraisal process may highlight areas of poor performance, whether through matters of competency, behavioural issues, poor attendance or lack of preparation for meetings. There may also be specific instances of inappropriate behaviour or conduct which need to be dealt with during the year.

You should ensure you:

- exercise reasonable care and skill in carrying out your functions. A higher standard of care will be expected of those who have particular skills or qualifications, such as an accountant or a solicitor.
- In partnership with the company, take responsibility for your own learning and development, regularly updating and refreshing your skills and knowledge.
- prepare for Board and Committee meetings by reading all the papers.

Attending meetings:

A Board Member who fails to attend 3 meetings of the Board in any period of 12 months, without the permission of the Board Chair, may, if the Board so resolve, have their fee reduced by such amount as the Board in its absolute discretion determines.

A Committee Member who:

- misses three consecutive meetings of the Committee. Or
- is absent from at least 25% of the meetings of the Committee in any period of 12 months

without the permission of the Committee Members, will if the Board so resolve, be removed as a Committee Member.

### **3.11 Accountability**

Members are part of a team and should act as such. You are accountable for your actions to each other, to Berneslai Homes and to its stakeholders.

In particular, you:

- have a duty to comply with the law on all occasions in order to preserve public confidence in Berneslai Homes.
- must support publicly the collective decisions made by the Board / Committee.
- are accountable for your decisions and actions to the public, funders and service users.
- must submit yourself to the level of scrutiny appropriate to your role.
- must ensure resources are not used for political purposes.
- must have proper regard to any relevant advice provided to you by the Chief Executive, Executive Director of Resources (Company Secretary) and professional advisers to Berneslai Homes.
- must exercise independent judgement in making decisions.
- should have a high level of attendance at Board / Committee meetings so they can perform the function properly and effectively.

### **3.12 Respect for others**

It is essential that Members have knowledge of current Equalities legislation and can apply this in governing the organisation. Members must at all times display the agreed Member Behaviours and promote the values of Berneslai Homes. You must treat others with respect. Failure to do so may impact on the reputation and wellbeing of the Board and Berneslai Homes.

Accordingly, Members should:

- promote equality and not harass or discriminate.
- treat others and their views with respect and courtesy.
- promote and support the principles of leadership by example.
- not do anything that may, or does, compromise the impartiality of those who work for, or on behalf of the Company.
- respect the role of the Board Chair, the Chief Executive and the employees of Berneslai Homes.

### **3.13 Objectivity**

Members should ensure decisions are made solely on merit and should set aside personal preferences. At all times you should look to the greater good of Berneslai Homes. In making decisions, you should:

- ask appropriate questions; and
- come to your own conclusions, weighing up carefully the views expressed, and the advice given.

This duty of objectivity extends to making appointments, awarding contracts, recommending individuals for rewards and benefits and transacting other business.

### **3.14 Openness**

You must be open about your decisions and actions, giving reasons for them where appropriate.

### **3.15 Relationships and team working**

Members must maintain a constructive, professional relationship based on a sound understanding of the respective roles of Members, staff and involved residents.

You should:

- develop positive working relationships with the Chief Executive and the Executive Management Team.
- not undermine or appear to undermine the authority of a senior officer in their dealings with a more junior member of staff.
- maintain the highest standards of professionalism, fairness and courtesy in all your dealings with residents and other service users recognise their primary role is one of strategic direction, and not day-to-day operational matters.
- avoid becoming involved in individual staffing and customer matters. Unless you have specific and, where practicable, written delegated authority to do so, you must not individually give instruction or direction to any member of staff or contractor.
- Where it is necessary to raise issues of staff, board, Committee or contractor performance, these must be raised constructively and through the appropriate channels.
- avoid inappropriate personal familiarity with members of staff.
- not ask or encourage the commitment of wrongdoing, including any breach of this Code.

**3.16 In addition, the Companies Act 2006 requires Members to consider the following:**

- the long-term impact of their decisions
- the interests of the company's employees
- the need to foster the company's business relationships with suppliers, customers and others the impact on the community and the environment
- the desirability of maintaining a reputation for high standards of business conduct.
- the need to act fairly as between members of the company

#### **4. Prohibitions on acting as a Board / Committee Member**

The Companies Act 2006 excludes the following from being directors:

- undischarged bankrupts
- people under the age of sixteen
- people disqualified under the Company Director's Disqualification Act 1986

Further restrictions may be imposed by Berneslai Homes' Memorandum and Articles of Association.

#### **5. Conflicts of Interest**

The obligations of Members to Berneslai Homes must not clash with obligations they owe to others.

##### **5.1 Statutory Requirements**

The Companies Act 2006 contains three basic requirements concerning conflicts:

- a general duty to avoid a conflict of interest
- a duty not to accept benefits from third parties
- a duty to declare an interest the director may have in a proposed transaction or arrangement with the company.

##### **5.2 Membership of Other Bodies**

A Member may be a member of a Tenants and Residents Association.

However, to avoid any conflict of interest, a Member must **not** be a member of the Tenant Voice Panel, Executive or Management Committee, or any similar body from time to time established for/by Tenants.



Members should therefore:

- be aware of their duty to declare any interest relating to their role and take steps to resolve any conflicts that may arise.
- resolve any conflicts in favour of their role as a Member and not in accordance with their private interests.
- make relevant declarations of interest in relation to their role at Berneslai Homes and in relation to any role they may perform externally.

### **5.3 Contractors**

Members must disclose all relationships of a business or private nature with external contractors or potential contractors. Orders and contracts must be awarded on merit, by fair competition against other tenders, and no special favour should be shown to businesses run by, for example, friends, partners or relatives in the tendering process.

Members who engage or supervise contractors or have any other official relationship with contractors and have previously had or currently have a relationship in a private or domestic capacity with contractors, should declare that relationship.

This information should be given using a copy of the form Register of Board Member' Interests and also declared at the beginning of relevant meetings.

### **5.4 The procedure**

- 1) Any Member having an interest (which shall include interests of Family members) in any arrangement between the Company and another person or body shall disclose that interest to the meeting before the matter is discussed by the Board / Committee. Unless the interest is of the type specified in Paragraphs (2) and (3) the Member concerned shall not remain present during the discussion of that item unless requested to do so by the remaining members of the Board / Committee. Unless permitted by Paragraphs (2) and (3) the Member concerned may not vote on the matter in question, but no decision of the Board / Committee shall be invalidated by the subsequent discovery of an interest which should have been declared.
- 2) Provided the interest has been properly disclosed pursuant to Paragraph (1) a Member may remain present during the discussion and may vote on the matter under discussion where the interest arises because:
  - i. the Member is a Tenant Representative so long as the matter in question affects all or a substantial group of the Tenants; or
  - ii. the Member is a director or other officer of a company or body which is a parent, subsidiary or associate of the Company; or
  - iii. the Member is an official or elected member of any statutory body.
- 3) A Member shall not be treated as having an interest of which the Member has no knowledge and of which it is unreasonable to expect them to have knowledge.

## 6. Complaints against Board / Committee Members

This part of the Code provides:

- a transparent, fair and consistent process for dealing with allegations of misconduct by Members.
- a means to address inappropriate behaviour.
- a form of appeal for Members in relation to disciplinary action taken against them.

It is recognised that:

- challenge and differences of opinion are positive; and
- Members bring a variety of skills and views to the table.

This is healthy and can add materially to the quality of the debate and the outcomes from it. Accordingly, legitimate disagreement and respectful appropriate challenge of either the Executive or other Members are **not** grounds for action.

However, disagreement for the sake of it and inappropriate challenge are not behaviours that are expected of Members at Berneslai Homes.

The procedure set out below applies to all Members equally.

### 6.1 Grievances and Disputes

- a) It is hoped that Member disputes and grievances can be handled through candid discussions informally, outside of Board meetings.
- b) If a Member has a dispute with another Member that they cannot resolve informally or would like to raise a grievance, they may do so by contacting the Senior Independent Director (SID). If the grievance is regarding the SID, the Chair shall be contacted directly.
- c) The SID will arrange a formal meeting with the member to discuss the matter. The SID will be supported by the Chair, or the Chair of the Audit Committee if the grievance relates to the Chair. The Company Secretary and/or Chief Executive will provide governance advice, as appropriate.
- d) Following the meeting, a letter outlining the concerns and actions agreed will be provided by the SID to the member raising the grievance.
- e) If the matter is not successfully resolved, the SID will refer the matter and will appoint a Panel consisting of three Board Members (excluding those involved). The Panel will hear from both the SID and the Members concerned. Following the meeting, the SID, or appointed Chair, will send a letter to the Members raising the grievance outlining the concerns and the actions agreed. This action plan will be final with no further appeals or review.

- f) Should the recommendation of Panel be the removal of the members concerned, the Removal of Members procedure (7.9) will be followed.
- g) The process should conclude in a timely fashion.

## **6.2 Breaches**

Any allegations of breaches should be raised and dealt with promptly and meetings/decisions should not be unreasonably delayed. Any allegations of breaches should be dealt with consistently, particularly in terms of being classed as either an informal or formal process and actioned in line with the appropriate procedure set out in section 7.

## **6.3 Types of Breach**

Grounds where action may be taken include, but are not limited to, the following:

- a breach of this Code of Conduct.
- a breach of Berneslai Homes' equality and diversity policy.
- abuse of other Members of the Board / Committees, employees of Berneslai Homes or stakeholders to whom the company is responsible.
- failure to accept the principle of collective responsibility for Board / Committee decisions.
- making false statements.
- a breach of the duty of confidentiality.
- acting against the interests, aims and objectives of Berneslai Homes; and
- bringing Berneslai Homes into disrepute.

## **6.4 Taking Action**

Action may be taken under the procedure set out below (section 7) where:

- the matter is so serious as to warrant it; or
- the Member has failed to remedy a matter reasonably promptly after a request from the Chair of the Board to do so; or
- there have been a series of breaches of a lesser nature.

# **7. Disciplinary Procedure**

- 7.1 Any allegation of misconduct or complaint about a Member should be reported to the Chair of the Board (or the Chief Executive, if the complaint is about the Chair).
- 7.2 The Chair is to notify the Chief Executive promptly of any allegation or complaint to them.
- 7.3 The Chief Executive will, in the first instance, ask the complainant to provide written details of the breach. The Member against whom the allegation has been made will be provided with a copy of those details and be given the opportunity to respond.

7.4 The Chair, the Chief Executive and HR colleague as appropriate will agree whether informal or formal action should be taken depending on the severity and nature of the issue.

## **7.5 Informal Action**

- a) Instances of minor misconduct or failure to fulfil responsibilities will be dealt with informally by the Chair (or the SID and Chair of the Audit & Risk Committee if the breach is committed by the Chair) usually taking place through direct discussions at a meeting between the Member, Chair and Chief Executive as appropriate.
- b) Examples of minor misconduct could include poor timekeeping or attendance, minor breach of company policy / procedure, poor performance.
- c) Any recommended action such as training, coaching or additional support will be agreed. The discussion will refer to the relevant part of this Code, detail the breach it is alleged has occurred and will be confirmed in writing.
- d) The Member will be advised of potential consequences / sanctions if there is a failure to improve over a reasonable timeframe as appropriate to the matter.
- e) The Member will be notified in writing of the informal discussion and any action recommended / taken. The Company Secretary will be notified in order to record the minor breach and action taken.
- f) If, within six months following notification of action taken, it is believed that a further act of misconduct may have occurred, the procedure may be repeated or referred by the Chair and Chief Executive to a formal procedure.

## **7.6 Formal Action**

- a) If the matter cannot be resolved informally, the Chief Executive will then appoint an independent person to undertake an initial investigation.
- b) On completion of the initial investigation, the Chief Executive will appoint a Panel consisting of three Board Members (excluding the complainant). The Panel will hear the allegations made against the Member, review the findings of the initial investigation and allow the Member to state their case.
- c) Unless the Chair (or the Chief Executive, where the complaint is against the Chair) considers the circumstances are so serious to merit otherwise, no action will be taken against the Member until the Panel has heard the complaint.
- d) If, however, the Chair (or, where appropriate, the Chief Executive) does consider the circumstances are such to merit it, the Member may be suspended from office pending the Panel hearing.

e) Prior to any hearing, the Member will be:

- informed of the facts of the allegation at least ten working days in advance (unless a shorter period is agreed with them)
- advised of their right to be heard
- asked if they wish to be represented at the hearing, and if so, by whom
- given a copy of the findings from the initial investigation.

f) At the Panel hearing:

- the Chief Executive (or their representative) will present the findings of the initial investigation
- if appropriate, the evidence of witnesses will be given
- the Panel and the Member will have the opportunity to question the witnesses
- the Member will have the opportunity to present their case, calling witnesses (if appropriate) in defence of the allegations or complaint
- the Panel will have the opportunity to question the witnesses and/or the Member
- the Panel will ask the Chief Executive and the Member (or their respective representatives) to make any final submissions.

g) The Panel will then retire to consider the matter. This will be on the basis the burden of proof is the balance of probabilities.

h) The Panel will decide by a simple majority whether or not the allegation or complaint has been substantiated. In the event of a tie, the Chair of the Panel will have a casting vote.

i) If the allegation or complaint has been substantiated, the Panel will also decide the appropriate sanction or sanctions to impose.

j) This decision is to be made by a simple majority, with the Chair of the Panel having a casting vote in the event of a tie.

k) The Panel may either deliver its decision immediately following the hearing or postpone doing so to such later date as it may consider reasonable.

l) In either event, the Panel will ensure the Member is notified in writing of the outcome of its deliberations no more than three working days after having reached its decision. The written notification is to include details of the right of appeal to the Board.

To note: A Board Member is liable to disqualification under the Company Directors Disqualification Act 1986 if found to be unfit to act as a Board Member. Further details can be found at <https://www.gov.uk/government/publications/company-directors-disqualification-act-1986-and-failed-companies>

## **7.7 Sanctions**

If the Panel decides the allegation or complaint has been substantiated it will impose such sanction or sanctions set out below as it believes appropriate.

In reaching its decision concerning the sanction(s) to impose, the Panel will have regard to the gravity of the misconduct, any previously proven misconduct and the general record of conduct of the Member.

The sanctions that may be imposed by the Panel are:

- a single written warning
- a removal (or suspension for such period determined by the Panel) from any Committee or specific responsibility on the Board
- a suspension of Board / Committee remuneration for such period determined by the Panel
- a suspension from serving on the Board / Committee for such period determined by the Panel
- a recommendation to the Board for the Member to be removed from office
- such other sanction as the Panel may consider reasonably appropriate in the circumstances.

Any written warning will remain on the Member's record for such period as the Panel may determine.

If the sanction is a recommendation for removal, the matter will be referred to the Board for consideration in accordance with the terms of the Company's Memorandum and Articles from time to time.

## **7.8 Resignation**

The ideal outcome is that the Member recognises that the relationship with Berneslai Homes is not working out and the Chair and Member mutually agree that the Member will resign. The resignation will be reported to the next Board meeting and the Services Agreement will be terminated forthwith.

## **7.9 Removal**

If the above conciliatory approach does not work, then the following approach should be taken:

- The Chair will advise the Board of the misconduct issue with the Member concerned and that removal of the Member is the appropriate outcome for the Board.
- At the next Board meeting the Chair will propose removal of the Member from the Board, which will require a majority decision in line with the Memorandum and Articles of Association (Article 20).
- The Services Agreement will be terminated at this stage.

### **7.10 Notification of Decisions**

Notice of the result of disciplinary action against a Member will be given to the Council, as sole member of the Company, and the following:

- in the case of a Tenant Board Member, to the Tenant's Voice Panel
- in the case of a Council Board Member, to the Council's Chief Executive.

### **7.11 Appeals**

A Member has the right to appeal a decision of the Panel to the Board. The appeal must be put in writing and lodged with the Chief Executive within ten working days of the decision. The notice is to specify the decision being appealed against, and the grounds for the appeal.

The Chief Executive will fix a date for the appeal, notify the Member of it and "convene a meeting of the Board excluding the original hearing panel, the appellant and the complainant". The chair of the hearing panel will present the case and the appeal will be conducted, so far as possible, in accordance with the procedure set out in the paragraph above. The Board will have power to:

- reject the decision of the Panel and over-turn the sanction; or
- ratify the decision of the Panel and the sanction imposed; or
- ratify the decision of the Panel but impose either a different sanction (higher or lower) or no sanction at all.

Following the decision of the Board, the Member has no further right of appeal.

## **8. Acceptance of Code**

All Members must accept and sign a copy of this Code to show they have understood the responsibilities they are undertaking.

Signed:

Date:

<b>Report Title</b>	Risk Management Annual Report	<b>Confidential</b>	No
<b>Report Author</b>	Executive Director of Resources	<b>Report Status</b>	For Approval
<b>Report To</b>	Board 24 <sup>th</sup> July 2025	<b>Officer Contact Details</b>	Claire Denson, Risk & Governance Manager <a href="mailto:clairedenson@berneslaihomes.co.uk">clairedenson@berneslaihomes.co.uk</a>

<b>1. Executive Summary</b>	<p>1.1 To provide Board with a reflection on the risk management operations in 2024-25.</p> <p>1.2 This report incorporates the more detailed Quarterly Risk Update.</p> <p>The key points from the report are summarised below:</p> <p>1.3 There are currently 19 active strategic issues and concerns. The Summary of risks are attached (<b>Appendix A</b>).</p> <p>1.4 Audit and Risk Committee approved the report to Board at their meeting on 17 June 2025. They discussed the level of risk related to the Awaab's Law and agreed it remained a key area of concern. Committee were assured that Committee and Board would be kept updated around assurance and any issues that may arise in meeting the requirements. The Committee agreed they felt sufficiently informed about risk management.</p> <p>Customer Voice/Impact:</p> <p>1.5 The aim of the review of risks is to scrutinise the internal risk management system and therefore customer views are not sought for this report. A number of risks and mitigations arising from monitoring and reviewing our risks seek to enhance the customer voice.</p>
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<b>2. Recommendations</b>	<p>It is recommended that Board:</p> <ol style="list-style-type: none"> <li>i. Note the Risk Management Annual Report for 2024-25.</li> <li>ii. Note the Quarterly Risk Management update.</li> <li>iii. Review the <a href="#">linked risk registers</a> and note any updates.</li> <li>iv. Note the proposed 2025-26 Action Plan at Section 11</li> <li>v. Agree Board feel sufficiently informed about risk management.</li> </ol>
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### 3. Background

3.1 Effective risk management has the potential to impact on performance improvement, leading to:

- Improvement in service delivery.
- More efficient and effective use of resources.
- Improved Health and Safety.
- More resources focused on proactive rather than reactive measures.
- Assurance of effective internal controls and governance.

3.2 To achieve the ambitions, outcome and priorities set out in our Strategic Plan, it is essential that we understand, manage and communicate the range of risks that could threaten the organisation and our services. This annual report provides information on how Berneslai Homes managed its key risks in 2024-25.

3.3 The company has a duty to deliver services without causing harm or loss to the organisation and all it represents. It does this by ensuring there is an effective system of governance and risk management. This report sets out the adequate arrangements in place in 2024-25.

3.4 The Board and the Chief Executive have overall responsibility for risk management. The Risk and Governance Manager is responsible for the management and promotion of risk management within Berneslai Homes.

#### Current Position/Issues for Consideration

### 4. Risk Management Framework Strategy

4.1 Berneslai Homes recognises its responsibility to manage risk to successfully achieve its objectives through the Risk Management Framework Strategy. The Strategy underwent its formal 2-year review in 2024, and is due to September Board once it has received its annual refresh to ensure it remains dynamic.

4.2 The Risk Appetite Statement forms part of the Risk Management Framework Strategy. A zero-based review of the Risk Appetite was undertaken by Board on 23rd February 2023. Board review the Statement annually to ensure it remains fit for purpose, with the latest review taking place at their meeting on 27th May 2025. No changes were recommended by Board at the meeting. However, a full zero-based review was then undertaken by Board on 16 July

2025, with the results to be presented to Board for approval at the September Board with the Risk Management Framework Strategy.

4.3 The overall objective of the risk management framework is to ensure that Berneslai Homes has a clear and robust approach to managing risk. It provides a structure to integrate risk management into all aspects of Berneslai Homes activity, with the aim of protecting our assets, complying with all relevant laws and regulation, successfully achieving our Strategic Plan and creating a truly vibrant and resilient organisation.

4.4 Corporate Assurance undertook reviews of the risk management framework in 2022 and 2023 to ensure the new risk monitoring system was effectively embedded and received positive assurance.

## 5. Managing Risk

5.1 All risk and action owners are encouraged through regular communications to review their risks monthly. EMT and SMT also meet quarterly to review their Strategic and Operational risks, facilitated by the Risk and Governance Manager.

5.2 Quarterly Strategic Risk Updates are provided to Audit and Risk Committee and Board, where they are also encouraged to access the risk system to review the details of the Strategic and Operational Risks.

5.3 The last zero-based review of the Strategic risks was undertaken in September 2022, during which a brainstorming session provided an opportunity for everyone to discuss the significant areas of concern, which was attended by EMT and Board members. Each Service undertook a zero-based review of their day-to-day operational risks in Autumn 2024.

5.4 There are currently 19 active strategic risks. The Summary of Risks is attached (**Appendix A**), with full details of mitigations available to view on the risk system. This report focuses on the Strategic Risk Register, but the Committee are also asked to review and comment on the Operational and Fraud risks, all available to view on the [risk system](#). The summary of risks, final column, highlights and any changes to the risk headlines since the report to Board on 27th May 2025.

5.5 The top key risks are described below:

1. ***We do not have the right data to make informed decisions (Data Quality) and we do not use the data we have effectively (working outside systems)*** – This remains critical to reflect resources allocated to the data tool project.
2. ***Reduction in Customer Satisfaction*** – This remains a critical response risk due to the level of complaints and the resulting extension of the temporary resources to meet the demands.
3. ***The cost-of-living crisis and Welfare is impacting tenants and our communities*** - This remains a critical response risk. The high level of disrepair cases continues; social media interest remains high and the incidents of violence and aggression towards staff remains higher than usual.

4. ***The HRA does not cover requirements*** – This remains a critical response risk due to ongoing impacting factors such as regulatory changes and the repairs backlog. Mitigations to reduce spending and make savings are ongoing.
  5. ***Mould, Damp and Condensation*** – Due to the impact of Awaab's Law, the regulatory environment will continue to keep this risk of key concern as we implement the significant requirements of the regulation.
  6. ***Ability to deliver historical and in year Repairs and Maintenance works within current financial resources available*** – This remains a critical response risk whilst we are working towards meeting this challenge.
  7. ***Vulnerability of in-house and third-party systems to cyber-attack*** – Whilst the Status and Impact remain 'Potential', the multiple successful cyber-attacks against large commercial organisations raises the concern.
- 5.6 A new risk was added by EMT as a result of the ***changing political landscape***. Mitigations centre around keeping up with what is happening at a national level politically and ensuring we can support the Council at a local level.
- 5.7 All Risks are linked to a number of key reporting areas in the risk register, including: the Sector Risk Profile, the Risk Appetite, Strategic Priorities, Corporate Ambitions, and Governance Domain (Assurance framework). In Appendix A, the headline strategic risks have been visibly linked to the Risk Appetite and the Assurance Framework.
- 5.8 The Strategic risks follow the evolving level of concern, identifying where we are less, more or same concerned about a particular risk since the previous review.
- 5.9 EMT monitors the 'critical response' issues and concerns from each of the operational registers as part of the risk reporting to EMT. The process involves evaluating the critical response assessment and deciding whether it has been assessed correctly. If it remains critical, EMT will decide whether to accept the concern or whether to recommend further controls to mitigate it. The last review was undertaken on 4th March 2025.
- 5.10 When looking at new initiatives, projects and programmes, it is important that a risk register is in place, such as: the PRIP contract register monitored by Berneslai Homes and Wates managers, the Stores project monitored by the Project team, and Cyber Security, monitored by the Applications Lead. The Transformation Board reviews all new projects, which must include the assessment of risk. The Risk and Governance Manager attends the Transformation Board.
- 5.11 The Contingent liabilities register, linked [Appendix B](#), captures and monitors risks which have the potential to generate significant (£100K+) financial liabilities for Berneslai Homes which are dependent upon future events. The register has recently been reviewed and updated.
6. Raising Awareness
- 6.1 Risk Champions have received training on use of the Risk system, which continues as required. Ongoing communications are also in place with risk and action owners to ensure they continue to monitor and update their risks and actions regularly.

- 6.2 Raising awareness of risk and the various procedures to mitigate risk have continued through advice and guidance, training and company-wide communications, such as surveys, Team Brief and key messages and health and safety training.
- 6.3 Risk management is included within the Corporate Induction, including Fraud Awareness, Health and Safety, Data Protection and Fire Safety.
- 6.4 Risk management is evaluated as part of the Core Competencies for leaders process and is included on Job Descriptions, where leaders are required to 'proactively manage and monitor risks' ensuring they 'fully risk assess complex decisions and issues and take well considered risks'.
7. Assurance
- 7.1 SMT and EMT provide an Annual Assurance Statement on the effectiveness of risk management processes and internal controls within their service areas as part of the Annual Governance Statement report. This report is presented to Audit and Risk Committee and Board alongside the annual accounts. The [linked annual action plan](#) is monitored by Audit Committee.
- 7.2 Assurance on the effectiveness of risk management processes and controls over key strategic and operational risks is also provided by the work of BMBC Corporate Assurance and External Audit. BMBC Corporate Assurance directly link key risks to each internal audit review.
- 7.3 EMT monitors the implementation of the audit recommendations with monthly reports to EMT and quarterly to Audit and Risk Committee.
8. Governance
- 8.1 Risk is a key consideration throughout the planning process, when preparing financial forecasts, allocating resources during the budget process and determining the earmarking of any unallocated reserves.
- 8.2 Risk is a key focus of the Transformation Board, with the business case template containing a section on risks, which are then discussed when evaluating the project.
- 8.3 The monitoring of the company's approach to risk is delegated to the Audit and Risk Committee, as stated in their terms of reference, on behalf of the Board. The Board and Committee report format includes a mandatory section on risk implications.
9. Fraud and Corruption
- 9.1 The review of the Anti-Fraud and Corruption Policy documents is undertaken two-yearly in line with the Annual Governance Statement. These are due for review in 2026.

- 9.2 BMBC Corporate Assurance provided 6-monthly fraud activity updates to Audit and Risk Committee during 24-25. However, at the Audit and Risk Committee meeting held on 3rd April, Committee were satisfied with the internal controls in place with regards to fraud and agreed to move to an annual report moving forward.
- 9.3 We have an ongoing programme of fraud awareness, with the latest round of training for EMT, Leaders and staff taking place in March 2025. Mandatory fraud e-learning is an induction requirement.
- 9.4 The Fraud Issues and Concerns register is reviewed regularly by relevant managers and is highlighted as part of the quarterly risk update to Audit and Risk Committee.

## 10. Health and Safety

- 10.1 The ongoing two-yearly reviews of each service by BMBC on the company's employee health and safety management systems have continued throughout 2024-25 with positive results of 96% (Property Services Repairs Team) and 100% (Customer Services, Engagement and Lettings).
- 10.2 The two-yearly employee health and safety management questionnaires to managers were undertaken in 2024. There were no areas of concern raised, with actions centred around ongoing communications to ensure staff remain aware of policies and processes.
- 10.3 A mandatory Health and Safety eLearning module is undertaken during the first 3 weeks of commencement at BH to ensure Health and Safety starts as a priority for all staff.
- 10.4 Lone working is a key risk at Berneslai Homes, with a large proportion of employees working out on the estates. We introduced lone worker fobs in 2022 and a survey was undertaken in 2024 to evaluate employee perceptions of lone working and the impact of the fobs. A review of the fob procedure was also undertaken by Corporate Assurance in April 2025, which received limited assurance due to managers not undertaking the procedure consistently. Resulting actions plans will be monitored by EMT as part of the monthly AMA and quarterly health and safety reporting.

## Emergency Planning

- 10.5 Berneslai Homes works in collaboration with Barnsley Council as part of our Resilience and Continuity arrangements. We also have our own Corporate Resilience and Continuity Plans, which detail critical services provided to our customers, which are reviewed at least annually. The plans continue to provide assurance that we have appropriate mitigations in place to minimise any impact to residents in the event of a major incident and ensuring that appropriate support is in place. The plans have continued to evolve throughout 2024-25 in continuing to provide essential and critical services to customers throughout incidents.

- 10.6 The Corporate Emergency Response Plan (reviewed Dec-24) and the service Business Continuity Plans (reviewed Feb-25) are reviewed annually and as required. They are available to view on the dedicated [Emergency Planning intranet page](#).
- 10.7 Named officers on the Emergency Plan attended a session with BMBC on the 6th March 2024 focusing on roles and responsibilities within the plan. The aim of the session was to discuss how Berneslai Homes responds to different types of emergencies, with and without BMBC, what went well and where we could develop further.
- 10.8 A Gas Explosion scenario session was undertaken with key managers on the 22nd January 2025, based on a real-life scenario. Feedback and actions were provided to all attendees following the session.
- 10.9 The service-level Business Continuity Plans were audited by BMBC Corporate Assurance in March 2025. The review concluded that the Company's business continuity planning arrangements were robust, effective and enabled the key business functions to continue to operate in the event of a disaster or emergency. There was one recommendation to ensure that all medium-high assessed risks have actions listed in the plan.

## 11. Action Plans

- 11.1 There are two outstanding actions from the 2024-25 Risk Management report, delayed due to discussions around a full review of the Risk Management Framework and the engagement of an external consultant.

1. Zero-based review of the Strategic Risks.
2. Zero-based review of the Board Risk Appetite.

- 11.2 These actions have therefore been added to the 2025-26 action plan:

<b>Actions</b>	<b>Target</b>	<b>Responsible</b>
Zero-base review of strategic risks and risk appetite	September 2025	Risk and Governance Manager
Review of the risk management framework.	March 2026	Risk and Governance Manager

## 12. Customer Voice/Impact

- 12.1 The aim of the review of risks is to scrutinise the internal risk management system and therefore customer views are not sought for this report. A number of risks and mitigations arising from monitoring and reviewing our risks seek to enhance the customer voice.

## 13. Risk and Risk Appetite

- 13.1 There is a risk that the Board, Audit and Risk Committee and management do not appreciate Berneslai Homes' key vulnerabilities and take appropriate action to manage them. The Risk Management Framework ensures that effective mechanisms are in place for the management of risk.

- 13.2 Therefore, where required these controls are monitored via such as:
- The Strategic and Operational Risk Register reviews.
  - As part of the Annual Governance Statement.
  - Specific reporting to Board, such as financial reports, compliance reports, etc.
  - Performance monitoring.
- 13.3 Strategic Risk Appetite – Risk Adverse: We aim to comply with all relevant legislation and have zero tolerance for regulatory compliance issues. Greater oversight of Agreed Management Actions from Corporate Assurance reports has recently been implemented. This should ensure timely action is taken to resolve issues highlighted by Corporate Assurance. We have zero tolerance for failure to meet deadlines from Regulators.
14. Strategic Alignment
- 14.1 The report aligns to the requirements from BMBC (Barnsley Metropolitan Borough Council) for the effective governance of Berneslai Homes. Good risk management links to the successful achievement of all our ambitions:
- Hearing Customers.
  - Keeping Tenants Safe.
  - Growth of Homes and Services.
  - Technology and Innovation.
  - Employment and Training.
  - Zero Carbon.
15. Data Privacy
- 15.1 There are no data privacy implications arising from this report. No personal data has been processed and no DPIA (Data Protection Impact Assessments) is required.
16. Consumer Regulatory Standards
- 16.1 This report relates to the Transparency, Influence and Accountability Standard: Registered providers must collect and provide information to support effective scrutiny by tenants of their landlord's performance in delivering landlord services.
17. Other Statutory/Regulatory Compliance
- 17.1 To provide Board with assurance around our risk management arrangements.
18. Financial
- 18.1 There are no financial implications arising directly from this report.
19. Human Resources and Equality, Diversity and Inclusion
- 19.1 Human Resources Policies and Procedures, including Equality, Diversity and Inclusion are key internal controls and seek to mitigate any associated risks.

- 20. Sustainability Implications
- 20.1 No specific zero carbon implications from this report.
- 21. Associated Background Papers on Decision Time
- 21.1 Live Strategic, Operational, Project and Fraud Issues and Concerns registers – [risk system on SharePoint](#).
- 21.2 [RSH Sector Risk Profile 2024](#)
- 21.3 [Annual Governance Statement Action plan 24-25](#)
- 22. Appendices
- 22.1 Appendix A - Strategic Risks Summary
- 22.2 [Appendix B - Contingent liabilities register](#) - (not attached confidential)



Appendix A

Title of Risk	Description	Assessment	Risk Owner	Status	Impact	Response Rating	Level of Concern since previous review	Risk Appetite	Governance Domain	Changes since Board on 27 May
We do not have the right data to make informed decisions (Data Quality) and we do not use the data we have effectively (working outside systems)	<ul style="list-style-type: none"><li>•Sufficient resources to implement data strategy and action plan</li><li>•Nlot meeting customer expectations - Poor reputation and satisfaction.</li><li>•Data regarding both customers and assets.</li></ul> 24.11.23: Less concerned as actions being undertaken to mitigate 04.04.24: Increased concerned due to delays in Phase 2 or NEC which will impact CRM and Assets. 15.07.24: BMBC CRM to be implemented 05.09.24 - updated impact to actual as we can't deliver the services in the most efficient way without the right data 17.12.24: Moved to critical to reflect resources allocating to the project.	We do not currently have fully effective data quality systems in place regarding customers and assets we don't have a clear plan on the data we hold and how we should be using it. Unsure of data maturity Still have huge gaps in data people don't take ownership of their responsibility for data - it's everyone's responsibility	Executive Director of Resources	Actual	Actual	Critical	Same Concerned >	Averse	Performance Management and Data Quality	No changes
Reduction in customer satisfaction	<ul style="list-style-type: none"><li>•Increasing demands from customers – they require increasing support</li><li>•Increasing regulatory demands</li><li>•Reduction in funding – more with less</li><li>•Contact Centre performance – we could miss significant issues</li><li>•Customers unable to access repairs services online effectively</li></ul> 22.11.23: Housmark mid-year TSM comparison - places BH mid quartile on most measures. This could change for year end as some of participants have rolling TSM measures. 04.04.24: Increased concern due to Backlog of works has increased complaints and reduced customer satisfaction 15.07.24: The TSM results have shown a reduction in customer satisfaction. 24.12.2024 Phase 2 of the TSM survey now closed. Results due Jan 2025 13.1.25 - moved to same concerned as phase 2 results show improvement 31.03.25: Approved the TSM method and time table for 25-26.	<ul style="list-style-type: none"><li>•Cost of living</li><li>•Planned repairs and reduced budgets</li><li>•Regulatory intervention</li></ul>	Chief Executive	Actual	Actual	Critical	Same Concerned >	Averse	Performance Management and Data Quality	No changes
The cost-of-living crisis and welfare reform is impacting tenants and our communities	<ul style="list-style-type: none"><li>•Condition of homes – changing behaviours</li><li>•Vulnerable tenants – changing behaviours</li><li>•Rent arrears, govt policy,</li><li>•Less tenant turnover – reduction in void levels</li><li>•Disrepair cases – legal costs – increasing</li><li>•Communal heating systems - affordability</li><li>•Unpredictability of tenant behaviour - increased violence and aggression towards staff, chaotic lifestyles</li><li>•Sustainability of estates – increased ASB, crime, DV</li><li>•Welfare reform announced today to reduce benefits bill.</li></ul> Opportunity: <ul style="list-style-type: none"><li>•Tenants may want to move to smaller accommodation, which will release family-sized properties.</li></ul> 09.07.24 - increase in disrepair cases. 18.03.25: Welfare reform announced today to reduce benefits bill. 16.04.25 : Revisions to UC Fair Repayment Rate Regulations come into force at end of April reducing overall deductions cap from 25% to 15% and giving priority to child maintenance payments over rent and service charges.	<ul style="list-style-type: none"><li>•Cost of Living</li><li>•Reduced funding</li><li>•More support needs</li></ul> 16.01.25: High Court ruled that DWP acted unlawfully by presenting benefit assessment reforms as a way to support disabled people into work, without making clear that cost savings was a “primary rationale” for the proposals.	Exec Dir Customer & Estate Services and Exec Dir of Property Services	Actual	Actual	Critical	Same Concerned >	Averse	Asset Management (Estates and non-IT equipment)	No changes

Title of Risk	Description	Assessment	Risk Owner	Status	Impact	Response Rating	Level of Concern since previous review	Risk Appetite	Governance Domain	Changes since Board on 27 May
The HRA does not cover service requirements	<ul style="list-style-type: none"><li>•Rent caps, inflation, CPI, use of reserves, management fee</li><li>•Tenant financial hardship</li><li>•Insufficient resources to support vulnerable customers</li><li>•Pensions – impact on balance sheet</li><li>•Reduction in funding for repairs and investment in stock – PRIP - impact on CS profit – reputation</li><li>•Impact on Strategic plan - resources to deliver the priorities - reputation with BMBC</li><li>•Relationship with the Council is crucial</li><li>•Reliant on annual reserves to bridge the gap between management fee and resources to deliver services contract with BMBC - gap of approx £500k. Reliant on CS profits. Need the turnover guaranteed at £20m.</li></ul> 14.06.23: Concerned increased. Deficit for 24-25 is nearly £2m with another £2 the year after. Increasing requirements for both the zero carbon and the unknown expectations of stock condition. Irrespective of further changes inc Decent Homes. 22.11.23: Concern remains increased. 04.04.24 - regulatory changes putting increased expectations on HRA. 13.01.25 - Increased pressure on HRA due to increase in employer NI contributions - partners inc.	<ul style="list-style-type: none"><li>•Insufficient funds in HRA and longer-term financial plan due to economic climate putting increased pressure on budgets and reducing stock numbers reducing income base.</li><li>•There was a financial overspend on Repairs and Maintenance budgets for 21-22.</li><li>•Increasing number of tenants on Universal Credit reducing rental income</li></ul> 16.01.25: High Court ruled that DWP acted unlawfully by presenting benefit assessment reforms as a way to support disabled people into work, without making clear that cost savings was a “primary rationale” for the proposals.	Executive Director of Resources	Actual	Actual	Critical	Same Concerned >	Averse	Financial Management	No changes
Mould, damp and condensation	Are we keeping tenants safe by ensuring that damp, mould and condensation are not a health risk to tenants?  04.03.25: Awaab's Law will come into force from October 2025, ensuring social landlords have to investigate and fix dangerous damp and mould within a set amount of time.	Damp, mould and condensation have become a priority risk for all landlords, especially due to tenants being unable to afford to heat their homes due to the cost of living crisis.	Executive Director of Property Services	Actual	Actual	Critical	Same Concerned >	Averse	Health and Safety	No changes
Ability to deliver historical & in year R&M works within current financial resources available	Ability to deliver historical & in year R&M works within current financial resources available. We have an accumulated backlog of planned works that we are working with contract delivery partners to try and clear throughout the 2024-25 financial year. With backlogs of work brings various risks for the organisation.	A large increase in demand and restricted funding have been the key issues: Increase in repair requests (in year) Historical Repairs (Backlogged) Recent new Consumer Standards placing additional pressure on Landlords to undertake repairs Pending Decent Homes 2 which 'may' incorporate repairs (such as plastering etc) Workshops taken place 6/9/23 with contract delivery partners to assist with the delivery of backlogged repairs. Delivery plan due 20/9/23	Executive Director of Property Services	Actual	Actual	Critical	Same Concerned >	Hungry	Regulatory Compliance	No changes
Vulnerability of in-house and third party systems to cyber attack	<ul style="list-style-type: none"><li>•As vulnerability maybe exploited leading to cyber-attack of in-house and/or third-party systems impacting confidentiality, integrity or availability of data and information.</li><li>•This could lead to, amongst others, financial loss, fines, regulator intervention, inability to deliver services, reputational.</li><li>•As a public sector organisation, we are more at risk from the current situation with Russia and Ukraine and the increased cyber-attacks in general. No evidence of increased attacks currently.</li></ul> 03.12.24: Including the risk of AI - There is a risk that the information produced by AI is not accurate and not relevant (eg using the wrong law - US rather than UK). 29.05.25: Multiple cyber attacks on large commercial orgs raises the concern.	<ul style="list-style-type: none"><li>•Cyber-attacks are increasing in number, the organisation is becoming more agile, there is an increasing volume of data held on IT systems and the systems are becoming more complex.</li><li>•Legislation in place which means risk management is crucial.</li></ul> 24.11.23: More news of cyber attack risks due to current economic and political crisis.	Executive Director of Resources	Potential	Potential	Critical	More Concerned ^	Averse	Information Governance/ Security	Multiple cyber attacks on large commercial orgs raises the concern.

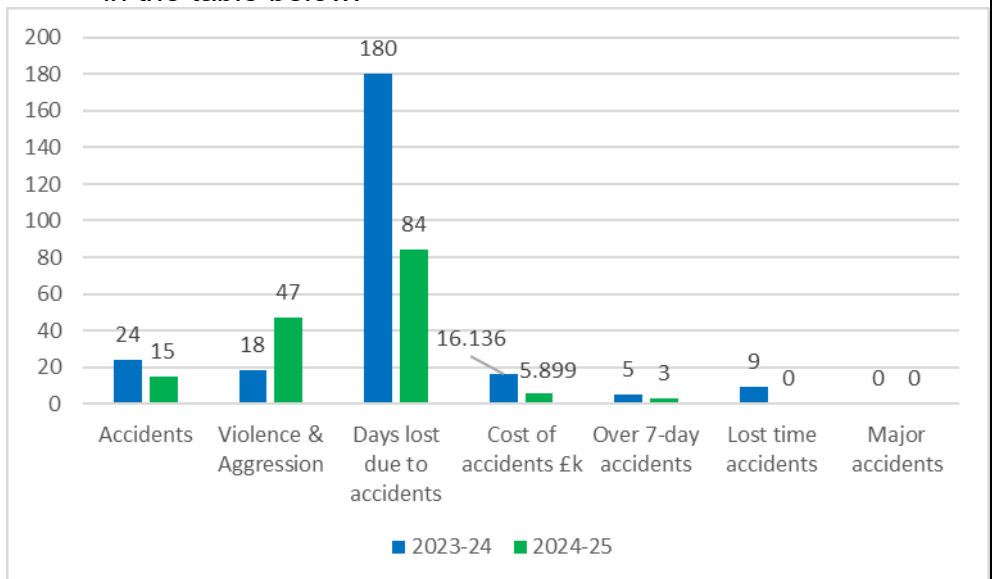
Title of Risk	Description	Assessment	Risk Owner	Status	Impact	Response Rating	Level of Concern since previous review	Risk Appetite	Governance Domain	Changes since Board on 27 May
Business continuity	<ul style="list-style-type: none"> <li>Are we prepared for industrial action / civil unrest, power cuts, services going down, another virus outbreak?</li> <li>Are we prepared for a cyber attack</li> <li>Are we prepared for climate change – heat, fires, floods</li> <li>Impact on business, staff and tenants</li> </ul> 22.11.23: Increased response level due to increased risks e.g. cyber attacks in the sector and recent floods.	Are we prepared for potential impact of disaster situations to operations? Do we need to consider loss of internet as the frequency has increased?	Chief Executive	Potential	Potential	Critical	Same Concerned >	Averse	Business Continuity and Emergency Resilience	No changes
Reputation and perception of BH	How do we work with Cllrs and the portfolio holder to enhance reputation? New Service director - working with How do we work with Chronicle / press?	13.01.25: recent social media and media exposure.	Chief Executive	Actual	Actual	Important	More Concerned A	Cautious	Partnership, Relationship and Collaboration Governance	Increased concern level - In the run up to the next local elections, increased scrutiny and therefore increased the concern level.
The zero-carbon agenda is not sufficiently funded or skilled	<ul style="list-style-type: none"> <li>Questions around the sustainability of some estates – types of homes / energy efficiency</li> <li>Difficult to maximise funding opportunities – essential partnership working with BMBC</li> <li>Requires upskilling of staff – technical skills are more expensive</li> <li>Change in behaviour required of staff and tenants</li> </ul> 17.07.24: BMBC looking to add in future business plan. 13.01.25 - Joint work with BMBC to look at overall 30-year business plan	<ul style="list-style-type: none"> <li>Strategic priority in line with local and national government</li> </ul>	Executive Director of Property Services	Actual	Actual	Important	Same Concerned >	Cautious	Asset Management (Estates and non-IT equipment)	No changes
High value claim as a result of Private management service	23.01.23: Legal proceedings issued against BH re accident in a property management by BH on behalf of a private landlord (2019). 02.12.24: Judgement found in BH favour 07/11/24 02.12.24: More concerned as Claimant has applied to the Court to appeal 13.01.25 - reduced to important as potential costs reduced	23.01.23: Legal proceedings issued against BH re accident in a property management by BH on behalf of a private landlord (2019).	Executive Director of Property Services	Actual	Actual	Important	Same Concerned >	Cautious	Regulatory Compliance	No changes
That we do not effectively embed a culture that acknowledges, promotes and celebrates the diverse talents and backgrounds of staff and tenants	<ul style="list-style-type: none"> <li>We need to ensure that equality, diversity and inclusion is fully embedded and part of the DNA of Berneslai Homes.</li> <li>We need to ensure it is owned by all and that we recognise differences and take these into account to provide an effective and appropriate service to all our customers (internal and external).</li> </ul> 01.03.24 Review date changed as on going risk 05.09.24 - the risk has been updated to status/actual, due to feedback from the Customer First training, which includes some behaviour and attitude concerns.	<ul style="list-style-type: none"> <li>Due to staffing resources, ED&amp;I development lost it momentum. Following HDN assessment, ED&amp;I was developed, launched and in the process of being fully embedded across the organisation.</li> </ul> 17.11.23- New OD in post from 1.8.23- ED&I development back in progress.	Executive Director of Resources	Actual	Potential	Important	Same Concerned >	Averse	Workforce/ HR Management	No changes
Gap and lack of recent reviews in policies and procedures, leaves us at risk with the Housing Ombudsman and the Social Housing Regulator	Review of AM policy and procedures has identified some significant gaps in relation to the service area. Customer Services Team currently carrying out, organisational exercise. 26.06.23 - Risk moved from Operational Asset Management Risk to Corporate Risk responsible officer Head of Customer Services. This is due to the level of Policies and Procedures that have gaps throughout Property Services and Customer & Estate Services. 15.07.24 - dedicated post has become vacant - gap in resources. 31/10/24 - C1 from Regulatory Inspection highlighting good policies and procedures. 13.01.25 - No formal framework to track updates action - joint EMT SMT session - latest tracking spreadsheet and consider how it will be monitored. 29.05.25: Spotlight report published today (repairing trust)	Review of AM policy and procedures has identified some significant gaps in relation to the service area.	Executive Director of Corporate Services	Actual	Potential	Important	Same Concerned >	Averse	Governance / Decision making Arrangements	No changes

Title of Risk	Description	Assessment	Risk Owner	Status	Impact	Response Rating	Level of Concern since previous review	Risk Appetite	Governance Domain	Changes since Board on 27 May
Lack of Active Asset Management of Stock	02/10/2024: Berneslai Homes do not currently practice active asset management for the Council Stock. Whilst we have a asset management system (PIMSS) for housing asset stock data, we do not have full understanding of the performance of an asset from a social, economic and environmental basis. To ensure effective use of the stock, it is necessary to develop and implement an agreed approach, in conjunction with the use of a suitable platform (NEC Phase 2 Assets Module) to support specific asset reviews (stock option appraisal) in the future. This will allow BH to be informed decision making persepctive and for 30 yer business and investment planning.	02/10/2024: Berneslai Homes does not currently have an assets assessment framework for monitoring performance of the Council stock. NEC Phase 2 and impelmentation of the assets module will provide this function going forward.	Executive Director of Property Services	Actual	Potential	Important	Same Concerned >	Averse	Asset Management (Estates and non-IT equipment)	No changes
We don't have the appropriately skilled and motivated workforce to deliver services effectively which meet statutory and regulatory requirements.	Risk added - 17.01.25 That we don't have appropriate resourcing levels in the workforce Workforce resilience - motivation, wellbeing (sickness absence) Workforce skills - competencies Impact - recruitment and retention - increased workload 18.03.25: Restructure creates uncertainty which may have an impact - loss of key staff	Issues with recruitment and retention Sickness levels / mental wellbeing Impending competency and conduct standard Employee feedback Increased turnover	Executive Director of Resources	Potential	Actual	Important	Same Concerned >	Averse	Workforce/HR Management	No changes
Not meeting the changes required from the EPC Reform	Govt has announced consultation on energy performance on building framework. This reform will impact how EPCs are developed based on proposed changes to methodology. This will potentially impact the EPC data we hold for our Council stock and future plans in relation to the sustainability agenda.	Govt changes re EPC.	Executive Director of Property Services	Potential	Potential	Important	Same Concerned >	Averse	Regulatory Compliance	
Failure to meet increasing and changing regulatory requirements	•Statutory requirements in respect of property/assets including Building Safety, decent homes. •Reputational concerns due to new Regulatory approaches by the Housing Ombudsman and the Regulator for Social Housing - TSMs, neighbourhood agenda / investment in neighbourhoods •We do not have the most effective software to do this. •The Smoke and Carbon Monoxide Alarm (Amendment) Regulations 2022 come into force on 1 October 2022. - New Consumer standards will be reviewed in 2023 inc new professionalism agenda (monitored as a dedicated operational risk in Corporate Services) - Corporate Assurance TSM validation report provided Limited Assurance - October 2024. Action 6 updated 18.03.25: Increased concern due to confirmed day of Awaabs law Oct-25 and uncertainty around implications. 29.05.25: Building safety regulator - the process of going through gateways is taking a lot longer than any org expected. Therefore delaying fire safety works in buildings.	A change and strengthening in regulatory approach is being implemented nationally, including the professionalism agenda (CIH). New regulations expected in early 2025 on Awaab's Law (Oct-25), Decent Homes 2 and introduction on competency and conduct standard 27.02.25: Grenfell - 49 of the recommendations are being “accepted in full” by the government and other responsible organisations.	Chief Executive	Potential	Potential	Important	Same Concerned >	Averse	Regulatory Compliance	Whilst it was more concerning at the last review, it has moved to 'same concerned' as the concern has not continued to increase.
The health and Safety of staff	Split the risk - The health and safety of tenants and staff on 02.05.25. •Statutory H&S requirements - Safe working practices to keep staff safe •Failure to implement policies and procedures and associated communications / training. •One working / personal safety / violence and aggression 04.03.25: Ongoing increase in reports of violence and aggression by staff.	Failure to comply with H&S legislation could result in injury or death and associated business risks.	Executive Director of Resources	Potential	Potential	Important	Same Concerned >	Averse	Health and Safety	No changes
The political landscape	Added 29/05/2025: keeping up with what is happening at a national level politically and ensuring we are able to support the Council at a local level.	Changing political landscape.	Chief Executive	Actual	Potential	Requires Attention	Same Concerned >	Averse	Governance / Decision making Arrangements	New risk added on 29.05.25 due to changing political landscape

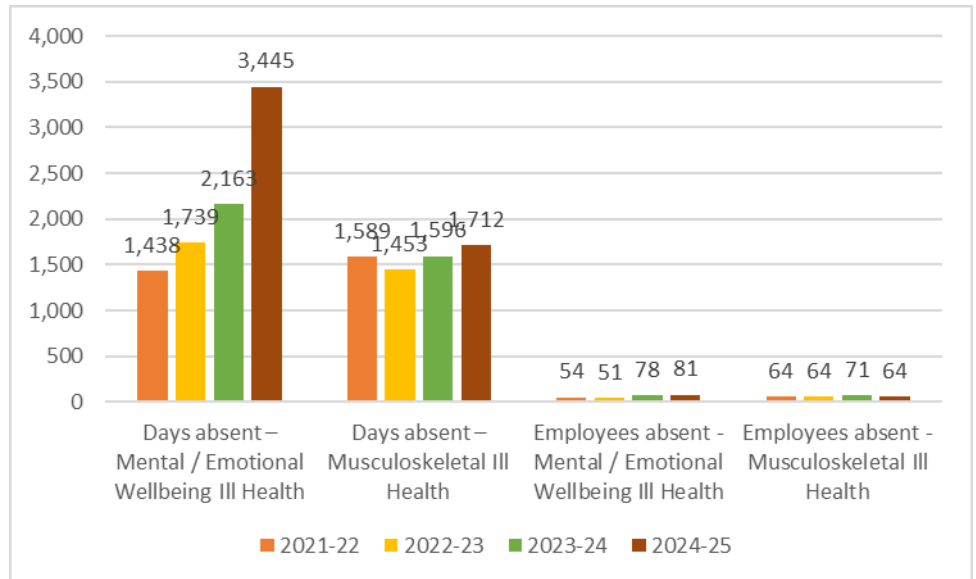
<b>Report Title</b>	<b>Employee Health and Safety Performance 2024 to 2025</b>	<b>Confidential</b>	No
<b>Report Author</b>	<b>Chief Executive</b>	<b>Report Status</b>	For Approval
<b>Report To</b>	<b>Board 24/7/2025</b>	<b>Officer Contact Details</b>	<a href="mailto:ian.bell@berneslaihomes.co.uk">ian.bell@berneslaihomes.co.uk</a>

## 1. Executive Summary

- 1.1 To inform members of the Board of the performance for 2024-25 with regards to Employee Health and Safety in Berneslai Homes.
- 1.2 To present a complete overview of the year; comparing annual data to identify and question trends to ensure a robust monitoring regime:
- Health and Safety Inspections and Audits continue to take place and feedback positive results.
  - The health and safety Policy remains dynamic and useful.
  - The health and safety Management Groups continue to monitor employee health and Safety including reviewing policies and procedures.
- 1.3 Key points from the 2024-25 performance indicators identified in the table below:



1.4 Key points from the 2024-25 ill health performance indicators identified in the table below:



1.5 Targets for 2025-26 – An annual programme of review is undertaken for all health and safety documents, including:

Action	Target
Annual review of Health and Safety Policy	Jul-25
Occupation Group Risk Assessments – Annual Review	Jun-25
Health and Safety Management procedures – Annual Review	Jul-25
Task Based Risk Assessments and associated safe systems of work – Annual Review	Jul-25

## 2. Recommendations

Board is requested to:

- I. Note the performance of the health and safety systems and procedures that are operational within the company.
- II. Approve and sign the refreshed 2025-2026 Health and Safety Policy.
- III. Approve the areas of further development and monitoring identified at Section 10.

## 3. Background

- 3.1 Effective health and safety management enables the company to meet its legal, moral and economic obligations.

- 3.2 In order for Berneslai Homes to monitor and measure employee health and safety performance and prioritise areas of health and safety risk, an annual health and safety review is performed.
- 3.3 Quarterly health and safety updates to Executive Management Team (EMT) examine the detail of employee health and safety performance, whilst the annual performance report presents a complete overview of the year; comparing annual data to identify and question trends to ensure a robust monitoring regime.

#### Current Position /Issues for Consideration

#### 4. Health and Safety Inspections and Audits

- 4.1 The BMBC Health, Safety and Emergency Resilience Service provides the statutory 'Competent Person' service that imparts comprehensive health and safety advice and assistance to Berneslai Homes through a Service Level Agreement.
- 4.2 As part of this service, BMBC undertakes two yearly audits of the management of health and safety, which requires managers to assess their compliance with health and safety issues. During 2024-25, the following key services were audited:
- Repairs team – 96%
  - Customer Services and lettings – 100%
- 4.3 The two-yearly Management of Health and Safety questionnaires were undertaken by managers in June 2024. The review raised no concerns and any actions were implemented.
- 4.4 BMBC Corporate Assurance team audited the Orbis lone worker system in April 2025. The audit was carried out to ensure that the Orbis System is robust, contains accurate information and operates efficiently to provide for the safety of Berneslai Homes employees. The report received limited assurance and highlighted a number of key findings which require action. Agreed Management Actions (AMA's) have been drawn up and are in the process of being implemented. The report will be considered by the Audit & Risk Committee in August 2025.

#### Emergency Planning and Business Continuity

- 4.5 Berneslai Homes works in collaboration with Barnsley Council as part of our Resilience and Continuity arrangements. We also have our own corporate Resilience and Continuity Plans, which detail critical services provided to our customers, which are reviewed at least annually. The plans continue to provide assurance that we have appropriate mitigations in place to minimise any impact to residents in the event of a major incident and ensuring that appropriate support is in place. The plans have continued to evolve throughout 2024-25 in continuing to provide essential and critical services to customers throughout incidents.

- 4.6 The Corporate Emergency Response Plan (reviewed Dec-24) and the service Business Continuity Plans (reviewed Feb-25) are reviewed annually and as required. They are available to view on the dedicated [Emergency Planning intranet page](#).
- 4.7 A gas explosion scenario session was undertaken with key managers on 22<sup>nd</sup> January 2025, based on a real-life scenario. Feedback and actions were provided to all attendees following the session.
- 4.8 The service-level Business Continuity Plans were audited by BMBC Corporate Assurance in March 2025. The review concluded that the company's business continuity planning arrangements were robust, effective and enabled the key business functions to continue to operate in the event of a disaster or emergency. There was one recommendation to ensure that all medium-high assessed risks have actions listed in the plan.

#### Repairs Site Inspections

- 4.9 Health and safety inspections are carried out on a regular basis by the Health and Safety Manager, Trade Union representatives and Site Operations Managers. The BMBC Health and Safety Service attend on an ad-hoc basis. Overall standards are excellent with only minor recommendations being made. Site Operations Managers also carry out daily observations and complete weekly inspection sheets where required.
- 4.9.1 Regular health and safety updates are provided to all staff along with site safety being a standard item on craft toolbox talks.
- 4.9.2 Managers review contractor risk assessments and safe systems of work prior to commencement of the contract; these are retained in the health and safety file on site where applicable.

#### 5. Health and Safety Policy and Guidance

- 5.1 Berneslai Homes' Corporate Employee Health and Safety Policy 2024-26 has been reviewed in line with this report to ensure it is fit for purpose and compliant with current Health and Safety legislation. No notable changes were made. The Policy sets a clear direction for the organisation to follow, details responsibilities and provides a framework for continuous improvement. Board is asked to approve and sign the Policy (**Appendix A**).
- 5.2 The health and safety management procedures are reviewed annually and as required to ensure they are in line with current procedure. These are available online.
- 5.3 The Occupation Group risk assessments, which assess the risks for each job role, task-based risk assessments and associated safe systems are reviewed annually and as required. These are available online.



- 5.4 Lone working policies and procedures are in place and regularly monitored and updated. The lone worker device is provided to frontline lone workers, enabling staff's whereabouts to be available to provide assistance in an emergency.

6. Health and Safety Groups

- 6.1 Berneslai Homes operates two health and safety management groups. The Property Services Repairs Team group meets on a bi-monthly basis and the Corporate/Housing Management group on a quarterly basis to monitor progress and discuss any new issues. The groups comprise of staff representation from a cross section of the company, specialist officers, Trade Union representatives and a member of EMT. The Health and Safety Manager attends both meetings.
- 6.2 Health and safety is a standard agenda item on the bi-monthly Trade Union Liaison meetings.

7. Health and Safety Information, Instruction and Training

- 7.1 Health and safety is a standard item within the Team Brief, Toolbox Talks, and featured in key messages as required to ensure this is refreshed and embedded across the company.
- 7.2 Health and Safety is a compulsory induction training module for all new staff, both face-to-face and eLearning.
- 7.4 Berneslai Homes' intranet site contains a section [dedicated to health and safety](#), which includes corporate policies and procedures, along with risk assessments, useful advice and guidance.
- 7.5 All relevant managers attend the IOSH accredited Managing Safely or equivalent Site Management Safety Training Scheme course and are required to attend refreshers.

8. Health and Wellbeing

- 8.1 Berneslai Homes has a proactive approach to the health and wellbeing of its employees, and this is detailed within the health and wellbeing strategy. The aim of the strategy is to work with staff to integrate health and wellbeing into day-to-day activities, to create a positive and healthy working environment, and to show a commitment to health and wellbeing by linking this to our three C's values. Through the strategy we provide a framework where we take a proactive and engaging approach to enhancing the health and wellbeing of our staff, focusing on four key wellbeing themes – physical, mental, social and financial. In 2025 so far there have been several initiatives relating to key themes, including ongoing physical wellbeing checks (including collaboration with BMBC's How's Thi Ticker campaign), and the launch of My Money Matters financial wellbeing platform. A further survey to inform upcoming Year 3 actions will be undertaken in September 2025.

- 8.2 A health and wellbeing culture is embedded across the company that is facilitated by a number of policies, wellbeing initiatives and campaigns, employee support mechanisms and joint working. The staff online Wellbeing Hub and weekly Berneslai Bitesize messages ensure these are communicated effectively. The [Wellbeing Hub](#) is full of helpful resources and support for employee health and wellbeing, including our offer to staff, ideas and actions based on the five ways to wellbeing, and guidance for managers. We regularly run programmes of events and awareness activities during national campaigns, most recently with Mental Health Awareness Week.
- 8.3 Our Wellbeing Champions are volunteers offering colleagues extra support and someone to talk to. They are all trained as mental health first aiders and offer a first point of contact if staff recognise that they're struggling. They will listen in confidence and can signpost to a wide range of local support. We equip our Champions with a support and signpost toolkit that is refreshed through various training opportunities, for example Gambling Awareness. Local support services also attend the Wellbeing Champions quarterly network meeting where possible, most recently Mental Health Matters.
- 8.4 The Occupational Health Service, provided by the NHS, is managed through a contract specification and performance monitored via quarterly contract review meetings.

## 9. Health and Safety Performance

- 9.1 Berneslai Homes record and monitor all accidents and incidents, which are part of a wider group of performance indicators.

- 9.2 The key points from the 2024-25 performance indicators (**Appendix B**) are:

### 9.2.1 Decreases (or no change):

	Accidents (reports of)	Over 7-day accidents	Days lost due to accidents	Employees absent rate - Musculoskeletal III Health	Employees absent - Musculoskeletal III Health	Employees absent rate – Mental / Emotional III Health
2022-23	14	5	126 (£10,599)	151	64	120
2023-24	24	5	180 (£16,136)	142	71	153
<b>2024-25</b>	<b>15</b>	<b>3</b>	<b>84 (£5,899)</b>	<b>117</b>	<b>64</b>	<b>148</b>

### 9.2.2 Increases:

	Over 3-day accidents	Violence and Aggression (reports of)	Days Absent - Musculoskeletal III Health	Days absent - Mental / Emotional Wellbeing III Health	Employees absent - Mental / Emotional Wellbeing III Health
2022-23	2	28	1,453	1,739	51
2023-24	2	18	1,596	2,163	78
<b>2024-25</b>	<b>3</b>	<b>47</b>	<b>1,712</b>	<b>3,445</b>	<b>81</b>

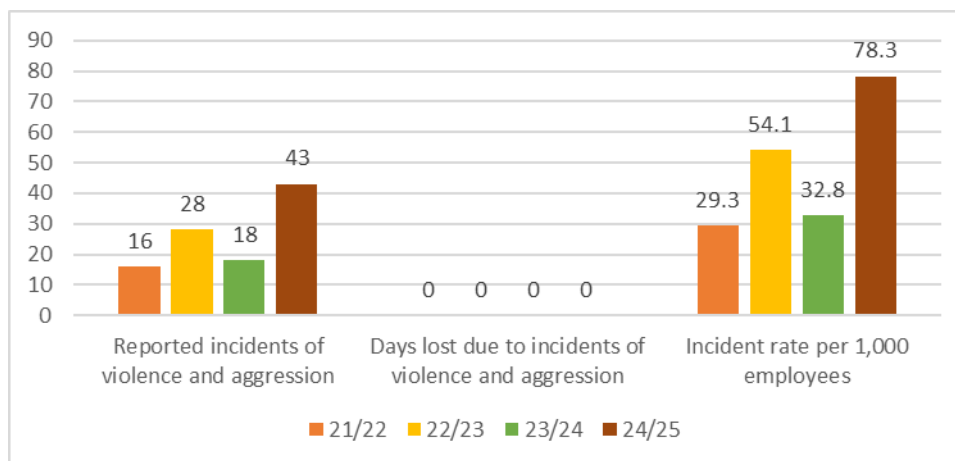
### 9.3 Accidents

- 9.3.1 9 out of the 15 reported accidents and all lost time accidents are attributed to Property Services Repairs Team. This is a significant reduction on the previous year's accident reports. All accidents were investigated and there were no concerning patterns to highlight with regards to the causes of accidents. Individual causes of accidents and related absences are monitored quarterly by EMT.
- 9.3.2 The Health and Safety Executive continue to report that the UK construction industry remains the second highest workplace injury rate of all industries, with the Agriculture, Forestry and Fishing industry being highest.

### 9.4 Violence and Aggression

- 9.4.1 The number of incidents reported have increased significantly from 18 to 43. Property Services Repairs Team have stated that frontline craft operatives are reporting instances whereby customers are taking their frustrations with Berneslai Homes out on them. This coupled with the new online accident/incident reporting system which has made reporting these incidents easier may be part of the reason why there have been an increase in these types of reports.

Each incident has been analysed in more detail as part of the quarterly employee health and safety reporting to EMT. They consider the actions taken as a result of the report to ensure that all incidents are being dealt with appropriately.



- 9.4.2 Our approach to safeguarding our employees' safety is always paramount and our continual message to staff to report any incidents of violence and aggression are reflected in the figures reported. We work with our customers to reinforce the message that violence or aggression in any form will not be tolerated and take appropriate action to address this. We also consider the needs of the customer and staff are trained to enact the Vulnerability Protocol as required.

9.4.3 We ensure that appropriate support is available to staff when dealing with reports of violence and aggression as part of our health and wellbeing approach. As a preventative measure, training is given to frontline staff to minimise the number of and reduce the impact of these types of incidents occurring, such as conflict resolution, complaint handling, and customer services training.

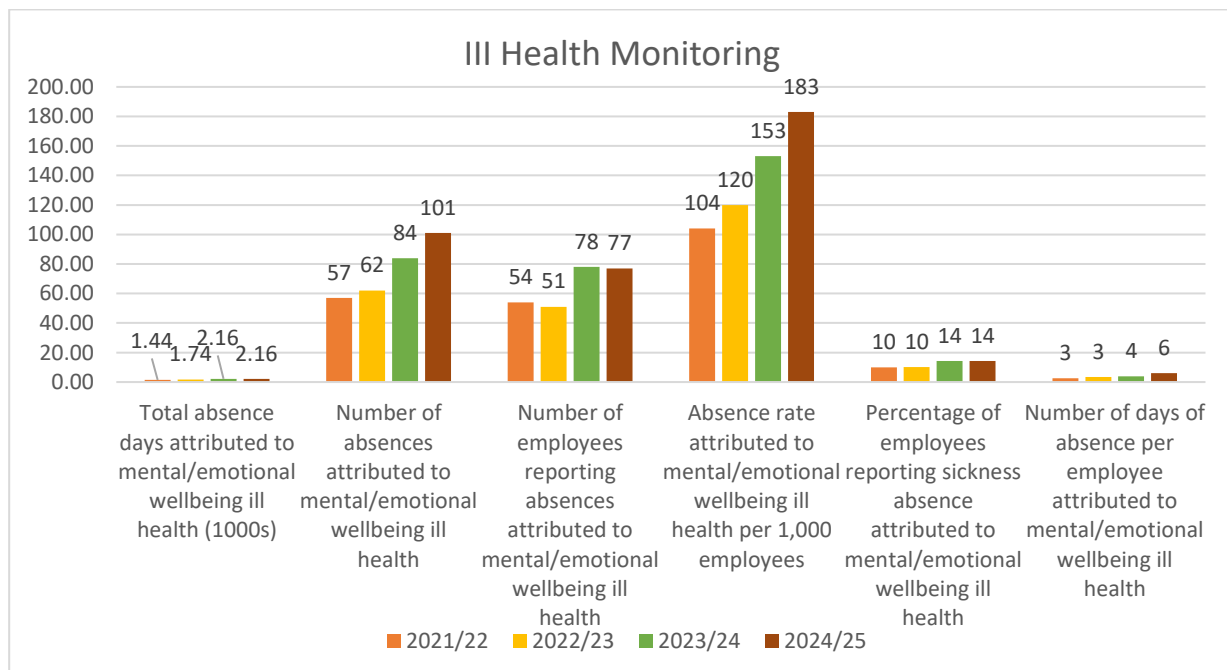
9.4.4 During 2024-25, a 'personal safety' survey to all staff was carried out with a number of actions being addressed following feedback from frontline staff. Key actions included providing expanded access to information for the frontline staff, review of conflict management training which included providing frequent refresher training. Personal safety is included in staff team briefs and employee communications.

## 9.5 Assessing Risk

9.5.1 Berneslai Homes' accident recording form asks managers "had a risk assessment been carried out for the activity undertaken prior to the accident?" and "has a risk assessment been reviewed/developed for the activity undertaken after the accident?" The responses provided by managers show that a risk assessment had been undertaken for the work activity in 100% of incidents, with 100% of risk assessments review post-accident. This is a continuation from the previous years due to ongoing monitoring and communication in this area.

## 9.6 Ill Health Monitoring

9.6.1 As with accidents and incidents, the collation of ill health statistics can assist in improving health and wellbeing within an organisation. The areas that fall under emotional/wellbeing can be triggered by both work and personal/home circumstances and our procedures look to manage both aspects to help people develop coping strategies.



- 9.6.2 With regards to employees being absent from work due to mental ill health, there is an upward trend of absence in line with HSE reporting for the UK. As a Mindful Employer, we support employees with mental illnesses. Our aim is to reduce the stigma of mental ill health, enable managers to spot the signs early and take immediate action and employees feel confident in reporting mental ill health.
- 9.6.3 With regards to employees being absent due to musculoskeletal ill health, the absence rate is slightly lower than the previous year. Ongoing efforts to support staff through musculoskeletal illness and injuries include:
- Provision of a physiotherapy service.
  - Effective regular welfare review meetings which provide a forum for managers and employees to agree a return-to-work plan, i.e. reasonable adjustments such as modified duties and phased return.
  - Safe working practices training.
- 9.6.4 Nationally, the numbers of people affected by ill health greatly outweigh those adversely affected by accidents, which reiterates the need to fully support employees throughout their ill health and invest in mechanisms to expedite their return to work for both the benefit of the employer and employee.
- 9.6.5 Berneslai Homes' pro-active and continued monitoring of employee welfare identifies issues early to the benefit of the employee and the company, for example return to work interviews and a greater utilisation of the Occupational Health Service. There has been a continued and prevalent use of the occupational health service. In general, non-attendance of appointments continues to stay low due to close monitoring and effective action.

## 10. Actions for 2025-26

- 10.1 As discussed throughout the report, an annual programme of review is required to ensure that all policies and procedures are in line with regulation, best practice and that further developments can be identified. In addition to those reviews, work will continue in relation to health campaigns, training, inspections and audits.

### 10.2

Action	Target
Annual review of Health and Safety Policy	Jul-25
Occupation Group Risk Assessments – Annual Review	Jun-25
Health and Safety Management procedures – Annual Review	Jul-25
Task Based Risk Assessments and associated safe systems of work – Annual Review	Jul-25
Two-year review of management of health and safety self-assessments	June 26

11. Customer Voice/Impact

- 11.1 The aim of the Employee Health and Safety performance monitoring is to scrutinise employee health and safety and therefore customer views are not sought for this report.

12. Risk and Risk Appetite

- 12.1 Strategic Risk Appetite – Risk Adverse: We aim to comply with all relevant legislation and have zero tolerance for regulatory compliance issues. We give high priority to internal audit recommendations and take immediate action to resolve concerns. We have zero tolerance for failure to meet deadlines from regulators.
- 12.2 There are significant risks if the organisation does not have effective measures in place for managing Health and Safety. The assurances provided within this report ensures that effective mechanisms are in place for the management of associated risks.
- 12.3 The risk register includes Strategic and operational health and safety related risks that are monitored at least quarterly by EMT, SMT and key managers.

13. Strategic Alignment

- 13.1 The report aligns to the requirements from BMBC (Barnsley Metropolitan Borough Council) for the effective governance of Berneslai Homes. Exemplary health and safety links to the successful achievement of all our ambitions as it is a key control when undertaking business on behalf of Berneslai Homes.

14. Data Privacy

There are no data privacy implications arising from this report as no personal data has been processed.

15. Consumer Regulatory Standards

This report relates to the Safety and Quality Standard: Health and safety - 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.

16. Other Statutory/Regulatory Compliance

- 16.1 Assurance related to the Health and Safety at Work etc Act 1974 and associated regulations.

17. Financial

- 17.1 There are no financial implications arising directly from this report.

- 18. Human Resources and Equality, Diversity and Inclusion
- 18.1 Having effective Health and Safety Policies, procedures and programmes within Berneslai Homes ensures that stakeholders' health and safety is paramount in undertaking service delivery and that equality and diversity issues are considered in protecting individuals' health and safety.
- 19. Sustainability Implications
- 19.1 No specific zero carbon implications from this report.
- 20. Associated Background papers
- 20.1 N/A
- 21. Appendices
- 21.1 Appendix A – Health and Safety Policy 2024-26
- 21.2 Appendix B – Employee Health and Safety Performance Statistics 2024-25



# EMPLOYEE HEALTH AND SAFETY POLICY 2024 to 2026



## DOCUMENT CONTROL

<b>Organisation</b>	Berneslai Homes
<b>Title</b>	Health and Safety Policy
<b>Author</b>	Claire Denson, Risk and Governance Manager
<b>Filename</b>	Health and Safety Policy
<b>Owner</b>	Berneslai Homes Executive Management Team
<b>Subject</b>	Health and Safety
<b>Commencement Date</b>	December 2002
<b>Applicable to</b>	All Berneslai Homes employees, temporary staff, contractors, board members and anyone working on behalf of Berneslai Homes.
<b>Information/ Action</b>	For information and action to comply with procedure
<b>Review Date</b>	2-yearly
<b>Review Responsibility</b>	Ian Bell Health and Safety Manager

## Revision History

Date	Version	Author	Comments
November 2016	V2.0	Claire Musson	Approved by SMT by email
December 2016	V2.0	Claire Musson	Approved by HR Committee
September 2017	V2.1	Claire Musson	Approved by HR Committee
September 2018	V2.2	Claire Musson	Approved SMT
September 2019	V2.3	Claire Denson	Reviewed by Claire Denson, Ian Bell and Darren Asquith
November 2019	V2.3	Claire Denson	Approved by Board and SMT by email
September 2020	V2.4	Claire Denson	Approved at Board and signed by Board
September 2021	V2.5	Claire Denson	Approved by EMT and Board
May 2022	V2.6	Claire Denson	Reviewed by Claire Denson, Ian Bell and Darren Asquith
July 2022	V2.6	Claire Denson	Approved by EMT and Board
June 2023	V2.7	Claire Denson	Reviewed by Claire Denson and Ian Bell
July 2023	V2.7	Claire Denson	Approved by EMT and Board
July 2024	V2.8	Claire Denson	Reviewed by Claire Denson, Ian Bell and Kerry Hamilton
July 2024	V2.8	Claire Denson	Approved by EMT and Board
June 2025	V2.9	Ian Bell	Reviewed by Claire Denson and Ian Bell
July 2025	V2.9	Ian Bell	

## PREFACE

<b>SECTION ONE</b>	Statement of Health and Safety Policy
	Statement of Health and Safety Policy Acceptance

<b>SECTION TWO</b>	<b>ORGANISATION DUTIES AND RESPONSIBILITIES</b>
2.1	Board Members
2.2	Main Duties of the Chief Executive
2.3	Main Duties of Executive Management Team
2.4	Main Duties of the Health and Safety Management Groups
2.5	Main Duties of the Health, Safety and Emergency Resilience Service
2.6	Main Duties of Managers and Supervisors
2.7	Main Duties of Senior Designated Officers
2.8	Main Duties of Employees
2.9	Main Duties of Safety Representatives
2.10	Main Functions of Representatives of Employee Safety

<b>SECTION THREE</b>	<b>ARRANGEMENTS FOR HEALTH AND SAFETY</b>
3.1	Accident and Incident Reporting and Investigation
3.2	Asbestos
3.3	Civil Contingencies/Emergency Resilience
3.4	Confined Spaces
3.5	Construction
3.6	Consultation with Employees
3.7	Contractors
3.8	Display Screen Equipment (DSE)
3.9	Electrical Installations and Electrical Appliances
3.10	Enforcement of Health and Safety
3.11	Fire and Emergency Arrangements
3.12	First Aid
3.13	Gas Installations and Appliances
3.14	Hazardous Substances (COSHH)
3.15	Health Surveillance and Occupational Health
3.16	Home / Agile Working
3.17	Information, Instruction and Training Arrangements
3.18	Legionella
3.19	Lifting Operations and Lifting Equipment
3.20	Lone Working
3.21	Manual Handling
3.22	New and Expectant Mothers
3.23	Noise
3.24	Partner and Subsidiary Organisations
3.25	Permits to Work
3.26	Personal Protective Equipment (PPE)
3.27	Personal Safety (Violence and Aggression) and Amber/Purple Flag

3.28	Risk Assessment
3.29	Safety Signs and Signals
3.30	Stress and Employee Wellbeing
3.31	Trainees, Agency Workers, Volunteers and Seconded Workers
3.32	Vehicles and Occupational Road Risk
3.33	Vibration
3.34	Visitors and the Public
3.35	Waste Management
3.36	Work Equipment
3.37	Working at Height
3.38	Working on or Near the Highway
3.39	Workplace Health, Safety and Welfare
3.40	Young Persons

## **SECTION FOUR      Health and Safety Performance Objectives**

## **SECTION FIVE      Glossary of Terms**

## **SECTION SIX      Control, Co-ordination and Communication Networks**

## **SECTION SEVEN      Employee Health & Safety Competencies**

## **SECTION EIGHT      Executive Management Team Acceptance of Health and Safety Policy Statement**

## **SECTION NINE      Board Acceptance of Health and Safety Policy Statement**

**HEALTH AND SAFETY AT WORK ETC. ACT 1974**  
**HEALTH AND SAFETY POLICY**  
**PREFACE**

This Health and Safety Policy has been prepared with the full co-operation of all Berneslai Homes recognised trade unions.

Thanks are offered to officials and employees who have devoted time and energy in contributing to the production of this working document.

This policy supersedes any previous policy. We recommend that all employees study this updated version carefully and put into practice the duties contained.

This policy does not contain details of the Operational Procedures or Operational Monitoring arrangements highlighted in Section Three of this document. These are prepared and filed separately on the corporate intranet and must be read in conjunction with this Policy.

## SECTION ONE

### STATEMENT OF HEALTH AND SAFETY POLICY

Berneslai Homes is committed to ensuring the health, safety and welfare of all its employees, through accident, injury and ill-health prevention and all those persons who are affected by its activities.

Berneslai Homes recognises and accepts the duties and obligations imposed upon it as an employer by the Health & Safety at Work Etc. Act 1974 and subordinate health and safety legislation and realises the importance of placing health and safety as an overriding priority within its services.

To implement this policy, Berneslai Homes will, so far as is reasonably practicable, conform to the terms of my Statement of Health and Safety Policy and ensure the provision and maintenance of:

- a) A safe workplace, with safe access and egress.
- b) Safe plant and equipment.
- c) Effective information, instruction and training.
- d) Safe arrangements for the use, handling, storage and transport of articles and substances.
- e) Adequate welfare facilities.

To assist in achieving this process and in order for Berneslai Homes to fulfil its legal obligations required by the Management of Health and Safety at Work Regulations 1999, a competent person service is provided through a service level agreement with the BMBC Health, Safety and Emergency Resilience Service.

Whilst accepting the minimum legal standards set by national legislation, Berneslai Homes is committed to continuous improvement and promoting a health and safety culture that aims to produce high standards of health and safety. This process will continue to raise standards within Berneslai Homes beyond the minimum legal requirements. Berneslai Homes believes that achieving these high standards will positively contribute to the overall quality of the services provided.

Berneslai Homes accepts that, although the final level of responsibility for implementing the Berneslai Homes' policy rests with the Board and senior management of the organisation, each and every individual employee must take an active role in effectively implementing the policy. As Chief Executive, I urge all employees to cooperate fully in the measures Berneslai Homes will be taking as part of this Policy, in order to ensure that their work situations are as safe and healthy as possible.

The effectiveness of this policy and arrangements will be monitored and reviewed as and when necessary, but at intervals not exceeding 12 months.

The acceptance of my Statement of Health and Safety Policy as Chief Executive of Berneslai Homes and the implementation of the health and safety policy require the commitment of my management team. My management team and subsequently their management teams accept and are committed to implementing this policy and sign accordingly on the acceptance sheet in Sections Eight and Nine of the hard copy of this policy retained by me for inspection and/or for copying on request. An electronic copy of the Health and Safety Policy is placed on the intranet site of Berneslai Homes.

Signed for and on behalf of Berneslai Homes

*A. J. Garrard*

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**Amanda Garrard, Chief Executive**

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Date:

## SECTION TWO ORGANISATION DUTIES AND RESPONSIBILITIES

### 2.1 Board Members

Board Members have a responsibility to comply with the statutory duties imposed under the Health & Safety at Work Etc. Act 1974. This includes all duties imposed by regulations made under the above act and obligations under the general duty of care. The main duties of Board Members are to ensure:

- a) That the declared Statement of Health and Safety Policy is achieved, so far as is reasonably practicable, for the health and safety at work of all employees.
- b) That health and safety items receive appropriate attention and that sufficient funds/resources are made available to implement any such items.
- c) That adequate monitoring of the effectiveness of this policy is carried out.
- d) Approval of the Annual Health and Safety Report and commit to its objectives.

### 2.2 The Chief Executive

The Chief Executive has the overall responsibility for ensuring the operations of Berneslai Homes are executed at all times in such a manner as to provide, so far as is reasonably practicable, for the health, safety and welfare of all members and employees and all persons likely to be affected by Berneslai Homes' operations, including contractors and the public where appropriate.

BMBC Health, Safety and Emergency Resilience, via a Service Level Agreement, support the Chief Executive in the management of the Health, Safety and Emergency Resilience function. The main duties of the Chief Executive are to ensure:

- a) That the declared Statement of Health and Safety Policy is achieved, so far as is reasonably practicable, for the health, safety and welfare at work of all employees.
- b) That all employees are made aware that health, safety and welfare are regarded as having equal ranking with other management responsibilities.
- c) That the Health and Safety Policy is reviewed regularly, and appropriate changes made when necessary and the changes distributed and publicised appropriately.
- d) That all members of the Executive and Senior Management Team are advised of new regulations and proposed changes in legislation.
- e) That an effective health and safety organisation is established and maintained in order that the Berneslai Homes meets its obligations as detailed under the Management of Health and Safety at Work Regulations 1999.
- f) That all members of the Executive and Senior Management Team are fully aware of their responsibilities with respect to the health, safety and welfare at work of employees.
- f) There is liaison with the appropriate Trade Unions and employees on all policy matters concerning health, safety and welfare at work.

### 2.3 The Executive Management Team

The Executive Management Team are responsible for ensuring that detailed Operational Occupational Health and Safety Management Systems considered appropriate are formulated and implemented in their areas of responsibility. The main duties are:

- a) To ensure they understand the Berneslai Homes' Health and Safety Policy.
- b) To meet the declared aims of Berneslai Homes' Health and Safety Policy.
- c) To ensure the production of effective Operational Occupational Health and Safety Management Systems (comprising Health and Safety Standards and Monitoring) and Emergency Resilience Management Systems that detail how health and safety will be managed within their Directorates.
- d) To meet statutory requirements particularly with regard to the Management of Health and Safety at Work Regulations 1999.
- e) To ensure they take a positive lead in and champion Berneslai Homes' Operational Occupational Health and Safety Management Systems.
- f) To ensure that Berneslai Homes' Operational Occupational Health and Safety Management Systems are reviewed regularly with particular reference to organisational changes.
- g) To monitor and appraise the effectiveness of health and safety performance within Berneslai Homes and improve standards in areas of low performance.
- i) To advise their managers on new regulations and on any proposed changes in existing regulations.
- j) To seek advice and guidance as appropriate from competent and qualified representatives in regards to health and safety.
- k) To support Berneslai Homes emergency resilience arrangements as required.
- l) To ensure effective health, safety and welfare policies are in place and receive regular reports'
- m) To be satisfied that health and safety policies and procedures are kept under review and that continuous improvement is made towards a safer working environment including ill health.
- n) To ensure effective health, safety and welfare policies are in place in relation to other contractors.
- o) To oversee the development and implementation of a health and safety risk management plan.
- p) To ensure adequate safety inspection arrangements are in place.
- q) To oversee the implementation of safety audits.
- r) To oversee the delivery of health and safety training.

### 2.4 The Health and Safety Management Groups

Two groups operate (recognising the differences in business description and trading location):

- i) The Housing Management Group
- ii) The Construction Services Group

both comprising the relevant EMT member, a cross-section of staff representing each appropriate service, trade union representation, Health and Safety Manager and a representative from BMBC (Health, Safety and Emergency Resilience).



The Management Groups provide the operational management, direction and control of health and safety in Berneslai Homes. They operate under a Terms of Reference.

## **2.5 Health, Safety and Emergency Resilience**

Under a Service Level Agreement BMBC Health, Safety and Emergency Resilience is responsible for assisting in the development and promotion of Berneslai Homes' occupational health and safety management system and for monitoring its implementation and effectiveness in line with the service level agreement. They provide Berneslai Homes' competent person general and specific advisory service to assist Berneslai Homes to fulfil their statutory requirements/duties.

## **2.6 Managers and Supervisors**

Employees who manage or supervise other employees, trainees or clients have a particular responsibility for their health and safety arising out of the work activity. The main duties are:

- a) To ensure they are familiar with Berneslai Homes' Health and Safety Policy and its effective implementation within their own area of responsibility.
- b) To adequately plan and manage the work activity.
- c) To ensure an operational occupational health and safety management system (including Management Procedures, Health and Safety Instructions, Codes of Practice etc.) is understood and put into practice.
- d) To ensure they are familiar with the appropriate legal requirements concerning the health, safety and welfare of all employees in their area of responsibility and are complied with.
- e) To ensure that the advice of their management on health and safety matters is sought when necessary.
- f) To ensure that risk assessments are undertaken, and subsequently operational safety procedures are devised, implemented and adhered to.
- g) To ensure that operational procedural documents are reviewed regularly and as appropriate, e.g. risk assessments and operational procedures.
- h) To ensure their employees (including agency staff) are adequately informed, instructed, supervised and trained in health and safety matters.
- i) To take appropriate action with regard to any of their employees who fail to carry out any health and safety duty, for which they have received appropriate information, instruction and training, or who endanger themselves or any of their colleagues by any of their acts or omissions.
- j) To investigate any accident, occurrence or industrial disease, which causes injury or illness to an employee and to ensure the appropriate accident report is completed.
- k) To promote and help develop healthier and safer working practices.
- l) To ensure any identified unsafe or unhealthy situations are reported and rectified, so far as is reasonably practicable.
- m) To ensure, so far as is reasonably practicable, that their services do not endanger the general public.
- n) To support the corporate emergency resilience arrangements as required.
- o) To ensure that sub-contractors working on behalf of Berneslai Homes adhere to the Health and Safety Policy in accordance with HSE guidelines.

## **2.7 Senior Designated Officers**

Senior Designated Officers or equivalent are to be appointed to all premises. They are responsible for coordinating procedures for ensuring the health, safety and welfare of the employees' in/on the premises and others who may be affected by the premises or the activities carried out within/on the premises. The main duties will be included in the Job Description of those appointed.

## **2.8 Employees**

- a) To take reasonable care of their health, safety and welfare and others who may be affected by their acts or omissions.
- b) Cooperate with their employer to comply with statutory duties for health and safety.
- c) Use correctly and safely any work item provided by their employer in accordance with the training and instruction given.
- d) To assist their manager/supervisor, in reporting any accident or incident that may cause injury to a person or damage to plant or property.
- e) To be aware of and take heed of Risk Assessments prior to carrying out any work activity.
- f) Attendance at relevant training identified in relation to Health and Safety.
- g) To report any Health and Safety Risks they are aware of.

## **2.9 Safety Representatives**

Safety Representatives have been appointed throughout Berneslai Homes by recognised Trade Unions. The duties of Safety Representatives are as detailed in the Safety Representatives and Safety Committees Regulations 1977.

## **2.10 Representatives of Employee Safety**

Berneslai Homes recognises employees not represented by Trade Unions and Safety Representatives. These employees have rights to consultation with their employer under the Health and Safety (Consultation with Employees) Regulations 1996 through appointed Employee Representatives.

## SECTION THREE ARRANGEMENTS FOR HEALTH AND SAFETY

The implementation of the Health and Safety Policy is largely a matter of establishing and implementing suitable and adequate safety arrangements.

The following sections are an overview of the key arrangements that we will implement in order to provide a safe and healthy place of work for employees, contractors, visitors and residents.

The Health and Safety Standards, Operational Procedures and Safety Monitoring Standards are designed to provide the framework and guidance to support compliance with relevant health and safety legislation.

### Health and Safety Standards and Operational Procedures

Health and Safety Standards along with Operational Procedures explain the risk/task to be managed in basic terms, provide a summary of the requirements for the management of the risk/task, detail any records to be kept, outline the appropriate safe system of work, and outline how the standards are achieved within the company.

### Safety Monitoring Standards

Allow managers to measure performance for relevant risks/tasks of health and safety against pre-set criteria and hence reveal where improvements are required.

**The main health and safety standards, together with a brief description, are listed overleaf in Section Three. *Each item is hyperlinked to the relevant Health and Safety Standard, which are available from Berneslai Homes Health and Safety intranet page.***

### 3.1 Accident and Incident Reporting and Investigation

- a) In accordance with the Reporting of Injuries, Diseases and Dangerous Occurrence Regulations (RIDDOR) 2013 we are obliged to record and report accidents and injuries and near misses at work. This includes accidents to employees, visitors, contractors and residents.
- b) The [accident and incident reporting process](#) should be followed to enable us to comply with legislative requirements.
- c) All accidents, near misses, safety observations and violent incidents should be reported using the relevant accident/Incident form and forwarded to the BMBC Health and Safety and Emergency Resilience Service.
- d) Berneslai Homes recognises the role of employees in health and safety and will encourage and provide means for employees to report matters of concern regarding health and safety. The reporting form for matters of concern is the Safety Observation Report form.
- e) Where necessary the accident/incident/ill health will be reported to the Health and Safety Executive (HSE) in line with the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013 by the Health, Safety and Emergency Resilience Service or Health and Safety Manager.

### 3.2 Asbestos

- a) Berneslai Homes is committed to complying with the legislative requirements of the Control of Asbestos at Work Regulations 2012 and associated legislation. Berneslai Homes has developed an [Asbestos Management Policy](#) and associated procedures with the aim of achieving compliance with this legislation.
- b) Berneslai Homes has a dedicated Asbestos Control Officer.

### 3.3 Civil Contingencies/Emergency Resilience

- a) Berneslai Homes is committed to complying with the Civil Contingencies Act 2004 and its associated legislation and guidance.
- b) Berneslai Homes has produced Corporate Emergency Response Plans (for [emergencies](#) and [business continuity](#)) including specific service responses in conjunction with the overarching BMBC Plan. These documents contain details of how Berneslai Homes will respond to an emergency, should it occur. These documents are continually under review and amendments are issued annually.
- c) The [Serious Incident Protocol](#) ensures that leadership have sufficient information to enable consensus decision-making in response to a serious incident.

### 3.4 Confined Spaces

- a) Berneslai Homes is committed to complying with the legislative requirements of the [Confined Spaces](#) Regulations 1997.
- b) Where a confined space has been identified as defined by HSE L101 Approved Code of Practice 'Safe Work in Confined Spaces', only suitably trained and competent persons will be allowed to work in these areas.

### **3.5 [Construction](#)**

- a) Berneslai Homes is committed to complying with the legislative requirements of the [Construction \(Design and Management\)](#) Regulations 2015.
- b) Berneslai Homes provides CDM services and facilities to at least the minimum standards as required by the Construction (Design and Management) Regulations.
- c) Berneslai Homes is committed to establishing and maintaining a healthy and safe workplace for all its employees and others who may enter their premises by implementing the Construction (Design and Management) Regulations 2015.

### **3.6 [Consultation Arrangements](#)**

- a) Berneslai Homes is committed to complying with the Safety Representatives and Safety Committees Regulations 1977 and the Health and Safety ([Consultation with Employees](#)) Regulations 1996.

### **3.7 [Contractors](#)**

- a) All services appointing [contractors](#) must ensure that the contractors' competency to do the appointed task has been checked. Berneslai Homes and BMBC Health, Safety and Emergency Resilience service have access to a database of all Contractors who have been assessed, and approved to the 'Contractors Health and Safety Assessment Scheme' (CHAS) standard. Preferably all contractors must be registered and approved on this scheme before work commences unless a competent person from Berneslai Homes or the BMBC Health, Safety and Emergency Resilience Service consider that another form of assessment is appropriate with regard to the circumstances, e.g. Safety Schemes in Procurement (SSIP).

### **3.8 [Display Screen Equipment \(DSE\)](#)**

- a) Berneslai Homes is committed to complying with legislative requirements as stated within the Health and Safety ([Display Screen Equipment](#)) Regulations 1992. Agile Display screen workstation assessments will be carried out using an Agile DSE self- assessment form, and annual review will take place and be recorded as a minimum or whenever a change in your workstation occurs.

### **3.9 [Electrical Installations and Electrical Appliances](#)**

- a) Berneslai Homes is committed to complying with the legislative requirements of the Electricity at Work Regulations 1989, associated industry guidelines and the Provision

and Use of Work Equipment Regulations 1998. These cover [Electrical \(Fixed\) Installations](#) and [Electrical Appliances](#).

- b) Berneslai Homes will engage competent persons, as required by the Electricity at Work Regulations 1989, to be responsible for the electrical testing of all portable appliances within Berneslai Homes owned premises. The competent person will determine the frequency of testing depending upon use of the equipment.
- c) Berneslai Homes has a dedicated Electrical Compliance Officer.

### **3.10 [Enforcement of Health and Safety](#)**

- a) Berneslai Homes is committed to ensuring that all [contact with enforcement officers](#) is recorded, matters of concern addressed and actions required undertaken throughout the Company.

### **3.11 [Fire and Emergency Arrangements](#)**

- a) Berneslai Homes owned premises comply with the Regulatory Reform (Fire Safety) Order 2005 (incorporating the Fire Safety Regulations 2022). This includes the carrying out a fire risk assessments and re-inspection programme. Frequency of inspection and review of assessments depends upon the individual building risk categorisation.
- b) Senior Designated Officers ensure regular periodic emergency evacuation drills are carried out in all premises that they are responsible for. All persons using the building with disabilities must be specifically catered for in relation to their evacuation procedures. All such evacuation drills are to be recorded in the building's Fire Log Book.
- c) [Fire and Emergency procedures](#) (including suspect packages and gas leaks) are in place within Berneslai Homes with designated Senior Designated Officers/Fire Marshals holding responsibility for managing these procedures in Berneslai Homes' occupied premises. All means of escape, fire detection/alarm systems and fire equipment are to be fully maintained.
- d) The Building Safety Act 2022 does not impact on the Employee Health and Safety Policy currently. Best practice will be undertaken, however, such as within Independent Living Accommodation. Berneslai homes has a Building Safety Manager and a dedicated Fire Safety Officer.

### **3.12 [First Aid](#)**

- a) Berneslai Homes provides [first aid services](#), qualified first aid and emergency first aid employees and facilities to comply with the standards as required by the Health and Safety at Work (First Aid) Regulations 1981.

### **3.13 [Gas Installations and Appliances](#)**

- a) Berneslai Homes is committed to complying with the legislative requirements of the Gas Safety (Installation and Use) Regulations 1998 (as amended 2018)

- b) Berneslai Homes will ensure that [gas installations and appliances](#) are safe and do not pose a risk to the health and safety of persons. All gas installations and appliances will be maintained by competent engineers registered with the Gas Safety Register.
- c) Installations and appliances will receive services and tests in compliance with the regulations. Managers must ensure that all employees are aware of the process of carrying out servicing and testing to the relevant standards. Managers will also carry out inspections of completed works to ascertain that the work is completed to the required standard.
- d) Berneslai Homes Partners and subcontractors shall keep an up-to-date register of all GAS SAFE registered engineers employed in the above duties. This shall be available for inspection as and when required.
- e) Berneslai Homes has dedicated gas safety officers.
- f) **Corporate Manslaughter Act 2007:**

An organisation is guilty of an offence under the act only if the way in which its activities are managed or organised by its Senior Management forms a substantial element in breach of the relevant duty of care owed to the deceased.

#### Senior Management Hierarchy

Board	Review of policy, performance management and resourcing
Chief Executive	Overview and reporting to Board
Executive Director of Property Services	Overall management and resourcing of service
Mechanical and Electrical Compliance Manager	Operational responsibility (programming, access, Quality assurance)

#### Contractor Failure

Failure to service appliances to the necessary standard.

#### Council Failure

Appointment of Contractor was negligent and led to an incompetent Contractor.

### **3.14 [Hazardous Substances \(COSHH\)](#)**

- a) Berneslai Homes is committed to complying with the legislative requirements of the [Control of substances hazardous to health](#) regulations 2002 (as amended in 2004) Any substance which is deemed as Hazardous to Health as outlined within the regulations will be subjected to a COSHH assessment which will then be disseminated to those employees using the substance.

- b) Berneslai Homes recognises the increased risk to employees of incurring sharps injuries from discarded [drugs waste](#) and does not expect any of its employees to remove or dispose of discarded drugs/clinical waste which they may encounter whilst carrying out their duties unless they have received specific information, instruction and training and have the appropriate equipment.
- c) Berneslai Homes' policy on the management of [Zoonoses](#) shall be the same as that for all hazardous substances.

### **3.15 [Health Surveillance and Occupational Health](#)**

- a) Berneslai Homes procures occupational health services for employees of Berneslai Homes. These services promote and maintain the highest degree of physical, mental and social wellbeing for workers in all occupations and undertake to protect the workers from factors adverse to their health.
- b) The occupational health services provide adequate [health surveillance provisions](#) as required by the Management of Health and Safety at Work Regulations 1999 to those employees who are exposed to hazards such as noise, asbestos and vibration.
- c) Managers shall identify those employed and others exposed to noise, asbestos or vibration and other such hazards and refer them to the occupational health service as required.

### **3.16 [Agile Working](#)**

- a) Berneslai Homes is committed to ensuring the health, safety and welfare of all its employees and all those persons who are affected by its activities. This applies to those persons not only working within an office environment but those persons whose workplace is their own home (or where else they choose to work safely) and any other persons who may be affected by their activities.
- b) All [Home \(agile\) workers](#), as part of the Agile Working Policy, will be required to undertake a DSE and Homeworking Risk Assessment when commencing homeworking.

### **3.17 [Information, Instruction and Training Arrangements](#)**

- a) [Health and safety information, instruction and training](#) form an integral part of the overall training within Berneslai Homes. This is particularly important with regard to induction training, which is arranged for all new employees entering Berneslai Homes by their Manager using Berneslai Homes' Induction Guide.
- b) The health and safety information, instruction and training needs of employees should be the subject of periodic review by Managers and any necessary refresher training carried out. Employees should have sufficient knowledge, skills and information to carry out their work in a safe and healthy manner.
- c) All managers should attend IOSH accredited or an equal and approved qualification training appropriate to their level of responsibility.



- d) Managers shall ensure that all health and safety training needs are considered in employees' Performance and Development Reviews and that training provided to employees is recorded.

### **3.18 Legionella**

- a) Berneslai Homes is aware of and supports the contents, requirements and intentions of the Health and Safety at Work Etc. Act 1974, Control of substances hazardous to health regulations 2002 (as amended in 2004), the Control of Legionella Bacterial in Water Systems Approved Code of Practice 2013 L8 and associated UK regulations and requirements.
- b) Berneslai Homes will assess, prevent and control risks associated with the [legionella](#) bacteria and subsequent development of Legionnaires Disease from work activities and water systems on its premises.
- c) Berneslai Homes has a dedicated Water Hygiene officer.

### **3.19 Lifting Operations and Lifting Equipment**

- a) Berneslai Homes is committed to complying with the legislative requirements of the [Lifting Operations and Lifting Equipment](#) Regulations 1998.
- b) Berneslai Homes will ensure that all lifting operations are planned and managed appropriately and that all lifting equipment is inspected and tested to at least the legal minimum requirement.

### **3.20 Lone Working**

- a) Berneslai Homes recognises the increased risks to [lone workers](#) and thus risk assessments cover lone workers with control measures implemented as appropriate to reduce the risks. Employees are informed of any additional risks they may face as a lone worker. This is also defined in the [Lone Worker Policy](#).
- b) Berneslai Homes recognises the fact that there are risks to employees in the provision of its services, but expects that people generally should be able to go about their duties without threat or fear of violence or aggressive intimidation resulting from their work.

### **3.21 Manual Handling**

- a) Berneslai Homes is committed to complying with the legislative requirements of the [Manual Handling](#) Operations Regulations 1992 (as amended).
- b) Managers are responsible for identifying all activities within their work area that involve manual handling and the employees who carry out these tasks continually as part of their normal working day. Managers must also make provisions for those employees who carry out manual handling activities on an occasional basis.

### 3.22 New and Expectant Mothers

- a) Berneslai Homes recognises the increased risks to [new and expectant mothers](#) and extends existing risk assessments to cover new and expectant mothers and implement control measures as appropriate to reduce the risks. Women are informed of any additional risks they may face as a new or expectant mother.
- b) [Risk assessments](#) will be undertaken when a woman notifies her manager that she is pregnant and reviewed periodically and when necessary. Additional control measures will be applied for six months after the birth or where necessary until such time as the new mother is no longer breastfeeding.

### 3.23 Noise

- a) Berneslai Homes is committed to complying with the legislative requirements of the Control of [Noise at Work](#) Regulations 2005.
- b) Berneslai Homes will ensure that where necessary noise assessments are carried out by a competent person and appropriate control measures introduced.

### 3.24 Partner and Subsidiary Organisations

- a) Berneslai Homes recognises the particular relationship between itself and its partner organisations. To this end Berneslai Homes will expect subsidiary and partner organisations to develop, produce and maintain a health and safety policy outlining their management systems for health and safety and detailing the general responsibilities of their employees at all levels.
- b) These policies and the management systems to which they refer are subject to audit by Berneslai Homes.

### 3.25 Permits to Work

- a) Berneslai Homes will where necessary due to the hazards and risk involved ensure that work activities will be controlled by the use of documented [permit to work](#) systems.

### 3.26 Personal Protective Equipment (PPE)

- a) Berneslai Homes is committed to complying with the legislative requirements stated within the [Personal Protective Equipment](#) Regulations 1992 (Amended 2022).
- b) Managers will be responsible for identifying and issuing PPE based upon a risk assessment relevant to the specific task being considered. However, managers should, wherever reasonably practicable, eliminate or reduce the risk at source before PPE is considered. The use of PPE should only be considered as a last resort. Where the need for PPE has been identified and its requirement is unavoidable, Managers should follow the guidance and implement the required control measures as referenced in the Health and Safety Standard.

### **3.27 Personal Safety (Violence and Aggression) and Amber/Purple Flag**

- a) Berneslai Homes recognises the fact that there are risks to employees in the provision of its services, but expects that people generally should be able to go about their duties without threat or fear of violence or aggressive intimidation resulting from their work.
- b) Managers responsible for people, premises and services will assess, through risk assessment, the risk of [aggression, violence or potential violence to employees](#) and take all reasonably practicable measures to eliminate or reduce the level of risk to employees' health and safety.
- c) Employees are not expected to go alone into a potentially dangerous situation or unnecessarily put themselves at risk.
- d) Berneslai Homes will undertake to update and evaluate the Amber/Purple Flag database of premises and persons where and with whom violent incidents may occur, so that employees can more easily be made aware of challenging individuals. This will be alongside maintaining the BMBC Cautionary Contacts Database (CCD).

### **3.28 Risk Assessments**

- a) Berneslai Homes is committed to implementing [risk assessment procedures](#) in order to comply with the Management of Health and Safety at Work Regulations 1999. These assessment procedures will ensure the identification, assessment and subsequent control of hazards and risks presented by its undertakings to employees and others is suitable and sufficient.

### **3.29 Safety Signs and Signals**

- a) Berneslai Homes is committed to complying with the Health and Safety (Signs and Signals) Regulations 1996 and will ensure that where necessary suitable and sufficient [signs and signals](#) are provided to indicate safe conditions, prohibitions, mandatory control measures and specific hazards.

### **3.30 Stress and Employee Wellbeing**

- a) Berneslai Homes is committed to protecting the health and welfare of its employees and with regard to work-related stress and general employee wellbeing and will ensure that necessary suitable and sufficient actions are undertaken to meet the Stress Management Policy and Dignity at Work Policy.

### **3.31 Trainees, Volunteers, Agency Workers and Seconded Workers**

- a) Berneslai Homes recognises its responsibilities both as sponsor and managing agents to all its trainees, volunteers and agency workers. Therefore, they must be afforded the same level of commitment to health and safety as any employee.
- b) Berneslai Homes recognises its responsibilities to all those workers seconded to Berneslai Homes or working under the direct or indirect control of Berneslai Homes via a partnership or other such arrangement (seconded workers). Therefore, seconded

workers must be afforded the same level of commitment to health and safety as any employee.

### **3.32 Vehicles and Occupational Road Risk**

- a) Berneslai Homes is committed to complying with the general requirements of the Health and Safety at Work Etc. Act 1974, the Management of Health and Safety at Work Regulations 1999 and the Provision and Use of Work Equipment Regulations 1998 as they apply to vehicles.
- b) Berneslai Homes will ensure that all company vehicles are used, fuelled, loaded and unloaded and maintained in a suitable and sufficient manner.
- c) Berneslai Homes will ensure that all persons driving vehicles for [work-related journeys](#) are suitably informed; instructed; trained; licensed and insured as appropriate. This will ensure that work-related journeys are safe, staff are fit and are competent to drive safely, and the vehicles used are fit for purpose and in a safe condition. This is also define in the [Driving for Work Policy](#).

### **3.33 Vibration**

- a) Berneslai Homes is committed to complying with the requirements of the Control of [Vibration at Work](#) Regulations 2005.
- b) Berneslai Homes will ensure that where necessary vibration assessments are carried out by a competent person and appropriate control measures introduced.

### **3.34 Visitors and the Public**

- a) Berneslai Homes will conduct its undertakings in such a way as to ensure, so far as is reasonably practicable, that members of the public are not endangered by work carried out by its employees, whether on Berneslai Homes' premises or not.
- b) All reasonable action is to be taken to ensure that visitors are accompanied in areas where risks are known to exist, or those visitors are made aware of such risks.

### **3.35 Waste Management**

- a) Berneslai Homes is committed to ensuring that the Environmental Protection Act 1990, the [Waste Management](#) Licensing Regulations 1994 and the Special Waste Regulations 1996 and the associated duty of care for waste are complied with throughout the company.
- b) Berneslai Homes will ensure that appropriate procedures are implemented to manage its waste and comply with the duty of care.

### **3.36 Work Equipment**

- a) Berneslai Homes is committed to complying with legislative requirements of the Provision and Use of Work Equipment Regulations 1998, Lifting Operations and [Lifting Equipment](#)

Regulations 1998 and Berneslai Homes' schedules for ensuring that all work equipment (hired or owned) is registered and inspected in accordance with statutory requirements.

- b) Managers must ensure that all employees receive suitable and sufficient information, instruction and training on the correct use of [work equipment](#) before they are charged in its use.
- c) Individual managers are responsible for ensuring all work equipment is registered and maintained.

### **3.37 [Working at Height](#)**

- a) Berneslai Homes is committed to complying with the [Working at Height](#) Regulations 2005.
- b) Managers must ensure suitable safe systems of work are implemented for working at height, including the provision of appropriate information, instruction and training.

### **3.38 [Working on or Near the Highway](#)**

- a) Berneslai Homes is committed to complying with the New Roads and Street Works Act 1991 and will ensure that any [works on or near the highway](#) are appropriately signed and traffic controlled.

### **3.39 [Workplace Health, Safety & Welfare](#)**

- a) Berneslai Homes is committed to establishing and maintaining a healthy and safe workplace for all its employees and others who may enter our premises by implementing the [Health, Safety and Welfare](#) (Workplace) Regulations 1992.
- b) Advisors from the Health, Safety and Emergency Resilience Service are responsible for carrying out formal visual inspections of Berneslai Homes work premises in accordance with the Management of Health and Safety Audits of services undertaken 2-yearly.
- c) Managers are responsible for carrying out more frequent inspections, i.e. weekly, monthly, quarterly etc., of the area of responsibility depending on the nature of work that takes place.

### **3.40 [Young Persons](#)**

- a) Berneslai Homes recognises the increased risks to [young persons](#) and will extend existing risk assessments to cover them and implement controls measures as appropriate to reduce the risks. They will be informed of any additional risks they may face as a young person.
- b) Additional risk assessments will be made when a young person is to enter the company for a short period of time during a work experience programme.

- a) All services will implement Berneslai Homes' Health and Safety Management System to a standard that would meet the Health, Safety and Emergency Resilience Service's "Satisfactory" rating upon audit.
- b) All Managers will ensure risk assessments are in place for all activities from which accidents/incidents occur.
- c) All services will contribute to Operational Safety Assurance Monitoring based on the Health and Safety Standards and the hazards and risks involved in the work activities.
- d) The Executive Management Team will obtain assurance that the Health and Safety Policy is embedded throughout their services as part of the Assurance Framework review.
- e) All services will contribute into the Berneslai Homes Emergency Response Plan and Continuity Plans.
- f) All services will produce occupation group risk assessments.

## SECTION FIVE GLOSSARY OF TERMS

### HEALTH AND SAFETY STANDARDS

Minimum health, safety and emergency preparedness standards that Berneslai Homes and indeed prospective partners are required to meet.

### SAFETY MONITORING ASSURANCE STANDARDS

Pre-set criteria allowing Berneslai Homes to measure their performance, in particular elements of health, safety and emergency preparedness.

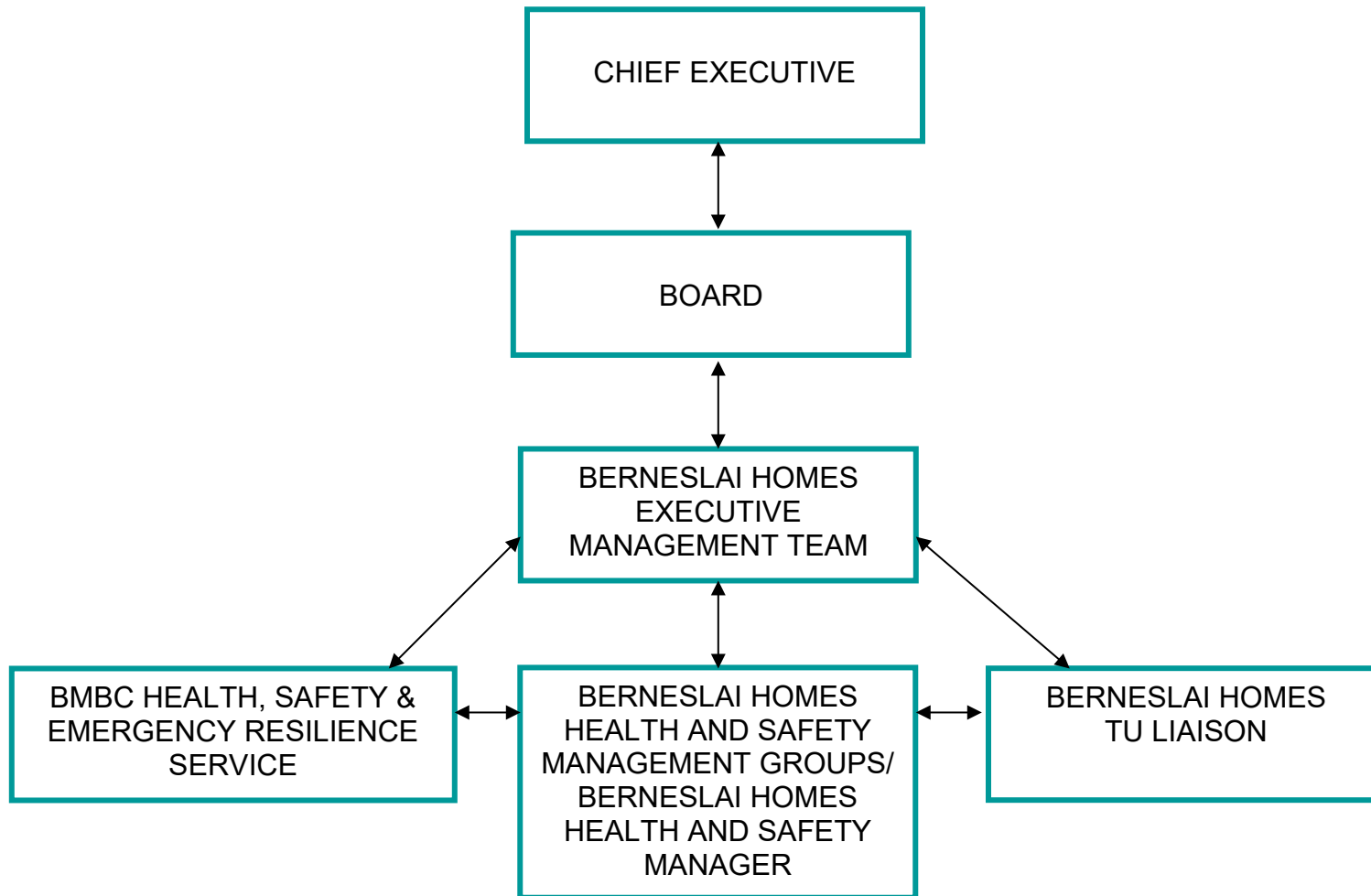
### MANAGEMENT PROCEDURES

Documents, produced, issued and implemented by Berneslai Homes outlining how the required minimum standards are achieved.

### OPERATIONAL HEALTH AND SAFETY MONITORING PROGRAMME

Programme outlining the periodicity in which Berneslai Homes complete the Health and Safety Standards relevant to their work activities.

## SECTION SIX INTERNAL HEALTH AND SAFETY CONTROL, CO-ORDINATION AND COMMUNICATION NETWORKS





## SECTION SEVEN

### EMPLOYEES' HEALTH AND SAFETY COMPETENCIES

In order to achieve successful health and safety management, the Health and Safety Executive (HSE) state that:

“If employees [at ALL levels] are to make a maximum contribution to health and safety there must be proper arrangements in place to ensure that they are competent. This means more than simply training them, experience of applying skills and knowledge is another important ingredient...Managers need to be aware of relevant legislation and how to manage health and safety effectively...All employees [at ALL levels] need to be able to work in a safe and healthy manner.”

Therefore, all employees at all levels should have a clear understanding of the key occupational health and safety issues for Berneslai Homes (and in particular their department) and be continually developing their skills and knowledge. The guidance below details the health and safety competencies which are required in order to implement the responsibilities detailed in Section Two of this Policy.

#### 7.1 Chief Executive and Executive/Senior Management Team

- a) Knowledge of the corporate occupational health and safety management system.
- b) Knowledge, as appropriate, of the monitoring regime for health and safety.
- c) Knowledge of the protocols and procedures for corporate governance, strategic risk management and statement of internal control.
- d) Knowledge of the strategic control, co-ordination, consultation and communication networks for health and safety.
- e) Knowledge of the strategic emergency response and continuity arrangements.

#### 7.2 Managers and Supervisors

- a) In order to provide appropriate background knowledge of health and safety, successfully achieve the IOSH Managing Safely certificate or equivalent qualification in managing health and safety, which is currently the Site Management Safety Training Scheme (SMSTS) or Site Supervisors Safety Training Scheme (SSSTS)
- b) Knowledge of the corporate occupational health and safety management system.
- c) Knowledge, as appropriate, of the monitoring regime for health and safety.
- d) Knowledge of the protocols and procedures for operational risk management.
- e) Knowledge of the operational control, co-ordination, consultation and communication networks for health and safety.
- f) Knowledge of the operational emergency resilience and continuity arrangements.

#### 7.3 Employees

- a) Attend health and safety induction training – corporate and role-specific.
- b) In order to provide appropriate background knowledge of health and safety, operatives successfully achieve the CITB Site Safety Plus or equivalent or CSCS card.
- c) Knowledge of the corporate occupational health and safety management system as it applies to employees.
- d) Knowledge of the safe systems of work for their role and activities undertaken within the role.
- e) Knowledge of the operational consultation and communication networks for health and safety.

## SECTION EIGHT

### EXECUTIVE MANAGEMENT TEAM ACCEPTANCE OF HEALTH AND SAFETY POLICY

The acceptance of my statement of health and safety policy as Chief Executive of Berneslai Homes and the implementation of the health and safety policy require the commitment of my management team.

The acceptance and commitment to implement this policy is given by the undersigned Executive Management Team:

Arturo Gulla, Executive Director of Property Services \_\_\_\_\_ Date

David Fullen, Executive Director of Customer and Estate Services \_\_\_\_\_ Date

Rachel Taylor, Executive Director of Resources \_\_\_\_\_ Date

## SECTION NINE BOARD ACCEPTANCE OF HEALTH AND SAFETY POLICY

Berneslai Homes Board approved the policy at its meeting on the 24 July 2025 and individual Board Directors have endorsed their support of the policy:

-----  
*Ken Taylor (Chair)*

-----  
*Date*

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*Richard Fryer*

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*Date*

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*Mark Johnson*

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*Date*

-----  
*David Leech*

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*Date*

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*Rebecca Mather*

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*Date*

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*Gez Morrall*

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*Date*

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*Kevin Osborne*

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*Date*

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*Jo Sugden*

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*Date*

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*Sarah Tattersall*

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*Date*



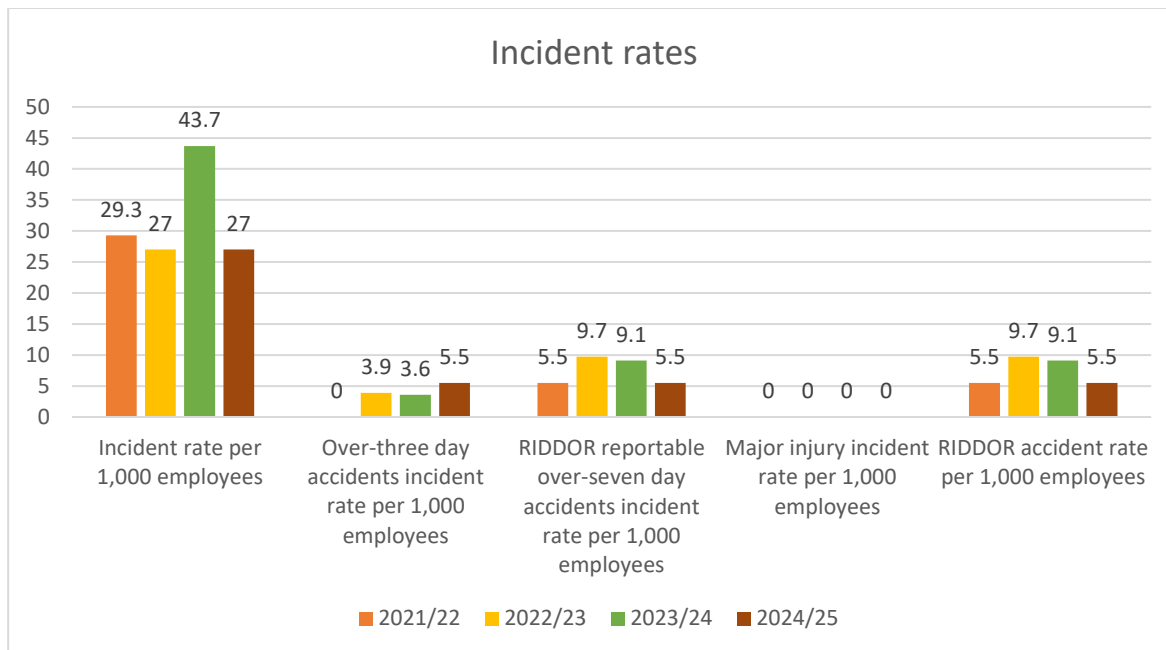
# **Berneslai Homes Employee Health and Safety Performance 2024 to 2025**

## 1. PERFORMANCE

### 1.1 Accidents Statistics

Year	Reported accidents	Lost time accidents	Over 3 day accidents	Over 7 day accidents (new RIDDOR Reportable)	Major injury accidents	First aid accidents	Medical treatment Accidents (where employee attended hospital or GP)	Days lost due to accidents
<b>2021/22</b>	16	5	0	3	0	1	2	124
Construction Services	15	5	0	3	0	1	2	124
Non-Construction Services	1	0	0	0	0	0	0	0
<b>2022/23</b>	14	8	2	5	0	1	6	126
Construction Services	14	8	2	5	0	1	6	126
Non-Construction Services	0	0	0	0	0	0	0	0
<b>2023/24</b>	24	9	2	5	0	2	7	180
Construction Services	23	9	2	5	0	2	7	180
Non-Construction Services	1	0	0	0	0	0	0	0
<b>2024/25</b>	15	6	3	3	0	2	7	84
PSRT	9	5	2	3	0	0	6	78
Non-PSRT	6	1	1	0	0	2	1	6

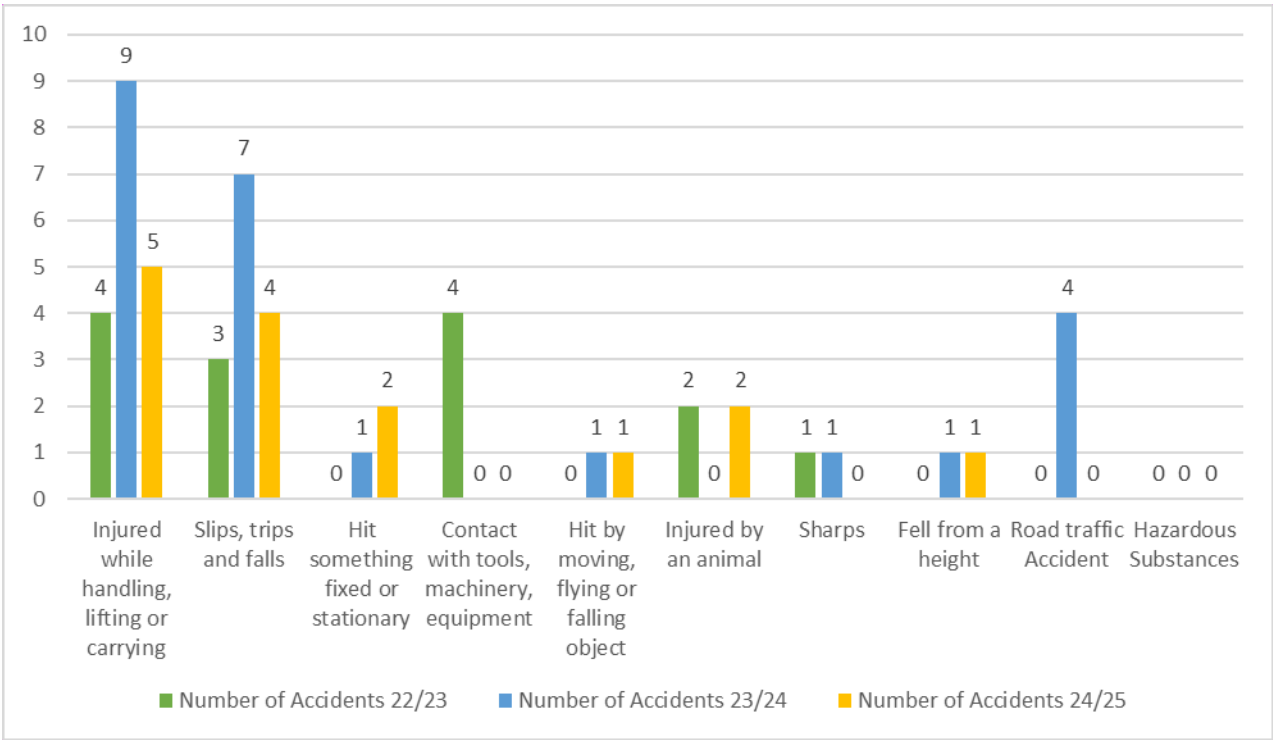
### 1.2 Incident Rates



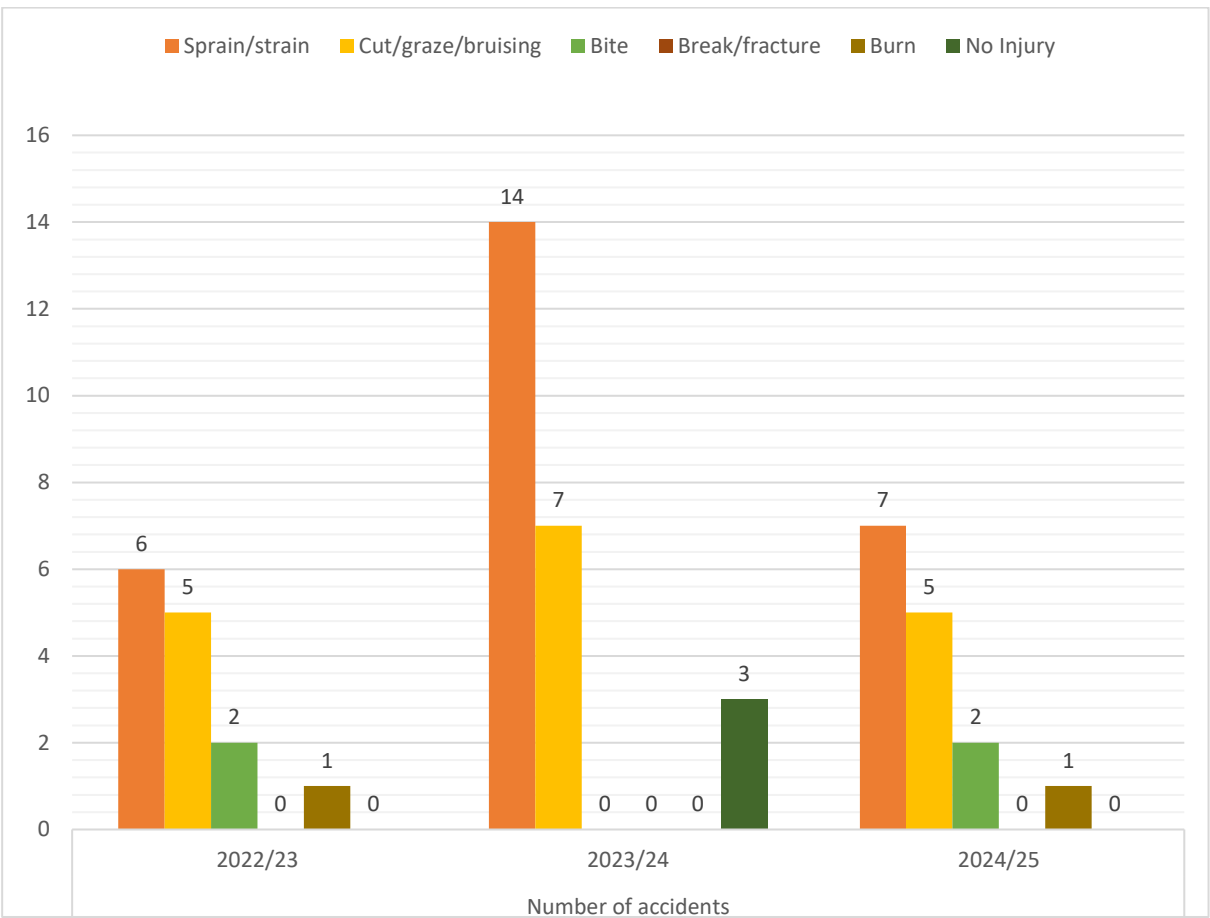
The incident rate is calculated by using the following formula:

$$\frac{15 \text{ (Total Number of Accidents)}}{549 \text{ (Number of Persons Employed)}} \times 1000 = 43.7 \text{ (Unit Number of Employees)}$$

1.3 Causes of Accidents



1.4 Type of Injury

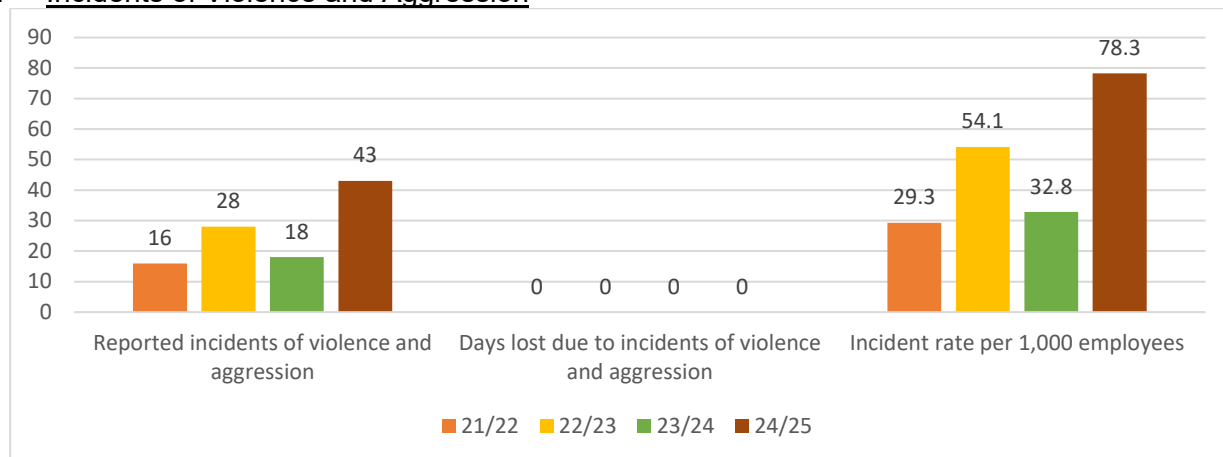


## 2. VIOLENCE AND AGGRESSION

### 2.1 Violent incidents are defined as:

- Any intentional acts that cause apprehension, fear, psychological or physical injury to an employee arising out of or in connection with their authorised duties
- The deliberate damage to the property or belongings of an employee that is attributable to the carrying out of duties on behalf of Berneslai Homes.

### 2.2 Incidents of Violence and Aggression



### 2.3 Types of Incidents of Violence and Aggression

Type of Incident	Number of Incidents		
	2022/23	2023/24	2024/25
Verbal abuse/aggression/harassment	25	14	37
Physical violence	2 (no injury)	0	4
Malicious intent	1	1	1
Sexual Harassment	0	1	0
Intentional damage to property	0	1	1
Weapon involved	0	1	0
<b>Total</b>	<b>28</b>	<b>18</b>	<b>43</b>

### 2.4 Types of Injuries Sustained in Incidents of Violence and Aggression

Type of injury	Number of Accidents		
	2022/23	2023/24	2024/25
No injury	28	18	42
Dog Bite	0	0	1
<b>Total</b>	<b>28</b>	<b>18</b>	<b>43</b>

### 3. RISK ASSESSMENTS

- 3.1 Responses provided to the question “had a risk assessment been carried out for the activity undertaken prior to the accident?” and the question “has a risk assessment been reviewed/developed for the activity undertaken after the accident?”

	Number of accidents where a risk assessment was indicated as being completed for the activity prior to the accident	% of accidents where a risk assessment was indicated as being completed for the activity prior to the accident	Number of accidents where, following the accident, a risk assessment was completed/ reviewed for the activity being undertaken prior to the accident	% of accidents where, following the accident, a risk assessment was completed/ reviewed for the activity being undertaken prior to the accident	Number of accidents
2022/23	14	100%	14	100%	14
2023/24	24	100%	24	100%	24
2024/25	15	100%	15	100%	15

### 4. COST OF ACCIDENTS

Year	Total number of accidents reported	Number of days lost due to reported accidents	Average cost of each lost working day	Direct cost of days lost (based on days lost and the cost of the working days lost)
2021/22	16	124	£77.86	£9,655
2022/23	14	126	£84.12	£10,599
2023/24	24	180	£89.64	£16,136
2024/25	15	84	£92.18	£5,899

*\*Commencing with the 2021-22 report, the median salary calculation has been revised to the mean salary, which best represents the true cost. £33,649/365 days = £92.18 x 84 lost days = £*

### 5. HEALTH AND SAFETY TRAINING PROVIDED TO EMPLOYEES

Course	Number of People Trained 2022/23	Number of People Trained 2023/24	Number of People Trained 2024/25
Abrasive Wheels	25	30	51
Asbestos Awareness		89	173
Asbestos Cat B (removal)	15	20	58
Carbon monoxide (New 24/25)	0	0	2
Cable Detection	39	32	0
CITB Working Safely	20	101	67
Conflict Management	23	61	78
Electrical Safety	0	6	6
Fire Safety	47	197	533
First Aid at Work	6	6	9
HETAS	0	2	5
IOSH Managing Safely inc refresher	35	20	21
Manual Handling	0	0	75
Mental Health Awareness	0	5	0



Course	Number of People Trained 2022/23	Number of People Trained 2023/24	Number of People Trained 2024/25
NEBOSH	2	0	0
Needlestick	27	46	67
RASWA	0	0	3
Site Managers Safety (SMSTS)	9	5	6
Site Supervision Safety Training Scheme (SSSTS)	3	1	3
Stress Awareness	0	3	0
Working at Height	6	2	6
<b>Total</b>	<b>271</b>	<b>616</b>	<b>1163</b>

## 6. MAJOR CAUSES OF ABSENCE FROM WORK

- 6.1 Mental/Emotional Wellbeing Ill Health absence relates to illnesses such as anxiety, stress, depression, and other psychiatric illnesses. Employees may have been absent due to a mental/emotional wellbeing related issue on more than one occasion, hence the difference between the total reported absences attributed to mental/emotional wellbeing related ill health and number of employees reporting those absences.

Year	Total absence days attributed to mental/emotional wellbeing ill health	Number of absences attributed to mental/emotional wellbeing ill health	Number of employees reporting absences attributed to mental/emotional wellbeing ill health	Absence rate attributed to mental/emotional wellbeing ill health per 1,000 employees	Percentage of employees reporting sickness absence attributed to mental/emotional wellbeing ill health	Number of days of absence per employee attributed to mental/emotional wellbeing ill health
2021/22	1,438	57	54	104	9.9%	2.6
2022/23	1,739	62	51	120	10.2%	3.4
<b>2023/24</b>	<b>2,163</b>	<b>84</b>	<b>78</b>	<b>153</b>	<b>14.2%</b>	<b>3.9</b>
<b>2024/25</b>	<b>3,445</b>	<b>101</b>	<b>77</b>	<b>183</b>	<b>14.6%</b>	<b>6.5</b>

- 6.2 Musculoskeletal Ill Health absence relates to sickness for:

- Arthritis
- Backache/pain
- Frozen shoulder
- Injury shoulder/forearm
- Injury foot/ankle
- Injury hip/thigh
- Injury knee/lower leg
- Injury shoulder/arm
- Injury wrist/hand
- Neck ache/pain
- Osteoarthritis
- Other back problems
- Other musculoskeletal
- Pulled muscle
- Sciatica
- Shoulder ache/pain
- Strain
- Broken arm, foot, toe, ankle.

Employees may have been absent due to a musculoskeletal related issue on more than one occasion, hence the difference between the total reported absences attributed to musculoskeletal related ill health and number of employees reporting absences attributed to musculoskeletal related ill health.

	Total absence days attributed to musculoskeletal ill health	Number of absences attributed to musculoskeletal ill health	Number of employees reporting absences attributed to musculoskeletal ill health	Absence rate attributed to musculoskeletal ill health per 1,000 employees	Percentage of employees reporting absences attributed to musculoskeletal ill health	Number of days of absence per employee attributed to musculoskeletal ill health
2022/23	1,453	78	64	151	12%	2.8
2023/24	1,596	78	71	142	12.9%	2.9
<b>2024/25</b>	<b>1,712</b>	<b>81</b>	<b>64</b>	<b>141</b>	<b>12.3%</b>	<b>3.2</b>

## 7. OCCUPATIONAL HEALTH

### 7.1 Referrals to Occupational Health Services

Referrals	Total Number of contacts
2021/22	239
2022/23	349
2023/24	304
<b>2024/25</b>	<b>286</b>

### 7.2 Type of Referral

	2022/23	2023/24	2024/25
Management Referrals	76	82	<b>110</b>
Statutory Health Surveillance <sup>(1)</sup>	133	26	<b>6</b>
Counselling Referrals	88	116	<b>73</b>
Physio Referrals	58	63	<b>49</b>
Pre-employment Health Screening	43	17	<b>48</b>
<b>Total</b>	<b>398</b>	<b>304</b>	<b>286</b>

<sup>(1)</sup> Statutory health surveillance refers to health surveillance undertaken in line with legal requirements such as hand-arm vibration screening, audiometry and lung-function testing.

### 7.3 Occupational Health Services Provided

Service	2022/23	2023/24	2024/25
<i>Management Referral</i> (including sickness absence and reviews)	76	<b>87</b>	<b>114</b>
Hand/arm vibration syndrome health surveillance	133 (periodic assessment)	<b>23 (tier 4 assessments)</b>	<b>1</b>
Form 6 medical (assessment for application for early retirement on grounds of continuing ill health)	0	<b>1</b>	<b>1</b>
Audiometry testing (3yearly)	0	<b>0</b>	<b>0</b>
Case Conference	7	<b>8</b>	<b>7</b>

Service	2022/23	2023/24	2024/25
Workplace Assessment	0	0	0
Asbestos Medical Examination	0	0	4
Workstation Assessment	0	7	4
Spirometry/Lung Function Testing	0	3	6
Vaccination Programme (Flu)	113 – onsite at GP and Carlton	92	114
<b>Total</b>	<b>377</b>	<b>221</b>	<b>251</b>

#### 7.4 Occupational Health Contacts by Practitioner

Seen by	Numbers of Contacts 2022/23	Number of contacts 2023/24	Number of contacts 2024/25
Physician/Specialist Practitioner in Occupational Health	22	119	64
Nurse	94	7	14
Did not attendees – Physician/Specialist Practitioner in Occupational Health	4	2	6
Did not attendees – Nurse	4	0	1
Could not attendees – Physician/Specialist Practitioner in Occupational Health	0	4	1
Could not attendees – Nurse	0	1	0
<b>Total</b>	<b>124</b>	<b>133</b>	<b>86</b>

<b>Report Title</b>	<b>Building Safety Compliance and Disrepair Year End Report 2024/25</b>	<b>Confidential</b>	No
<b>Report Author</b>	<b>Arturo Gulla Executive Director Property Services</b>	<b>Report Status</b>	For Approval
<b>Report To</b>	<b>Board 24<sup>th</sup> July 2025</b>	<b>Officer Contact Details</b>	<a href="mailto:arturogulla@berneslaihomes.co.uk">arturogulla@berneslaihomes.co.uk</a>

## 1. Executive Summary

In 2024/25, Building Safety Compliance was reported as 99.67% across six key areas: Fire, Electrical, Gas, Asbestos, Legionella, and Lifts.

Positive Highlights:

Berneslai Homes meets all 5 Building Safety Compliance TSM Measures, as verified by BMBC Corporate Assurance Team.

- Gas (BS01) compliance is 100%
- Fire (BS02) compliance is 100%
- Asbestos (BS03) compliance is 100%.
- Non-domestic Legionella (BS04) compliance is 100%
- Passenger Lifts (BS05) compliance is 100%

Following a Tenant Satisfaction Measures (TSM) audit carried out in May 2025, it was identified that the data included in the calculation around building safety areas shouldn't have included leaseholders and blocks where asbestos is not present. As a result, the figures have been adjusted. This correction does not compromise the overall safety of any blocks, as all standard procedures have been followed to ensure compliance and we remain at 100% compliance for all compliance areas. To prevent future errors, new Standard Operating Procedures and automated reports are being developed to ensure accurate tracking of property ownership status.

#### Areas of Focus:

- **Fire safety** equipment, servicing, and maintenance were 98.31% compliant. Emergency lighting maintenance is outstanding at three premises, and automatic smoke ventilation maintenance is pending at one, we are prioritizing these issues with BPS. The team has begun the annual inspection of the 55 flat entrance fire doors at Buckley House.
- **Electrical compliance** over 10 years was 99.93% with 12 outstanding reports. These tenanted properties have denied access despite injunctions; these cases and the remaining 12 are either with legal teams or nearing resolution. The project, led by BMBC and Berneslai Homes, aims to enhance access and compliance for challenging properties. Electrical compliance over 5-year was 98.86% with 208 condition reports outstanding.
- In June 2025, the Government laid the regulations relating to Electrical Safety testing in the social rented sector, which will require social landlords to carry out checks on electrical installations every five years and in-service inspections and testing of electrical equipment (ISIT) sometimes known as Portable Appliance Testing (PAT) on all electrical appliances provided as part of a tenancy. These changes will come into force in November 2025 for new tenancies, and May 2026 for existing tenancies. A full report will come to Board in September 2025.
- **Domestic Lifting Equipment** achieved a compliance rate of 97.63%, with 15 outstanding appliances. These included 11 stairlifts (4 with appointments booked), 3 Through Floor Lifts (1 void, 1 awaiting an electrician check but disconnected, 1 awaiting access due to the tenant being in hospital), and 1 Hoist currently void-related.
- **Smoke and CO installations** are required for 60 properties that are classified as 'no access', resulting in an overall compliance rate of 99.67%.

The Property Compliance team works in close collaboration with the Neighbourhood and Legal teams to address and resolve issues related to "no access" situations and to ensure access to properties for inspections.

- **Damp, Mould & Condensation** - In the 2024-25 financial year, Berneslai Homes received 5243 reports of damp, mould, and condensation (DMC). These jobs were issued to contract partners as 7-day orders, with a performance rate of 99.66% being attended within 7 days.

	<p>Awaab's Law will come into effect on the 27 October 2025. From that date social landlords will have to address all emergency hazards and all damp and mould hazards that present a significant risk of harm to tenants within fixed time frames. We have commissioned Pennington Choices to assist us with amending our damp, mould, condensation policies and procedures to reflect the new guidance. The government are undertaking a test and learn approach to monitor the new regulation. A full report will come to Board in September 2025.</p> <ul style="list-style-type: none"> <li>• <b>Disrepair</b> – The total number of disrepair claims received in 24/25 was 154. In the first quarter of 2025, there were 19 disrepair claims, a notable decrease from the 45 claims received in the same period of 2024. However, the enactment of Awwab's Law may potentially result in an increase in claims for the 2025/26 period. The government has announced it is undertaking a call for evidence on claims harvesting this year.</li> </ul>
<b>2. Recommendation</b>	The Board is asked to approve the 2024/25 year-end report and note the areas of focus.

### 3. Background

- 3.1 Berneslai Homes is committed to achieving the highest standards of building safety compliance and this report sets out Berneslai Homes' year end performance delivering this work across all key areas of compliance.

The Board should note that in July 2023, Barnsley Council's Cabinet approved the Governance Arrangements for Building and Fire Safety. This approval outlines the Council's accountability as the landlord of its 18,000 housing units under the new Building Safety and Fire Acts, and specifies the responsibilities delegated to Berneslai Homes under the services agreement. As the landlord, Barnsley Council is responsible for compliance with Fire Safety and Building Safety legislation and must ensure that buildings remain safe. The Council must also engage tenants in maintaining the health and safety of their homes and communal area.

- 3.2 Rigorous audits have been carried out to ensure compliance with reports submitted quarterly to the Audit & Risk Committee. External audits by Pennington Choices in Q3 2021-22 and internal audits by BMBC's Corporate Assurance Team in Q1 2022-23 assessed fire and building safety. In Q4 2023-24, we completed lift compliance and smoke and CO compliance audits, receiving reasonable assurance. We are addressing the agreed management actions and Pennington Choices conducted a desktop review of our Building Safety Cases in Q4 2023-24. An internal audit on electrical safety inspections was undertaken in 24/25, receiving reasonable assurance.

- 3.3 The teams are concentrating on performance enhancements and efficiencies in collaboration with our contract partners, Property Services Repair Team and Wates. Numerous actions have been initiated and implemented to help improve efficiency and ensure full compliance across all Building Safety and Compliance., The most significant improvement has been the introduction of a new compliance management system and the streamlining of processes. Both delivery partners leverage the partnering arrangement to optimize resource availability in critical areas and to share best practices.
- 3.4 The Building Safety Scorecard, developed with Pennington Choices Compliance Roadmap, provides an oversight of performance and the areas that require improvement. The attached scorecard (Appendix A) shows performance up to March 2024. We aim to fully implement our new Compliance Management System C365 by July 2025, which will enhance current reporting.
- 3.5 Building Safety Compliance performance is a regular agenda item for the Audit and Risk Committee. It is also included in the performance report presented to the Customer Services Committee and BMBC's Services Agreement Core Group, ensuring comprehensive oversight by both staff and customers. A Building Safety Board comprising of council representatives, tenants and officers also meets quarterly. Areas of concern are escalated to the Delivery Plan Assurance Group and Members as necessary. An example of such escalation and the formation of a dedicated task force is the work on EICR access mentioned in section 4.3.

#### 4. Current Position/Issues for Consideration

- 4.1 We are currently reporting very good performance, while also highlighting areas where further progress is required. We have a comprehensive understanding of these issues and are undertaking appropriate measures to address them, as detailed below.
- 4.2 **The Fire Risk Assessment (FRA) programme** is 100% compliant. Outstanding remedial tasks have significantly decreased, with zero open actions at year-end. In-plan actions have been integrated into formal work plans based on building and action risks. Additional surveys, such as roof surveys, were conducted for three high-rise buildings by Pennington Choices and Align to align with Building Safety Cases.
- 4.3 **Electrical** compliance has shown consistent improvement, with 10-year electrical compliance at 99.93% (12 condition reports outstanding) and 5-year compliance at 98.86% (208 condition reports outstanding). There are no outstanding C1 electrical remedial works, and there are currently 68 C2 remediations in progress. We have prioritised properties that were beyond the 10-year compliance window. We are working with BMBC's Legal Team who have developed a hard-hitting leaflet and letter; these have been delivered to all the properties currently outstanding on the 10-year programme. We have been successful in obtaining injunction hearings to 14 properties allowing us to gain access and carry out an overdue electrical inspection condition report. In June 2025, the Government laid the regulations relating to Electrical Safety testing in the social rented sector, which will require social landlords to carry out checks on electrical installations every five years and in-service inspections and testing of electrical equipment (ISIT) sometimes known

as Portable Appliance Testing (PAT) on all electrical appliances provided as part of a tenancy. These changes will come into force in November 2025 for new tenancies, and May 2026 for existing tenancies. A full report will come to Board in September.

- 4.4 **Gas** compliance was 100% at year end. Our processes and ability to obtain entry warrants ensure Berneslai Homes maintains strong compliance performance.
- 4.5 **Asbestos** compliance remains at 100%. The reinspection programme for the 2024/2025 period was completed as required.
- 4.6 **Water Hygiene** has maintained a consistent performance, with Legionella Risk Assessments (LRAs) for non-domestic properties remaining at 100%. There were no overdue remedial tasks at the end of the year.
- 4.7 **Passenger lift** compliance is 100%. Performance for domestic Lifting Equipment remains a focus, with overall compliance at 97.63% and 15 appliances non-compliant. The main challenge is gaining access to properties for servicing, with 2 of the outstanding domestic lifts being related to 'no access'. The Lifts Compliance Officer is working with the Neighbourhood teams to resolve this issue, as the legal channels available for gas compliance cannot currently be applied to lifts.
- 4.8 **Damp, Mould and Condensation** - In the 2024-25 financial year, Berneslai Homes received 5243 reports of damp, mould, and condensation (DMC). These jobs were issued to contract partners as 7-day orders, with a performance rate of 99.66% being attended within 7 days.

The Damp, Mould and Disrepair team has been diligently addressing the challenges in this area and ensuring we are well-prepared to fulfil our obligations under Awaab's Law, which will come into effect in October 2025. We have been collaborating with specialist consultants, Pennington Choices, to assist in managing the demand effectively.

The NEC housing management system provides frontline staff and operatives with the functionality of reporting properties they believe require a visit. While the figures have increased, this is seen as an indication that our training and proactive approach are effective, and staff are following our vulnerability protocol. This protocol requires all employees to report suspected vulnerability even if they do not have extensive knowledge of behaviours, symptoms, and solutions, and to ensure they report instances where something appears unusual.

We have collaborated closely with the customer services team to learn from complaints, which has led to the implementation of several service improvements. These include the creation of a Damp and Mould tracker and the establishment of a comprehensive triage process before and after work, aimed at enhancing communication.



Awaab's Law will come into effect on the 27 October 2025. From that date social landlords will have to address all emergency hazards and all damp and mould hazards that present a significant risk of harm to tenants within fixed time frames. We have commissioned Pennington Choices to assist us with amending our damp, mould, condensation policies and procedures to reflect the new guidance. The government are undertaking a test and learn approach to monitor the new regulation. A full report will come to Board in September 2025.

- 4.9 **Disrepairs** – The total number of Disrepair claims in 24/25 were 154. In the first quarter of 2025, there were 19 disrepair claims, a notable decrease from the 45 claims received in the same period of 2024. The settlement costs are covered by the Housing Revenue Account (HRA), excluding staff costs involved in the process. The government has announced it is undertaking a call for evidence on claims harvesting this year.

<b>Disrepair Claims (Calendar Years)</b>	
<b>Year</b>	<b>Settlement Cost</b>
<b>2020</b>	<b>£109,670.90</b>
<b>2021</b>	<b>£152,725.16</b>
<b>2022</b>	<b>£122,383.03</b>
<b>2023</b>	<b>£147,420.11</b>
<b>2024/25</b>	<b>£145,215.99</b>

There were 85 'live claims at year end which were ongoing between solicitors, 1 of those being from 2023.

<b>Ongoing (Live) Claims</b>	
2023	1
2024	65
2025	19
Total	85

The top 5 categories of disrepair claims related to the following works:

1. Damp and mould
2. Ill-fitting doors and windows
3. Cracks / holes / damaged plaster / leaks
4. Defective roof / guttering and masonry.
5. Defective electrics / lack of extractor fans.

Berneslai Homes have revised our strategic approach to maintain stock decency. In agreement with BMBC, we have reallocated capital budgets from investment programs to address accumulated works, which have led to a reduction in complaints and disrepair claims. We will continue to monitor progress.

## 5. Customer Voice/Impact

This internal information ensures we meet legal obligations without needing tenant input. However, it significantly affects tenants' health, safety, wellbeing, and security.

Tenants can review and challenge our building safety compliance at meetings like the Customer Services Committee, Audit and Risk Committee, and the Damp and Mould Task Group. We publish our performance openly in our annual report. Berneslai Homes has a strong resident engagement panel that encourages feedback.

We actively promote complaints as they offer valuable feedback for improvement.

## 6. Risk and Risk Appetite

### 6.1 Building Safety Compliance Performance is strong at year-end, but any outstanding work or lack of full compliance poses risks for tenants, staff, Berneslai Homes, and BMBC.

There is a cautious approach to rising disrepair claims and compliance with new legislation in the sector.

Operational/Strategic Risk Type	Name	Risk Appetite
Strategic	The health and Safety of Tenants and Staff	Averse
Strategic	Failure to meet increasing and changing regulatory requirements	Averse
Strategic	Damp, Mould and Condensation	Averse
Operational	Disrepair Increase	Cautious
Operational	Building Safety and Fire Safety – Compliance with legislation	Cautious

## 7. Strategic Alignment

Building Safety Compliance Performance aligns with both Berneslai Homes Strategic Plan and BMBC's Barnsley 2030 strategy, specifically regarding Hearing Customers and Keeping Customers Safe. These measures indicate how communication with tenants is managed and how compliance with legislation aimed at ensuring tenant safety in their homes is achieved.

## 8. Data Privacy

No personal data is used in the production of this report.

9. Consumer Regulatory Standards

Building Safety Compliance falls under the RSH (Safety and Quality) consumer standards and monitors our ability to provide our tenants with quality and safe homes.

10. Other Statutory/Regulatory Compliance

Provides assurance for the following legislation:

- Defective Premises Act 1972
- Environmental Protection Act 1990
- Landlord and Tenant Act 1985 (Section 11)
- Housing Act 2004
- Decent Homes Standard 2006
- Equality Act 2010
- Home Standard, Regulator of Social Housing 2015
- Homes (Fitness for Human Habitation) Act 2018
- Pre-Action Protocol for Housing Conditions Claims (England) 2021

11. Financial

All work are costed and budgeted and adherence to budget is reviewed and confirmed monthly by BMBC. The 24/25 Compliance Budget was £7,878,663

12. Human Resources and Equality. Diversity and Inclusion

The provision of a home that is warm, safe and comfortable is a fundamental requirement of the Decency standard, promotes good health and wellbeing and is a fundamental component of basic human rights.

Equality Impact Assessments are carried out on any large projects or procurement relating to Building Safety Compliance.

13. Sustainability Implications

None.

14. Associated Background Papers

None.

15. Appendices

Appendix A: Building Safety Scorecard – March 2025.

16. Glossary

BMBC – Barnsley Metropolitan Borough Council

TSM – Tenant Satisfaction Measure

CO – Carbon Monoxide

DMC – Damp, Mould and Condensation


FRA – Fire Risk Assessment

EMT – Executive Management Team

C1 – Code 1 (Danger Present - Immediate Remedial Action is Required as per NECEIC)

C2 – Code 2 (Potentially Dangerous - Urgent Remedial Action is Required as per NECEIC)

TSM – Tenant Satisfaction Measures

DATE REPORT RUN 31/03/2025		Creating GREAT Homes & Communities for the People of Barnsley								BUILDING SAFETY SCORECARD				
TOTAL ASSET NUMBERS		Domestic Properties		Non-Domestic Properties		Other		Traveller site / Queens House						
17,935		766		35		44								
COMPLIANCE AREA	In Date / Compliant	Expired / Non-Compliant	In Date / Compliant	Expired / Non-Compliant	In Date / Compliant	Expired / Non-Compliant	In Date / Compliant	Expired / Non-Compliant	Data Source	Copy Provided	% Compliant	NARRATIVE - 1) Current Position, 2) Corrective Action Required, 3) Anticipated Impact of Corrective Action, 4) Progress with Completion Follow up Works		
TENANT SATISFACTION MEASURES														
B501: Gas safety checks	16,883	0							Spreadsheet		100.00%	100% Compliance		
B502: Fire safety checks	1,024	0							Spreadsheet		100.00%	100% Compliance		
B503: Asbestos safety checks	880	0							Spreadsheet		100.00%	100% Compliance		
B504: Water safety checks	882	0							Spreadsheet		100.00%	100% Compliance		
B505: Lift safety checks	408	0							Spreadsheet		100.00%	100% Compliance		
FIRE SAFETY - Fire Risk Assessment (FRA) PROGRAMME														
Assets on Programme			2012	0	0	0			Spreadsheet		100.00%	100% Compliance		
Assets NOT on Programme			502		34									
FIRE SAFETY - REMEDIAL ACTIONS														
Immediate Action Required			0	0	0	0			Spreadsheet/C365			100% Compliance		
High (2 month)			0	0	0	0			Spreadsheet/C365					
Medium (6 months)			0	0	0	0			Spreadsheet/C365					
Low (12 months)			0	0	0	0			Spreadsheet/C365					
In plan works - High			0	0	0	0			Spreadsheet/C365					
In plan works - Medium			0	0	0	0			Spreadsheet/C365					
In plan works - Low			0	0	0	0			Spreadsheet/C365					
All Fire Actions			0	0	0	0								
FIRE SAFETY - EQUIPMENT SERVICING & MAINTENANCE														
Fire Detection & Warning			120	0					Spreadsheet		100.00%	There are three premises where the emergency lighting maintenance is outstanding and one premises where the automatic smoke ventilation maintenance is outstanding. We are working with BPS to get these completed as a priority. At the time of compiling the report the team had just started the annual inspection of the 55 flat entrance fire doors for Buckley House. (55)		
Emergency Lighting			115	0					Spreadsheet		100.00%			
Fire Extinguishers			306	0					Spreadsheet		100.00%			
Smoke Vents			4	1					Spreadsheet		80.00%			
Fire Blankets			48	0					Spreadsheet		100.00%			
Communal Fire Door Inspections			575	0					PIMMS		100.00%			
Flat Entrance Fire Door Inspections			930	35					PIMMS		96.37%			
All Fire Actions			2098	36							98.31%			
FIRE SAFETY - FIRES REPORTED (CUMULATIVE)														
Total number of fires reported within reporting year	47								Spreadsheet		Incidents			
FIRE SAFETY - PROPERTIES WITH SMOKE / CO ALARMS FITTED														
Assets on Programme	17,875	60									99.67%			
Assets NOT on Programme	0													
DAMP AND MOULD - REPAIR REQUESTS														
7-day jobs raised during month		346							Spreadsheet		1.93%	CS- Raised: 286, Cancelled: 8, Completed: 159, Open: 119. - Raised: 60, Cancelled: 1, Completed: 46, Open: 13. Issues identified.		
Open 7-day jobs at month end		132							Spreadsheet		0.74%			
HHSRS (CAT1/2) damp / mould risks identified in month		0							Spreadsheet		0.00%			
DAMP AND MOULD - COMPLAINTS														
Open stage 1 complaints		2							Customer Services		0.01%	Service requests that we closed in March relating to DM – 5 Stage 1 closed in Feb – 8 Stage 2 closed in Feb – 4  Currently we still have the following open formal complaints that's relate to D&M Stage 1 – 2 Stage 2 – 5  So far this financial year closed the following damp and mould: Service requests – 111 Stage 1 – 87 Stage 2 – 33 (of the complaint span's across a number of issues, we have logged it against the main reason for the complaint)		
Open stage 2 complaints		5							Customer Services		0.03%			
Total number of complaints open within the quarter		7							Customer Services		0.04%			
DAMP AND MOULD - DISREPAIR CLAIMS														
Total live claims relating to damp and mould (cum in yr)		121							Spreadsheet		0.67%			
ELECTRICAL SAFETY - Electrical Installation Condition Report (EICR) PROGRAMME < 10 years and < 5 years														
Assets on Programme with an in date EICR <10 years	17,923	12					44	0	Workbooks		99.93%	Of the 12 still not completed: 5 have had injunction granted but tenants have not allowed access, one is long ten void with BMBC, one is with Neighbourhood Team, the remainder are either with legal or at end stage of access process.		
Assets on Programme	17,935						44							
Assets on Programme with an in date EICR <5 yrs	17,727	208	223	0			44	0	Workbooks		98.86%	There has been an increase in the number of non-compliant EICR in this criteria. A number of properties due to be carried out by Property Services have been issued to a sub-contractor due to failure to deliver the required numbers.		
Assets on Programme	17,935		223				44							
C-1	0	0	0	0	0		0	0	Spreadsheet			The non-compliant C2 are being processed for new EICR to be carried out. This is because of the time that has elapsed since the last EICR and the inability to reassess		
C-2	10	58	0	0	0		0	0	Spreadsheet					
GAS SERVICING														
Assets on Programme	16,065	0	4	0	51	0			Spreadsheet		100.00%	100% Compliance on Gas Servicing		
Assets NOT on Programme	1,870		751		0									
COMMERCIAL GAS REMEDIALS														
All commercial gas remedials					0	0					100.00%	100% Compliance		
DOMESTIC PROPERTIES (Without Gas)														
Assets on Programme	635	0							Partners		100.00%	100% Compliance		
VOIDS CAPPED														
No. of Voids Capped in Month within 24 hrs of Becoming Void	87	0							Partners		100.00%	100% Compliance		
No of Tenanted Homes Capped (monitoring metric only) long term capped off														
No of Tenanted Homes Capped (monitoring metric only)	156								Partners					
Solid Fuel														
Homes on the Programme	98	0							Spreadsheet		100.00%	100% Compliance		
Asbestos														
Assets on Programme			531	0	25	0	1	0	PIMSS/Spreadsheet		100.00%	New mobile worker app developed by C365 will be ready to use in April 25. Reinspects to be carried out by M Holland.		
Assets NOT on Programme			279		9		43							
WATER HYGIENE: Legionella risk assessments														
Assets on Programme	16722	75	62	0	16	17	0	0	PIMSS, Spreadsheet, C365		99.46%	Other (Housing Shops): Compliance Officer continues to work with BMBC to encourage tenants to carry out LRAs or to agree for Berneslai Homes to complete them. Commercial LRAs - All compliant Domestic LRAs - Compliance Officer is now ordering these with partners to complete with heating service when possible. Current spreadsheet is being continuously updated.		
Assets NOT on Programme	1,213		704		19		0							
WATER HYGIENE: Inspection checks														
Flushing			171	1					Teams / spreadsheet		99.42%	Darfield Road CC - no access but recovered the week after		

Temperatures			58	0					Teams / spreadsheet /C365		100.00%	all compliant
Annual monitoring			58	0					Teams / spreadsheet /C365		100.00%	
			287	1							99.65%	all compliant
WATER HYGIENE												
High (1 month)	0	0	0	0								
Medium (3 months)	0	0	0	0								
Low (6 months)	1	0	5	0					SAP/NEC			
All Actions	0	0	0	0								
SERVICE & MAINTENANCE CHECKS												
Passenger Lifts(14) / Platform lifts (6)	20	0							Engineers sheets		100.00%	all lifts compliant
Stairlifts	463	11							Engineers sheets		97.68%	uncompliant lifts - 11 - 4 VOID, 1 Requires Removal, 1 Requires renewing, 4 now rebooked, 1 access issues
Steplifts	1	0							Engineers sheets		100.00%	all lift compliant
Throughfloor lifts (TFL)	33	3							Engineers sheets		91.67%	Uncompliant lifts 3 - 1 VOID, 1awaiting electric check but disconnected, 1 - no access - user has had major operation and is bed-bound compliance officer working with family to gain access
Hoists	100	1							Engineers sheets		99.01%	1 uncompliant property is VOID
All	617	15									97.63%	
ENERGY EFFICIENCY												
SCS	15,685	2217							Spreadsheet		87.62%	Reduction following year end reconciliation.
EPC	15,520	2382							C365		86.69%	Reduction following year end reconciliation.



Creating great homes and communities  
with the people of Barnsley

<b>Report Title</b>	<b>HRA Capital Investment 2024/25 year-end financial &amp; activity report</b>	<b>Confidential</b>	<b>No</b>
<b>Report Author</b>	<b>Arturo Gulla – Executive Director of Property Services</b>	<b>Report Status</b>	<b>For Information</b>
<b>Report To</b>	<b>Board 24/7/2025</b>	<b>Officer Contact Details</b>	arturogulla@berneslaihomes.co.uk

1. Executive Summary

To comply with the Regulator for Social Housing Safety and Quality Consumer Standard, Berneslai Homes on behalf of the Landlord Barnsley Metropolitan Borough Council is required to ensure that homes are good quality, well maintained and safe under their responsibility and meet the standard set out in the Government’s Decent Homes Guidance.

The Housing Revenue Account (HRA) Decent Homes Capital Investment Report 2024/25 (Cab.6.3.2024/9) was approved by Council Cabinet on 6 March 2024. The programme was delivered through the Property, Repairs and Improvement Partnership (PRIP) contract and externally tendered work packages.

This report gives a high-level overview of the investment outturns across Berneslai Homes Barnsley Homes Standard (BHS) programme and supplementary capital workstreams.

The below table shows the 2024/25 approved budgets, financial outturns and the work activity completed for each workstream.

Workstream	Respons- ibility	Budget (£M) 2024/25	Outturn (before Slippag e) (£M) 2024/25	Differenc e (£M) +/-	No works complete d
BHS 2024/25	Assets	£4.50	£3.56	-£0.94	1101
BHS Roofing Scheme	Assets	£1.46	£1.42	-£0.04	
Reactive Component (Programme) Replacements	Assets	£5.64	£4.52	-£1.12	2513
Major Adaptations	Assets	£4.99	£4.47	-£0.52	929

Community Refurbishment Scheme	Assets	£0.33	£0.32	-£0.01	25
Urgent Domestic Heating	R&M	£0.54	£0.50	-£0.04	140
District Heating	R&M	£0.34	£0.19	-£0.15	3
Major Voids	R&M	£2.54	£2.38	-£0.16	169
Structural Extensive	R&M	£1.40	£1.80	+£0.40	139
Timber Floor Replacements	R&M	£0.80	£1.17	+£0.37	15
High Rise Wall Ties	R&M	£0.25	£0.00	-£0.25	NA

\*This extract does not include other areas that are not material to this report, which were included in the HRA Repairs & Maintenance Finance report that went to May's Board.

Workstream activity highlights commentary against capital budget headings.

#### **BHS Programme:**

- 1101 elements completed with 220 elements not delivered due to access or tenant refusal.
- Major works completed: kitchen and bathroom replacements, roof repairs, loft insulation, and extractor fan installations

#### **Reactive Component (Programme Replacements):**

- Carried over backlog works from 2023/24.
- Focus on replacing components beyond repair, including kitchens, bathrooms, doors, and addressing urgent damp/mould issues with ventilation and fans

#### **Major Adaptations**

- 65% of works involved installing wet rooms, stairlifts, and ramps
- Improvements aimed at enhancing tenants' accessibility and independence

#### **Community Refurbishment Scheme:**

- 7 apprentices involved in 28 external improvement projects (boundary walls, fencing, driveways).
- Output lower than estimated due to larger boundary properties being involved

#### **Urgent Domestic Heating:**

- Replaced 140 heating systems, including gas and air-source heating.

#### **District Heating:**

- Replaced heating appliances in two communal schemes and repaired underground pipes.



	<ul style="list-style-type: none"> <li>• Pre-emptive modem replacements for future 2G signal switch-off</li> </ul> <p><b>Major Voids:</b></p> <ul style="list-style-type: none"> <li>• 169 Major Voids were completed in-year</li> <li>• 193 major voids carried over to 2025/26.</li> </ul> <p><b>Extensive Structural Works:</b></p> <ul style="list-style-type: none"> <li>• Addressed urgent issues (re-roofing, subsidence, damp, retaining walls).</li> <li>• Significant budget allocation for disrepair claims.</li> </ul> <p><b>Timber Floor Replacements:</b></p> <ul style="list-style-type: none"> <li>• 39 out of 44 properties completed (15 in 2024/25)</li> <li>• Works included floor replacements, drainage improvements, and additional structural support</li> <li>• Plan for remaining properties agreed with BMBC</li> </ul> <p><b>High Rise Wall Ties:</b></p> <p>Work delayed due to regulatory approval requirements (Gateway 2) from Building Safety Regulator. In 2024/25, Berneslai Homes had a capital investment budget of £26.278M for works to Council homes, including £2.814M advanced from the 2025/26 budget. However, the actual outturn was £22.100M, resulting in an underspend of £4.182M. The underspend was mainly due to delays in the Barnsley Homes Standard programme, where roofing work was postponed due to required asbestos removal and tenant access/refusal issues. Similarly, the Reactive Component Replacements programme faced an underspend due to inaccurate data, over-forecasting, and reduced work delivered. A review of the PRIP contract is expected to address these forecasting issues going forward.</p>
<p><b>2. Recommendation</b></p>	<p>That Board review and provide feedback to the 2024/25 capital investment programme financial and activity outturn reported.</p>

### 3. Background

- 3.1 To comply with the Regulator for Social Housing Safety and Quality Consumer Standard, Berneslai Homes on behalf of the Landlord Barnsley Metropolitan Borough Council is required to ensure that homes are good quality, well maintained and safe under their responsibility and meet the standard set out in the Government's Decent Homes Guidance.
- 3.2 The HRA Decent Homes Capital Investment Report 2024/25 (Cab.6.3.2024/9) refers was approved by Council Cabinet on 6 March 2024. The programme was delivered through the Property, Repairs and Improvement Partnership (PRIP) contract and externally tendered work packages.

- 3.3 It was agreed the BHS programme 2024/25 would be reduced and there would be a reallocation of the budgets to support the prioritisation of backlog works across other capital workstreams where there was an accumulated backlog of works i.e. Programmed Replacements and Major Adaptations.
- 3.4 Both Programmed Replacements and Major Adaptations had budget advancements of £2.8M approved by the Council Cabinet on December 2024 (Cab.11.12.2024/14)
- 3.5 This report gives a high-level overview of the Investment outturns across Berneslai Homes BHS and non-BHS Capital Workstreams. The below table shows the 2024/25 approved budgets, financial outturns and the work activity completed for each workstream.

Workstream	Responsibility	Budget (£M) 2024/25	Outturn (before slippage) (£M) 2024/25	Difference (£M) +/-	No works completed
BHS 2024/25	Assets	£4.50	£3.56	-£0.94	1101
BHS Roofing Scheme	Assets	£1.46	£1.42	-£0.04	
Reactive Component (Programme) Replacements	Assets	£5.64	£4.52	-£1.12	2513
Major Adaptations	Assets	£4.99	£4.47	-£0.52	929
Community Refurbishment Scheme	Assets	£0.33	£0.32	-£0.01	25
Urgent Domestic Heating	R&M	£0.54	£0.50	-£0.04	140
District Heating	R&M	£0.34	£0.19	-£0.15	3
Major Voids	R&M	£2.54	£2.38	-£0.16	169
Structural Extensive	R&M	£1.40	£1.80	+£0.20	139
Timber Floor Replacements	R&M	£0.80	£1.17	+£0.37	15
High Rise Wall Ties	R&M	£0.25	£0.00	-£0.25	NA

\*This extract does not include other areas that are not material to this report, which were included in the HRA Repairs & Maintenance Finance report that went to May's Board.

#### 4. Current Position

##### **Barnsley Home Standard 2024/25**

- 4.1 The BHS surveys identified 1321 failed components across the selected address list including the roofing programme. During the 2024/25 programme 1101 components were replaced. From the initial agreed programme there were 220 elements that were not delivered. The main reasons for this were no access or tenant refusal. All identified compliance and building safety works are mandatory for tenants and cannot be refused i.e. electrical or fire safety works. The largest elements of work delivered through the programme were replacement kitchen, bathrooms, roofs, loft insulation and extractor fans.

- 4.2 The below table details the total component fails and how many of each were replaced.

Element	Initial	Completed
Kitchens	149	125
Bathroom/Wet room	135	99
Rewires	48	37
Electrical Upgrade	0	0
Boiler Upgrade	52	38
Dry Ridge	45	45
Dry Hip	13	13
Dry Verge	23	23
Chimney Works	64	62
Loft Insulation	120	100
Cavity Insulation	3	0
Damp Treatment	46	49
External Doors	6	7
Windows (addresses)	3	3
Rainwater Goods	45	43
Extractor Fans	324	213
External Wall Insulation	2	3
EWI Window Panels	2	2
Re-Roofing (Slipped)	176	172
Re-Roofing (In Year)	65	67
<b>TOTAL</b>	<b>1321</b>	<b>1101</b>

- 4.3 The total value of the elements not completed based on our average costs is approximately £0.52M

#### **Reactive (Programme) Replacements**

- 4.4 The demand led programme did start with a backlog of works from 2023/24 financial year. The reactive scheme supports in year properties where components are beyond economic repair and require full replacement. In 2024/25 the programme delivered, large volumes of full and partial kitchens and bathrooms, and internal and external doors. The prevalence of damp and mould has also brought an influx of ventilation and fan related works through urgent orders being completed in year.

- 4.5 On the Reactive (Programme) Replacements workstream 2513 elements were replaced. The below table shows a breakdown of each.

Component	Completed
Kitchen Full	191
Kitchen Partial	119
Bathroom Full	33
Bathroom Partial	174
Concrete Paths	114
Tarmac Paths	26
Rainwater Goods	164
External Doors	256
Internal Doors	300
Garage Doors	18
Windows (addresses)	95
Fans	958
Fire	65
<b>TOTAL</b>	<b>2513</b>

### Major Adaptations

- 4.6 The demand led programme did start with a backlog of works from 2023/24 financial year. Of the total number of works completed in the year approx. 65% was made up of wet rooms, stairlifts and ramps installations alone. These works have contributed to providing accessible, safe and comfortable living environments for our tenants, allowing them to enjoy a better quality of life and to live independently in their homes.
- 4.7 On the Major adaptations 929 elements were installed across 2024/25. The below table shows a breakdown of each.

Component	Completed
Wetroom	359
Shower Over Bath	86
Kitchen	12
Wash Dry Toilet	58
Hoist	21
Stairlift	104
Ramp	143
Door Entry System	2
Door & Door Widening	39
Through Floor Lift	8
Hardstanding	9
Fencing	8
Safe Space	9
Bath Install	10
Step Alterations	16
Misc	45
<b>TOTAL</b>	<b>929</b>

### Community Refurbishment Scheme (CRS)

- 4.8 The programme offers a working environment and training and development opportunities for young people from the local community. In 2024/25 the scheme has had 7 apprentices operating on the scheme and delivered 28 external improvements projects, which included new boundary walls, fencing, driveways and pedestrian and vehicle gates. It should be noted this is a lower outturn than estimated but some of the included in-year properties were larger corner plots
- 4.9 The CRS completed a total 28 external improvements projects in 2024/25. The table below shows a breakdown of the individual works completed.

Projects Completed	Non-CRS Projects Completed	600MM – Boundary Wall by (lm)	Driveways (m2)	Vehicle Gates	Pedestrian Gates
25	3	311	303	17	8

### Urgent Domestic Heating

- 4.10 This demand led programme only carried a small number of works from 2023/34 financial year, these works were all completed within April 2024. The reactive scheme supports the replacement of domestic heating systems when the existing systems are beyond economical repair.
- 4.11 On the Urgent Domestic Heating scheme 140 replacements were completed in 2024/25, the table below shows the breakdown of works.

Heating Replacement Type	Completed
Full Heating	3
Boiler Upgrade	48
System Upgrade	21
Boiler Swap	59
Air Source Swap	9
<b>TOTAL</b>	<b>140</b>

## District Heating

- 4.12 The demand led programme started the year with no carried over work. During the year the heating appliances at two communal schemes were replaced due to existing appliances being beyond economical repair. In addition, underground heating pipework was also replaced due to leakage and the replacement of modems in Heat Interface units began to pre-empt the switch off of 2G mobile signal.

Work Type	Completed
District Heating Boiler Replacement	2
Underground Heating Pipework	1
<b>TOTAL</b>	<b>3</b>

## Major Voids

- 4.13. This remains an area for improvement and scrutiny, with a residual number of 193 major voids being carried over in the following 2025/26 financial year. A Voids Task Group has been set up to closely manage the major voids delivery plan working closely to increase the capacity with our contractor partners and some additional resource. Weekly voids progress meetings have been taking place, with Property Services, Neighbourhoods and Lettings working closely to prioritise voids over the more challenging voids that would require a high level of investment. It should be noted due to budgetary constraints the major void programme was put on hold from October 2024. A revised 2025/26 void recovery plan report is on the July board agenda.
- 4.14 The total number of major voids completed in 2024/25 is include in the table below.

Work Type	Completed
Major voids	169
<b>TOTAL</b>	<b>169</b>

## Extensive Structural

- 4.15 Over the past year, Structural Extensive Works have been carried out to address urgent structural issues requiring immediate action that could not be deferred until the Barnsley Homes Standard Programme. A significant portion of this budget was dedicated to covering repairs agreed upon as part of Disrepair Claims against BMBC. These essential works were executed through the Property Repairs and Improvement Partnership (PRIP) by Berneslai Homes Property Services or Wates. The typical structural works undertaken included re-roofing, subsidence underpinning, major damp works, and addressing external retaining wall failures. By promptly addressing these critical repairs, we aimed to maintain the safety and integrity of our properties, ensuring a secure living environment for our residents

- 4.16 On Extensive structural 139 Jobs were actioned in 2024/25. The table below shows a breakdown of the individual works.

<b>Extensive structural works</b>	<b>Completed</b>
Retaining walls	4
Major Damp works	20
Structural repairs to property	5
Flood prevention/drainage works	5
Internal Elemental works	2
Re-roof	11
Fencing	2
Disrepair claims	90
<b>TOTAL</b>	<b>139</b>

### **Timber Floor Replacements**

- 4.17 We successfully completed work on 15 properties in 2024/2025. This comprised 11 properties on Longsight Rd and 4 on Princess St, table below shows work above the original flooring and subfloor scope of works.

<b>Timber Floor works above scope</b>	<b>Completed</b>
New Kitchen, Tanking	5
Refit Kitchen, Tanking	1
New Kitchen, Tanking, Renew solid concrete floor adjoining gable wall. Ground floor steelwork	1
Refit tenants Kitchen, Tanking, Asbestos removal	1
New Kitchen, New Bathroom, Tanking	1
New Kitchen, Tanking, Decant works (Extra oversight concrete	1
New Kitchen, Tanking, Decant works	1
Refit Kitchen, Tanking, Renew solid concrete floor adjoining gable wall.	1
New Kitchen, Extra oversight concrete.	1
Refit tenants Kitchen. Tanking, Asbestos removal.	1
New Kitchen, Tanking, False Party Wall in Kitchen, Renew solid concrete floor adjoining gable wall.	1
<b>TOTAL</b>	<b>15</b>

## High Rise Wall Ties

Work Type	Completed
High-Rise Wall Ties	0
<b>TOTAL</b>	<b>0</b>

- 4.18 The programme has not commenced in 2024/2025 due to Building Safety Regulations gateway 2 requirements. We need to submit detailed plans, specifications, and documents to the Building Safety Regulator (BSR) for approval before construction can begin. The BSR will assess the design to ensure it meets building regulations and is safe. Construction cannot start until BSR approval. We are working with BPS on detailed plans prior to submission to the BSR.

## 5. Customer Voice/Impact

- 5.1 The individual capital workstreams have their own processes for communicating with tenants for the planning and delivery of identified works to properties. The tenants receive correspondence informing them who will be carrying out the required surveys, works and dates for when these will be completed. BH Officers and contract partners are responsible collectively to support tenants through the duration of works to completion.
- 5.2 Tenant satisfaction information is collected across the capital workstreams. The PRIP contract arrangement provides contract partner performance framework through a suite of agreed KPIs on a quarterly basis for monitoring and management purposes. Where under performance is identified, this will be added to the PRIP group action tracker for appropriate action to be agreed and undertaken.
- 5.3 The overall satisfaction across the Barnsley Homes Standard programme was 96.25%. This was slightly below the 97.50% target. The primary reason for this was identified as clarity of information provided prior to works on the elemental approach process.
- 5.4 Other capital programmes completed quarterly tenant satisfaction surveys. The results do vary between but there were some common themes to consider and where appropriate action has been taken to improve service delivery. The highest satisfaction received is linked to operatives being helpful, courteous and professional. The lowest satisfaction received was overall satisfaction before works starting and works completed in a reasonable time. This low satisfaction in these areas is attributed to the backlog works carried into the year. In the worst cases tenants had been waiting over 2 years for works to be completed. There have been significant improvements in-year to address the backlog and reduce the waiting time of tenants receiving outstanding works.



5.5 Through tenant satisfaction feedback we are implementing service improvements on a regular basis across capital schemes to enhance service delivery and provide a better customer experience. Procedural changes to Major Adaptations have seen waiting times reduced for works for tenants and general process improvements on how we convey information in terms of communication with our tenants is now demonstrating a reduction in complaints.

5.6 Berneslai Homes also taken the opportunity to utilise Voicescape for gathering tenant satisfaction insight across capital schemes.

## 6. Risk

6.1 Financial – the 2024/25 capital outturn reported an underspend value of £4.182M. These are monies that could have been spent in-year and present a risk from a financial accounting and forecasting perspective for future financial management. The underspends are placed in the major repair's reserves pot. Council finance colleagues have confirmed that the funding should be available if called upon.

6.2 Backlog / Demand – there was a considerable backlog of works from 2023/24 within the 2024/25 reactive component (programme) replacement and Major Adaptation workstreams. Whilst the original backlog (anything over 12 months old) has been cleared, there continues to be a residual risk with high demand on the reactive component (programme) replacement workstream.

6.3 PRIP contract – it is recognised by Berneslai Homes and the Council that there are issues with areas of the contract that impact the delivery of work against available budget. The PRIP review commissioned by the Council is anticipated offer recommendations that provide an opportunity to amend PRIP contractual and operational practices. This will improve the Repairs & Maintenance delivery model, strengthening our services to tenants. Savills have produced a report, and the Council will be arranging delivery planning sessions in the near future to take the recommendations forward.

## 7. Strategic Alignment

7.1 The HRA Capital Investment Programme aligns to the BH strategic plan and in some part contributes to all six ambitions. Alongside maintaining decency standards across the stock, it supports the Councils 2030 vision.

## 8. Data Privacy

8.1 This report does not involve the processing of any data.

## 9. Consumer Regulatory Standards

9.1 This report relates to the following elements of the Regulatory Standard:

- 9.2 **Safety and Quality Standard** – There is a requirement to ensure that homes are well maintained under their responsibility. The aim is to ensure all properties are maintained to the required standard as set by the Decent Homes guidance. The HRA Capital Investment Programme will only serve to improve the council housing stock, with its main aim being to maintain decency across the housing stock. Alongside this it contributes to reducing revenue from repairs and maintenance, increasing energy efficiency and improving building and fire safety. The HRA Capital Investment Programme is an approach that utilises strong asset data that is formulated into a comprehensive works package, which allows for the efficient, effective and timely delivery of planned improvements across the housing stock.
- 9.3 **Neighbourhood and Community Standard** – There is an obligation to provide the safety of shared spaces for both internal and external areas. As a registered provider we are expected to work cooperatively with tenants, other landlords and relevant organisation's to take reasonable steps to ensure the safety of these spaces.
- 9.4 **Transparency, Influence and Accountability Standard** – This requires Berneslai Homes to generate and report Tenant Satisfaction Measures (TSMs). The TSMs are crucial for capital investment programmes, they provide a data-driven way to understand tenants needs and priorities, ensuring that investments are directed towards areas that will have the most positive impact on tenants lives and housing quality. TSMs also help landlords track effectiveness of their work and demonstrate accountability to tenants and the regulator. The table below shows Berneslai Homes outturn figures for 2024/25, the previous year's results and Housemark benchmark sector median data. The table also includes action being undertaken to improve performance.

TSM Measure	2024/25 Result (colour coding reflects performance against 2024/25 target)	2023/24 Result	Change from 2023/24	2024/25 Sector Median	Where we sit (colour coding reflects how well we compare with sector)	Actions Taken
TP02: Satisfaction with repairs	74.4%	75.1%	-0.7% points	74.0%	Above median	
TP04: Satisfaction that the home is well-maintained	76.7%	73.8%	-3.1% points	72.8%	Below median	<ul style="list-style-type: none"> <li>Improving communication with tenants to promote our robust safety compliance and how we keep tenants safe.</li> <li>Continue with our rolling programme of planned repairs and replacements.</li> </ul>
TP05: Satisfaction that the home is safe	71.3%	74.9%	-3.4% points	79.1%	Below third quartile	<ul style="list-style-type: none"> <li>Continuing to prioritise compliance, 100% targets for compliance on gas, fire, asbestos, water, and lift safety.</li> <li>Addressing tenant concerns through targeted safety campaigns.</li> </ul>
TP11: Satisfaction that the landlord makes a positive contribution to Neighbourhoods	58.0%	59.6%	-4.6% points	66.3%	Below third quartile	<ul style="list-style-type: none"> <li>Continued development of the Neighbourhood Service.</li> <li>Provision of a range of local engagement opportunities such as estate walkabouts and Your Community Your Say Meetings.</li> </ul>
RP01: Homes that do not meet the Decent Homes Standard	0.23%	0.09%	+0.13% points	0.3%	Above median	<ul style="list-style-type: none"> <li>Prioritising non-decent homes for improvement works.</li> <li>The use of asset data and a continuation of our stock condition survey programme on a risk-based approach to identify and address issues earlier.</li> <li>Working with contractors to ensure timely delivery of upgrades.</li> </ul>
TP03 – Satisfaction with time taken – recent repair	67.3%	75.5%	-8% points	69.9%	Below median	<ul style="list-style-type: none"> <li>Launch of a refreshed transactional tenant feedback survey to better understand any concerns at the point a repair is completed and to inform service improvements and staff training.</li> <li>Continuing to improve our IT systems so we can schedule repairs more effectively and keep tenants informed with text/phone updates so tenants know when we're coming to them and where there are delays.</li> </ul>

10. Other Statutory/Regulatory Compliance

- 10.1 The HRA Capital Investment Programme helps to maintain compliance with the Decency Standards as well as R&M and building safety requirements such as fire safety and electrical and gas compliance.

11. Financial

- 11.1 The total 2024/25 HRA capital investment budget for works to Council homes was £26.278M. This included £2.814M earmarked for 2025/26 capital budget, which was approved by the Council to be accelerated into 2024/25 to support reactive component (programme) replacements and major adaptations workstreams.

- 11.2 The total 2024/25 capital outturn after slippages was £22.100M. This left an underspend of £4.182M against the original capital investment budget envelope.

12. Human Resources and Equality, Diversity and Inclusion

- 12.1 The HRA Capital Investment programme will endeavour to maintain a fair and equal approach to all tenants and properties, in line with our policies and procedures.

- 12.2 The capital workstreams have their own processes for communicating with tenants for the planning and delivery of identified works to properties. Officers are provided information on tenant's individual needs and their circumstances in relation to any prospective capital works. This provides assurance that we are proactively tailoring our service to meet the diverse needs of our tenants by supporting and arranging reasonable adjustments where required to ensure improvement works can be carried out successfully.

13. Sustainability Implications

- 13.1 This report details how the HRA Capital Investment Programme contributes to the zero carbon initiatives.

14. Associated Background Papers

- 14.1 There are no background papers associated to this report.

15. Appendices

- 15.1 None.

16. Glossary

- 16.1 None.

<b>Report Title</b>	<b>Value for Money Annual Report</b>	<b>Confidential</b>	Yes
<b>Report Author</b>	<b>Executive Director of Resources</b>	<b>Report Status</b>	For Information
<b>Report To</b>	<b>Board 24th July 2025</b>	<b>Officer Contact Details</b>	Ed Long Head of Finance <a href="mailto:edwardlong@berneslaihomes.co.uk">edwardlong@berneslaihomes.co.uk</a>

<b>1. Executive Summary</b>	<p>This report provides a summary of Berneslai Homes' commitment to achieving and demonstrating Value for Money, highlighting achievements and actions taken during 2024/25 and planned actions in 2025/26 and beyond. The report was considered by the Audit &amp; Risk Committee on 17<sup>th</sup> June 2025.</p> <p>Value for Money ("VfM") is embedded in everything we do. Obtaining the best outcomes for our customers, within available resources, is the key to achieving value for money as set out in Berneslai Homes' Value for Money Strategy.</p> <p>Our customers have a key role in ensuring we deliver Value for Money. Formed in September 2019, 'The Tenant Voice' our model for co-regulation, continues to offer value for money.</p> <ul style="list-style-type: none"> <li>• Performance was scored as 'good performance, low cost' as evidenced by the Housemark Annual Performance Summary Report (for 2023/24) noting that the more detailed analysis in this year's report presents a mixed picture in different areas of work.</li> <li>• £181K of external funding (across the two years) was received to enhance services to tenants and support resources.</li> <li>• £128K of improved cash collection of former tenant arrears debt was achieved over 12 months through improved 'smart' systems implementation.</li> </ul>
<b>2. Recommendation/s</b>	It is recommended that the report is noted.

### 3. Background

3.1 Obtaining the best outcomes for our customers within available resources is the key to achieving value for money. This means:

- Effectiveness – Doing the Right Things
- Efficiency – Doing things in the Right Way
- Economy – Doing things at the Right Price

3.2 The Board has a key role in providing challenge on VfM. The Audit & Risk Committee considered the report on 17<sup>th</sup> June 2025 noting progress made. The report has been amended in response to feedback from Committee regarding embedding VfM.

### 4. Current Position/Issues for Consideration

#### 4.1 Value for Money Strategy

4.1.1 The Value for Money Strategy for the period 2020 to 2023 remained the principal guiding document for most of the financial year, with a new strategy developed and approved towards the end of the year. It set out our commitment to achieving Value for Money (“VfM”) within Berneslai Homes and the importance of this being at the heart of everything we do and embedding across the organisation that this is everyone’s responsibility. Whilst progress has been made raising awareness of VfM, for example in decision making at the Transformation Board, there is some way to go before it is Business As Usual in all decision making.

4.1.2 The strategy includes the following Value for Money aims:

- To provide cost effective services that give high levels of customer satisfaction
- To maximise resources available

4.1.3 Underpinning our VfM aims are the following objectives:

- To improve VfM.
- To have an effectively managed approach to VfM.
- To promote ownership and awareness throughout the organisation, with customers and other partners/stakeholders.
- To demonstrate VfM.

#### 4.2 Performance

4.2.1 The 2023/24 Housemark Annual Performance Summary report published in November 2024 (Appendix A) highlighted Berneslai Homes’ operational performance was scored as ‘poor performance, low cost’ for housing management, with performance and cost lower than our peers. In contrast our maintenance performance was rated as ‘good performance, high cost’. On an overall basis the rating falls into ‘good performance, low cost’ noting that Berneslai Homes was on the cusp of being ‘high cost’ overall.

4.2.2 In the previous year's survey Berneslai Homes received an overall rating of 'good performance, low cost'. Housemark changed their methodology and scoring and therefore caution is needed in directly comparing the ratings from year to year. The more granular analysis allows for greater intuitive insight into areas for further development and in particular areas for improvement.

4.2.3 It should be noted that these performance assessments as reported have a time lag, i.e. the performance report published in November 2024 is based on cost and performance data for the financial year 2023/24.

4.2.4 The performance was slightly above that of peers and costs were lower.

The benchmarking data indicates that Berneslai Homes is delivering value for money overall, with performance above those of our peers and costs lower.

Comparable benchmarking Information for 2024/25 will be available from November 2025.

### 4.3 External Funding

4.3.1 Berneslai aims to identify and maximise external funding opportunities to enhance services offered to tenants and support resources, in 2024/25 we received:

	<u>2024/25</u> £,000
Tenants First Service – ESF Grants	51
UK Prosperity Fund	130
	<hr/> 181

### 4.4 Internal Efficiency and Effectiveness

4.4.1 2024/25 largely marked a year of investing for the future as opposed to generating cash efficiencies in year, although there were some notable achievements with short term gains. Particular areas of work with a long-term focus include:

- Relocation of the Property Services Repairs Team (formerly "Construction Services) from Carlton Depot, consolidating operations at Gateway Plaza. With refurbishment works at Gateway and our continued tenancy at Carlton, this was not cash positive in-year.
- Continued investment in repairs (IT) systems. While the core systems were implemented in early 2024, the financial year 2024/25 has been one of continued investment in further development and operational and process change in order to leverage future financial efficiency gains.

- Outsourcing of Stores function. While considerable progress was made in the year working with our preferred contractor, migration of Stores away from Carlton to the new provider is planned to take place in 2025/26 and therefore, with the continued occupation of the Carlton site, this has not delivered any cashable benefit in-year.
- 4.4.2 One area of work where a significant immediate gain has been seen is from implementation during the year of “Voicescape” software which harnesses Artificial Intelligence (AI) to target (rent) collection activities more smartly. Initial deployment of the system on former tenant arrears (the most challenging debt to collect) has shown a **£128K** increase in cash collected over 12 months (June 2024 – May 2025). Later in the (financial) year the use of the system was expanded to current tenant collections and caseload management. Improved collection, including of arrears, is similarly being seen in these areas, although it is too early to provide a meaningful quantification of the overall recurrent gains.
- 4.4.3 It should be noted that the benefits of improved rent collection accrue to the Housing Revenue Account (HRA) rather than to Berneslai Homes directly, recognising that a healthier HRA balance will allow Berneslai Homes, in partnership with BMBC (who supported Berneslai Homes with funding for the software implementation), to deliver more for the people of Barnsley.
- 4.4.4 Finance business partnering continues to support budget holders to manage and deploy financial resources efficiently and effectively and a number of smaller savings have been identified in the year, work which has informed the budget setting for 2025/26 and future planning.

## 5 Customer Voice/Impact

- 5.1 Our customers have a key role in ensuring we deliver Value for Money. ‘The Tenant Voice’ our model for co-regulation, continues to offer value for money.
- 5.2 The Tenant Voice Panel is made up of nine tenants from a diverse range of backgrounds, the panel ensure we remain compliant with the Regulator for Social Housing by assessing our performance against a range of Local Offers and Consumer Standards. If they feel that we may not be delivering they are able to pass the area of service onto the Tenant Scrutiny Panel for further investigation. Additionally, to ensure that tenants’ voices are represented within our governance and performance management arrangements panel members attend our Customer Services Committee, PRIP Core Group and the Strategic Liaison meeting with BMBC.
- 5.3 In 2024/25 the company adopted a new Resident Insight and Engagement Strategy with the aim of capturing more customer feedback from a broader range of customers. This coupled with the deployment of Voicescape which has introduced automated surveys across an increased range of services, reduces manual processes and ensures feedback is obtained in a more timely manner.

## 6. Risk and Risk Appetite

### 6.1 Financial

Material/service price increases and availability are a current risk which are managed closely through the company operational and financial processes.

### 6.2 Regulation and Compliance

Regulation and Compliance are a key priority for BH reflected in the VFM Strategy.

### 6.3 Operational

Our systems and services must be efficient and effective to ensure they meet the expectations of our customers. Our good performance is reflected in regular benchmarking.

## 7. Strategic Alignment

7.1 Berneslai Homes is committed to providing cost effective services that give high levels of customer services whilst maximising resources available. The attainment of Value for Money is fundamental to the achievement of the Strategic Plan objectives.

## 8. Data Privacy

8.1 There are no data privacy issues arising directly from this report.

## 9. Consumer Regulatory Standards

9.1 This report relates to the Value for Money Regulatory Standard in demonstrating how Berneslai Homes (BH) achieve the value for money strategic objectives, recognising the standard does not apply to Berneslai Homes.

## 10. Other Statutory/Regulatory Compliance

10.1 The Finance team provide guidance and support to ensure the Financial Regulations of the Company and the Council are complied with.

## 11. Human Resources and Equality, Diversity and Inclusion

11.1 There are none arising directly from this report.

## 12. Sustainability Implications

12.1 There are none arising directly from this report.



### 13. Future Plans

13.1 The Berneslai Homes Value for Money Strategy 2024 – 2027 was approved in February 2025. It is focussed on delivering the overall mission of the company effectively and sustainably, according to the core principles of value for money, and in line with the broader requirements of BMBC's long term strategic goals and reflecting the economic, legislative and regulatory environment and expected changes and demands over the next few years. Actions identified to deliver the strategy in 2025/26 include:

- Direct, recurrent efficiency (cash) savings, notably curtailment of the office apprenticeships scheme expected to save a recurrent £130K per annum.
- Organisational development work expected to deliver future cash savings as well as increased operational effectiveness, including the outsourcing of the Stores function, a restructure reflecting a 'one team' approach in Property Services and a project to improve the efficiency and effectiveness of internal financial reporting through better use of technology.

13.2 The budget setting process for 2025/26 was centred around value for money, with a focus on delivering sustainable, recurrent efficiency savings centred on preparing to achieve the aim of eliminating the recurrent systemic deficit and setting a balanced (nil deficit) budget from 2026/27. Notable areas of recurrent savings identified and their implications are:

Table 1: Budget Savings 2025/26 and Implications

Description	Value of Saving in 2025/26 £'000s	Implication
Discontinue Graduate Apprentice and Office (Non-Craft) Apprentice scheme	128	Hampers BH's commitment to a more diverse workforce and achieving the Strategic Plan 2031 target of 10% of BH Workforce being apprentices by 2030.
Remove vacant posts within Property Services	99	Posts removed through reorganisation of teams.
Citizens Advice Bureau Service (provided additional independent Financial Advice to tenants)	42	Reduces support to a strategic partner operating in the Borough.
<b>Total</b>	<b>269</b>	

### 14. Appendices

14.1 Appendix A – Housemark Benchmarking Report 2024.

15. Related Documents:

- 15.1 Value for Money Strategy 2024 – 2027 (approved by Board on 27 February 2025).
- 15.2 Value for Money Action Plan 2025 – 26 (approved by Board on 27 February 2025).

16. Glossary

- 16.1 VFM – Value for Money.  
HRA – Housing Revenue Account.  
ESF – European Social Fund.



Annual Performance Summary  
Berneslai Homes

# Executive summary

The operating environment for social landlords continues to be challenging. Asset investment requirements continue to squeeze capacity at a time when tenant perceptions are at an all-time low. Like many other sectors, social housing is having to do more with less. Properly leveraging data is key to navigating the pressures.

Housemark’s most recent data shows that leading landlords are rising to the challenge. Through taking a data driven approach to service optimisation and transformation, one in three social landlords is currently improving tenant perceptions despite cost pressures.

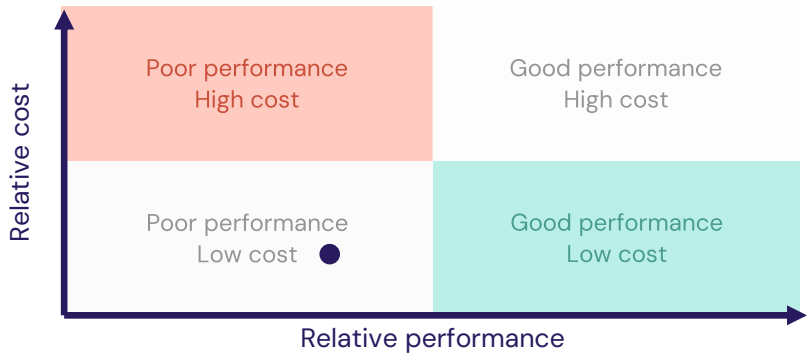
This summary shows how you compare to similar peers on your journey towards service optimisation and can help highlight areas for focus. However, your operating context and organisation design can have a significant impact. To dig deeper and get an unrivalled understanding of what your data is telling you, contact [data@housemark.co.uk](mailto:data@housemark.co.uk).

## Our new cost model

We redesigned our cost benchmarking model in 2024 to make it simpler to provide data and give you better insight into your cost profile. We’ve applied a consistent, simple method for allocating your costs. Greater transparency on what is included in each cost category means you can trust your comparisons – but please note measures like management cost per unit may not align with the management cost in your financial statements. For more information on the changes we’ve made get in touch.

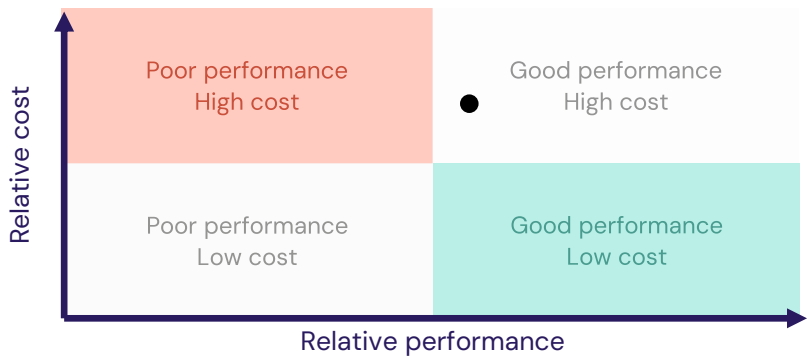
### Management

Your overall operational performance was below that of your peers, however, your costs are lower. This is based on your management cost per property of £795 and your average performance across arrears, void loss, staff sickness and turnover.



### Maintenance

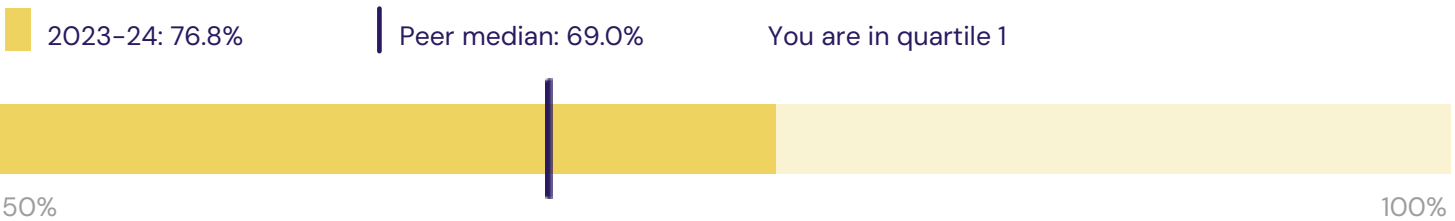
Your overall maintenance performance was slightly above that of your peers, however, your costs are higher. This is based on your maintenance cost per property of £1,230 and your average performance across gas safety, repairs volumes and repairs completed within target.



### Customer experience

Customer experience is a key driver of regulatory perception. Your overall satisfaction score was above that of your peers. This is based on your annual perception survey result of 76.8% from 2023/2024 and places you in quartile 1. Housemark can deliver the insight, set in your context, to help you understand the concerns of customers and where to take the service next. We can also help you conduct the surveys too, contact us for more information.

Satisfaction with the overall service provided by the landlord

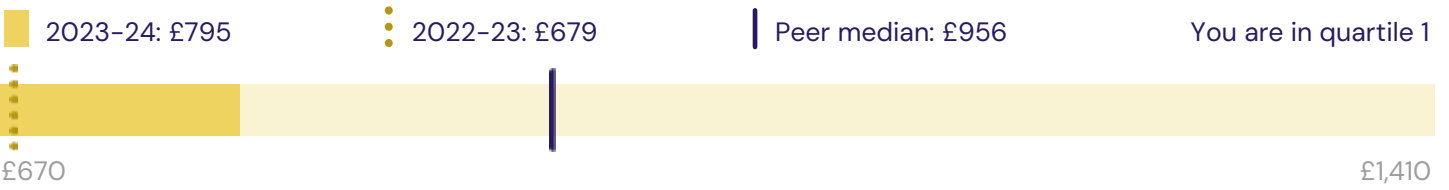


# Management

## Costs

Even though CPI inflation has significantly reduced in recent months, wages have continued to rise. While this may benefit individual employees, the result for the sector is pressure to find the best management staff on a budget.

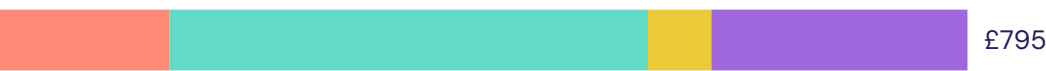
### Management cost per unit



### Management cost per unit breakdown

Overhead costs   Housing management   Contact centre   Maintenance management

Your result:



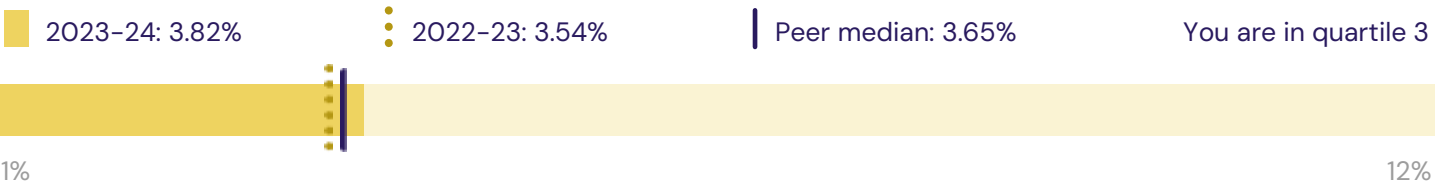
Peer median:



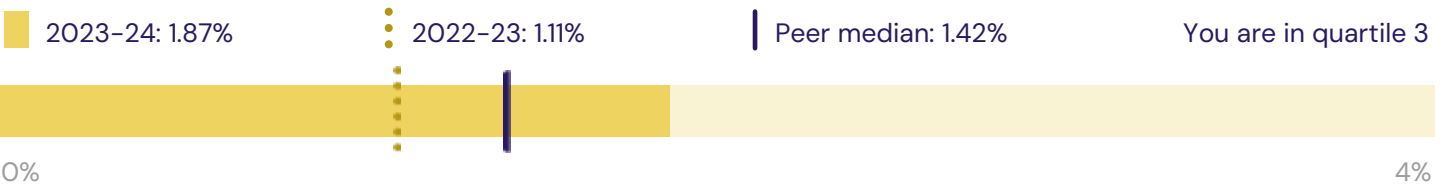
## Performance

Performance across many landlord activities has continued to struggle to improve to levels comparable with five years ago. Key services such as voids, repairs and income management have all suffered from the sector's current set of operational complexities.

### Current tenant arrears



### Rent loss due to voids



### Average working days lost due to sickness absence



### Percentage of staff turnover in the year

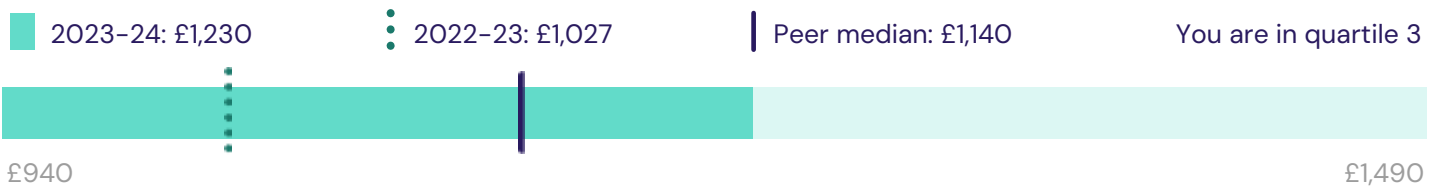


# Maintenance

## Costs

The pressure on landlords’ maintenance services has continued unabated into 2024. In addition to increased regulation, higher demand and supply chain issues, salaries for specialist staff have increased significantly in the last two years, adding to already stretched budgets.

### Maintenance cost per unit



### Maintenance cost per unit breakdown

Responsive repairs Void works Building Safety compliance Other planned works costs

Your result:



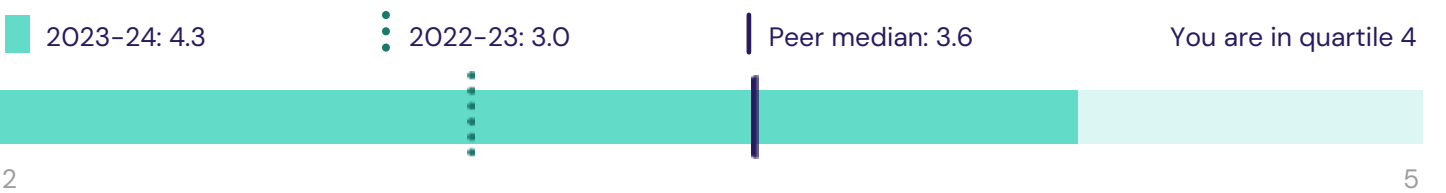
Peer median:



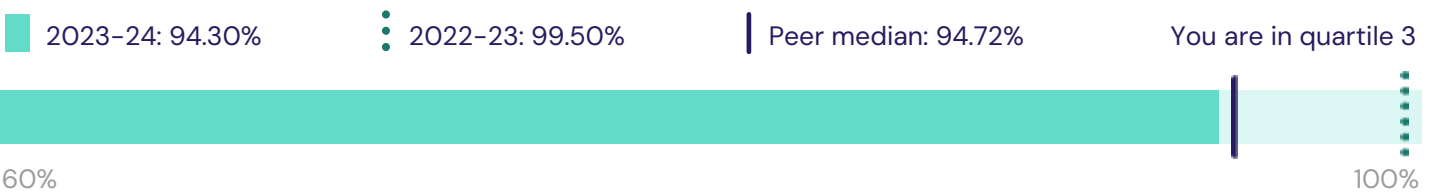
## Responsive repairs

Landlords have been recording steady rises in repairs outputs as they tackle backlogs. This additional work has tended to push up costs.

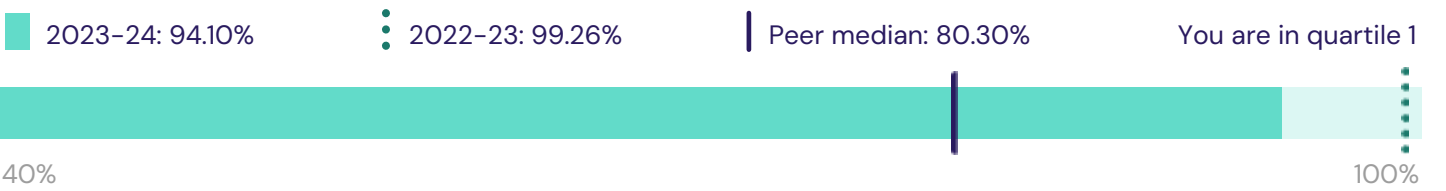
### Number of responsive repairs per property



### Percentage of emergency repairs completed within target timescale



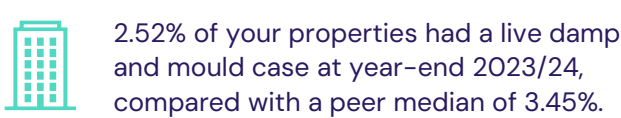
### Percentage of non-emergency repairs completed within target timescale



## Maintaining homes

Landlords have set aside considerable budgets to tackle safety compliance and manage hazards such as damp and mould. While we see a variety of ways to account for this work financially, the upshot is an overall increase in activity and rise in costs.

### Damp & mould



### Building safety

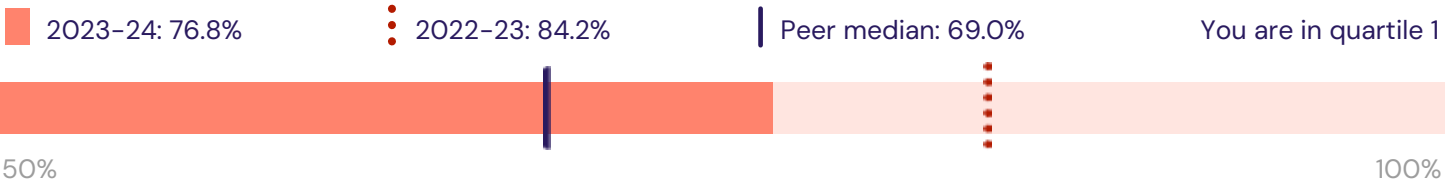
Compliant homes or assets	Your result	Peer median
Gas	100.00%	99.98%
EICR	97.34%	96.52%
Fire	100.00%	100.00%
Asbestos	100.00%	100.00%
Legionella	100.00%	100.00%
Lifts	100.00%	100.00%

# Customer experience

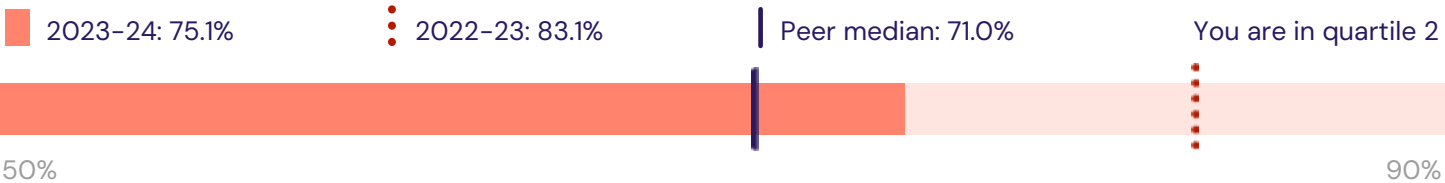
UK-wide tenant satisfaction has been declining over the last five years. With median satisfaction dropping below 70% for the first time, many landlords have put more emphasis on improving the tenant experience. As a result of this focus, 40% of landlords reporting on satisfaction monthly had seen an uptick in tenant perception by mid-2024/25.

## Perception

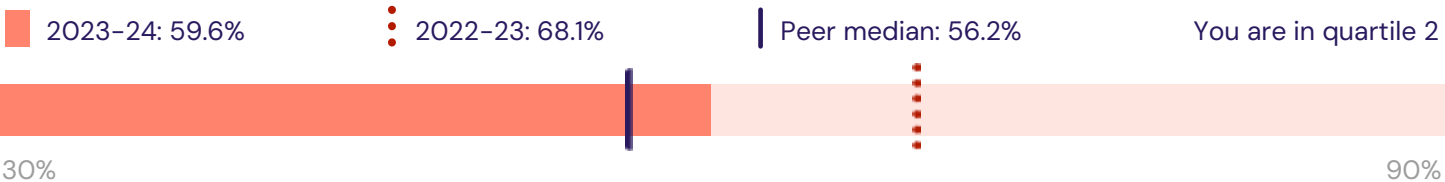
Satisfaction with the overall service provided by the landlord



Satisfaction with the repairs service over the last 12 months



Satisfaction that the landlord listens to views and acts upon them



## Complaints

Stage 1 complaints received per 1,000 properties



Percentage of stage 1 complaints responded to within target time

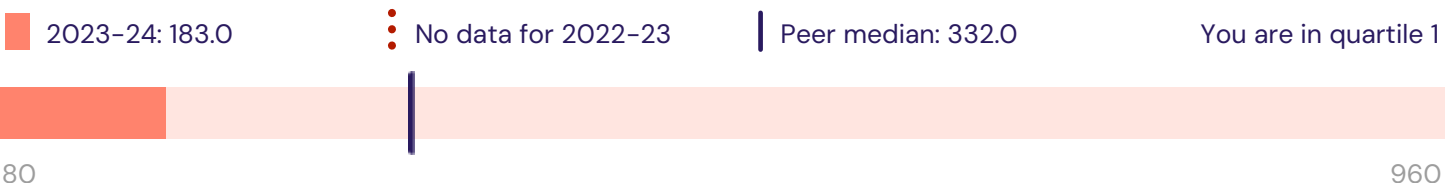


## Contact

Number of calls answered per property



Average time to answer inbound telephone calls (seconds)



# Appendix

This report is based on your cost and performance data for the financial year 2023–24, unless otherwise stated. All peer comparisons are based on your bespoke peer group which is detailed below. Peer medians for satisfaction measures are calculated based on 3 years of data. Note, we have issued this report now because we already hold data for most of your peers. However, due to mergers, acquisitions, entity name changes and late submissions, your peer group may change over time. Housemark can provide information and advice on peer groups on request, including expected submission dates for any potential latecomers.

Further analysis against different peer groups is recommended using Housemark’s online reporting tool. Our online tool includes hundreds of additional measures that can help you understand your performance in context. The tool displays live data and so if more of your peers submit data, your results may differ compared to this report.

## Summary Quadrant

This report includes quadrants that summarise how well you perform compared to your peer group within two key areas. These are calculated using all the KPIs included on those pages. For example, ‘Management’ plots your average relative cost position using your management cost per property results and your average relative performance position using your arrears, void loss, staff sickness and turnover results.



## Peer group

The organisations in your peer group have the following characteristics:

<b>Name</b>			
English LAs and ALMOs >10k (excl London)			
<b>Size</b>		<b>Organisation type</b>	
10,188 – 56,672 units		ALMOs	✓
		London Boroughs	
<b>Region</b>		Mets/Unitaries	✓
North East	✓	Districts	✓
North West	✓	Housing Association (LSVT)	
Yorkshire and Humberside	✓	Housing Association (Traditional)	
Eastern	✓	Other	
East Midlands	✓		
West Midlands	✓	<b>DLO</b>	
London		Yes	✓
South East	✓	No	✓
South West	✓	No data	
Scotland			
Wales		<b>Total sample size</b>	
Northern Ireland		24	
Other			





## **Minutes of Berneslai Homes Public Board held 27<sup>th</sup> May 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
David Leech	-	Board Member (trainee)
Rebecca Mather (RM)	-	Board Member
Gez Morrall (GM)	-	Board Member
Kevin Osborne (KO)	-	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
Sam Roebuck (SR)	-	Head of Strategy, Governance and IT
Paul Clifford (PC)	-	Service Director BMBC

### **Observing**

Sarah Clyde	-	Head of Strategic Housing BMBC
Livia Williams	-	Head of Repairs Berneslai Homes

Prior to commencement the Chair welcomed David Leech to the Board and introductions followed.

	<b>ACTION</b>
<b><u>Item 1 – Apologies</u></b>	
There were no apologies	
<b><u>Item 2 – Declarations of Interest</u></b>	
None declared.	

<p><b><u>Item 3 – Tenants Voice – Young Care Leavers</u></b></p> <p>DF introduced the presentation and provided background information.</p> <p>The video showcases the work of Berneslai Homes’ ‘Tenancy ready’ pilot course to aid and assist young people leaving care in Barnsley in becoming tenancy ready for a Council property. The project was designed and delivered in partnership with the BMBCs Targeted Youth Support service.</p> <p>The programme looked at a wide range of topics such as properties BH would offer young people leaving care, tenancy management, budget management and utilities management. The video shares the positive outcomes of the course from the young people and the staff involved and the future of the course and its offer for the young people in Barnsley that will benefit in the future.</p> <p>Board praised the initiative and suggested there could be an opportunity to use the data to look at other applicants and flags that may suggest there could be a better set of outcomes for our cohorts – DF agreed to explore further. Additionally, there was a suggestion for tenants to get involved in a mentoring capacity. DF will take back to the group who developed this</p> <p>Board extended their thanks to the team involved.</p> <p><b>Resolved</b></p> <p><b>The video was received</b></p>	
<p><b><u>Item 4 – Annual Governance</u></b></p> <p>SR presented the report on the annual governance activities which includes several recommendations for Board.</p> <p>Following discussion a number of comments, observations were made:-</p> <p>Annual Governance Performance data – JS raised a query with regard to the attendance target for Committees differing to that of Board. It was therefore agreed the attendance target for both Committees and Board be aligned, set at 90%</p> <p>Board Diversity Targets – AH inquired if Board was content to address ethnicity/diversity in the recruitment round or if more proactive measures could be taken sooner. The Chair suggested addressing this issue when the 2 Board members leave next year.</p> <p>Reporting mechanisms - feedback from self-evaluation – SR had distributed to Board and responses were collated. Positive feedback</p>	<p>SR</p>

<p>indicated that seven members felt Board worked well as a team. MJ highlighted the need for further consideration and reflection on strategic and operational issues.</p> <p>PC referred to the Council vision/strategic direction, offering to facilitate a session or hold 1 to 1 meetings if required.</p> <p>It was agreed that a Task and Finish Group be convened to look at the information in detail, reporting back to Board in July. JS, RF volunteered plus the Chair and 1 EMT member</p> <p>NHF Code of Governance – PC queried stress testing and how it is working in relation to business plan. RT advised that while it is not intended to carry out stress testing to the level performed at a Housing Association, a lighter version could be undertaken in relation to services to customers, to be included in the next budget setting. AGa suggested it may be beneficial to organise a similar exercise to the one conducted a few years ago, as part of a Risk Session at officer and Board level.</p> <p><b>Resolved:-</b></p> <p><b>Board</b></p> <ol style="list-style-type: none"> <li><b>1. Reviewed and commented as necessary on the annual governance performance data included in this report.</b></li> <li><b>2. Agreed to the continued collection of the governance indicators and for the information to be published on the Berneslai Homes website.</b></li> <li><b>3. Considered whether to align the board diversity targets in Appendix A to the associated BH customer data – no further comments were made</b></li> <li><b>4. Considered whether targets are necessary for the Reporting Mechanism section in Appendix A. Agreed, but with an amendment to the Committee attendance target to align with that of the Board.</b></li> <li><b>5. Discussed and agreed how it wishes to consider the areas where it could do better based on the feedback from the self-evaluation (Appendices D and E). Task and Finish Group agreed.</b></li> <li><b>6. Considered the Self-Assessment against the NHF Code of Governance, agreeing the areas of non-compliance and the actions required to achieve compliance (Appendix F)</b></li> <li><b>7. Agreed that a statement of compliance with the NHF Code of Governance be included into the Annual Accounts on a comply or explain basis</b></li> </ol>	<p>SR</p>
<p><b><u>Item 5 – Governance Changes (DTP Review)</u></b></p> <p>SR referred to the recent briefing session that had taken place to look at the proposed changes in detail and asked if there were any further comments.</p>	

<p>AH referred to an error in the Terms of Reference for Audit and Risk Committee where the Treasury Strategy is referenced and this should be Investment Strategy– to be amended. KT queried when the work on the Board’s role in providing assurance to the Council would be completed and reported to Board. RT noted the intention was to report to Board in July 2025.</p> <p><b>Resolved</b></p> <ol style="list-style-type: none"> <li><b>1. Board approve the revised terms of reference for Board (Appendix B), Audit and Risk (Appendix C) and Customer Services Committee (Appendix D) with one amendment required to the Audit and Risk Terms of Reference.</b></li> <li><b>2. Approved the draft Statement of Preferred Composition (Appendix E) to align the Terms of reference with skills and competency requirements and succession planning across the governance structure.</b></li> <li><b>3. Approved the Customer Committee Member role profile (Appendix F).</b></li> <li><b>4. Approved the recruitment of four tenants to sit on Customer Services Committee (2 paid and 2 unpaid roles). Salary to be determined and within budgets available.</b></li> <li><b>5. Approved the remit for the Chairs Group (Appendix G).</b></li> </ol>	<p>SR</p> <p>RT</p>
<p><b><u>Item 6 – People Strategy</u></b></p> <p>RT presented the report, highlighting key points.</p> <p>The proposed new People Strategy is built on the previous version and is centred around 4 key themes as outlined in the report. This is a high level Strategy and if approved then further plans will be developed. Additionally, there is a detailed culture plan. A significant amount of work has taken place on the culture change programme, particularly focussing on progression, self-development, and the 3C values.</p> <p>JS referred to the link to improve customer service and satisfaction and feels wording needs to be included in the key themes under the culture heading which highlights fostering a positive culture and its connection to customers. Additionally, she feels a measure needs to be included in the success metrics.</p> <p>Clarity was requested and provided on the graduate programme, RT explaining that this is not an addition, but an encouragement to use graduates as part of the establishment.</p> <p>JS also mentioned a conversation with RT and the Chair regarding the EDI Champion role. As the current strategy is ending it was felt a separate strategy is no longer required and EDI could be incorporated into the People Strategy, demonstrating it is embedded; also suggesting the EDI Champion be renamed to Culture Champion.</p>	<p>RT</p> <p>RT</p>

<p>PC, while welcoming the success measures, feels they need to be tangible and suggested a baseline be established with stretch targets. The Chair also felt it would be beneficial to include a measure relating to increasing productivity. RT to action.</p> <p>MJ made a suggestion to include information on skills, training and collaboration with local provider providers, meeting gaps etc.</p> <p>JS observed that some of the language was inconsistent, preferring the term “colleagues” instead of “staff”.</p> <p><b>Resolved:</b></p> <p><b>Board approved the proposed People Strategy 2025-28 with the above additions.</b></p>	<p>RT</p> <p>RT</p> <p>RT</p>
<p><b><u>Item 7 – Annual Self Assessment against the Housing Ombudsman (HOS) Complaint Handling Code</u></b></p> <p>DF presented the report. The self-assessment concluded with full compliance with the HOS Handling Code for the period 2024/25. Board are asked to approve the report to the Council. The responses from Councillor Franklin and the Board, once finalised will be circulated to Board before being added to the document and publishing to the website.</p> <p>AGa reported on a recent session she had attended where Richard Blakeway, the Housing Ombudsman was present. He indicated they will be examining the self-assessments in more detail this year than previously. It was noted that Barnsley’s assessment is comprehensive and honest.</p> <p><b>Resolved:</b></p> <ol style="list-style-type: none"> <li><b>1. Board approved the draft self-assessment and delegate authority to the Executive Director of Customer and Estate Services to make final amendments and sign off ahead of BMBC’s final approval.</b></li> <li><b>2. Board noted our Board Complaint Champion will meet with the Council’s MRC and will draft their response to the self-assessment by 18th June 2024.</b></li> <li><b>3. Board will be made aware of any emerging and significant issues which may affect continued compliance with the Complaint Handling Code in 2025/26.</b></li> </ol>	<p>DF</p>
<p><b><u>Item 8 – BH Annual Investment Strategy (referred from Audit and Risk Committee)</u></b></p> <p>RT reported that Audit and Risk Committee had a productive discussion on this and recommended to Board to approve.</p>	

<p>The primary focus is ensuring that investments are secure with reputable institutions. AH concurred and appreciated the Council's presence at the meeting. PC welcomed the prudent approach.</p> <p><b>Resolved:-</b></p> <p><b>Board approved:-</b></p> <ol style="list-style-type: none"> <li>1. <b>The Investment Strategy.</b></li> <li>2. <b>The investment limits set out at paragraph 3.4.</b></li> <li>3. <b>The instruments list set out at paragraph 3.8</b></li> <li>4. <b>The scheme of delegation outlined in Appendix A and the policy statement outlined in Appendix B.</b></li> </ol>	
<p><b><u>Item 9 Quarterly Risk Update</u></b></p> <p>RT presented the report which has already been reviewed and discussed at the Audit and Risk Committee. The Committee did not propose any changes. However, they referred the Risk Appetite Statement to Board for discussion as ownership is at Board level.</p> <p>RT advised that EMT will consider the risks highlighted; more work will take place and will be presented to the Audit and Risk Committee in June.</p> <p>RF stated he felt the Risk Appetite Statement was fit for purpose. However, he referred to the recent cyber security issues encountered by Marks and Spencer, the Co-op etc and questioned the robustness of our own defences and whether this needs to be reviewed. RT advised that Audit and Risk Committee had also requested further assurance on this issue, therefore the Council's Cyber Security License and Records Manager will be attending the October Committee meeting. It was agreed that other Board members can attend this meeting if they wish to do so. DF/RT will discuss approach for Customer Services Committee tenant members.</p> <p><b>Resolved:-</b></p> <p><b>Board:</b></p> <ol style="list-style-type: none"> <li>1. <b>Reviewed and commented on the Risk Management Quarterly Update.</b></li> <li>2. <b>Reviewed and commented on the Strategic Risks.</b></li> <li>3. <b>Reviewed and commented on the Risk Appetite Statement</b></li> <li>4. <b>Reviewed and commented on the action plans being monitored as part of this report.</b></li> </ol>	<p>All DF/RT</p>
<p><b><u>Item 10 – Annual Complaints Handling and Learning Report</u></b></p> <p>DF presented the report, noting that it is discussed in detail on a quarterly basis at Customer Services Committee. The Quarter 4 report has not yet been considered; however, the trends, volumes, performance and learning have remained consistent. He referred to complaint volumes, informing Board that the additional resources have improved the response rate.</p>	

<p>JS expressed appreciation for the layout and the pictorial tables, noting alignment with the People Strategy in some areas i.e. culture, comms and colleague performance. Hopefully further improvement will continue. PC emphasised the importance of addressing root causes, highlighting the strain on resources at Stage 2, many of which are due to unmet promises at Stage 1.</p> <p>KO mentioned the decline in compliments and Board acknowledged the importance of passing these on. DF advised that fewer compliments are expected when satisfaction surveys transition to Voicescape. ST highlighted the increase in customer satisfaction, with tenants feeling they had been treated fairly and thanks were extended to colleagues.</p> <p>The Chair inquired about communication related to repairs and the actions in place to improve this. AGu confirmed that tenants are now updated more frequently, and additional training is provided when failures occur. When an operative is unable to complete a repair, they now ensure a further appointment is made before leaving the site which should improve future figures.</p> <p>The Chair also expressed concern for the wellbeing of staff in the Complaints Team. DF acknowledged the high pressure nature of the roles, but provided assurance that the team have an excellent Manager and they spend time together in the office to give each other support.</p> <p><b>Resolved:</b></p> <ol style="list-style-type: none"> <li><b>1. Board were assured of the continued positive progress in improving our complaint handling service, responding to complaints within timescale and the strengthened governance oversight of complaint handling and learning.</b></li> <li><b>2. Board noted that whilst learning is identified and action continues to be taken to improve both the complaint handling service and address the root cause of complaints, there are still a number of residual risks which challenge our compliance with the HOS code.</b></li> </ol>	
<p><b><u>Item 11 – Gender Pay Gap 2024</u></b></p> <p>RT presented the report noting it had been discussed at the last Remuneration Committee. The key points were highlighted.</p> <p>The Mean Gender Pay Gap has decreased with women earning 0.5% more than men. The Median Pay Gap has increased by 1.2%, indicating women earn 93p for every £1 earned by men. Bonus pay remains an issue and a plan is being developed to address. The information will be published on the BH and Government websites.</p> <p>AH commended the report and found the graphs were useful. Using last year as a comparison he suggested setting a target. It was agreed to link</p>	

<p>this back to the People Strategy as a success measure – RT to consider using a target of a pay gap of no more than 2%.</p> <p><b>Resolved:-</b></p> <p><b>Board discussed the report and acknowledged the Gender Pay Gap figures for 2024.</b></p>	RT
<p><b><u>Item 12 – 2024/25 Year End Performance Summary</u></b></p> <p>RT presented the report. This was discussed at Customer Services Committee. They requested targets for 25/26 which have been included. The key points were highlighted.</p> <p>Performance is positive with 12 green KPIs, 7 amber and 12 red. There are 2 not included as figures are awaited and there are also 4 KPIs not classified.</p> <p>Strengths include building safety compliance, TSMs, complaints performance and rent collection levels.</p> <p>Key focus areas are void rent loss, sickness, calls in target timescale.</p> <p>Board were asked to note the void reduction action plan and a report on sickness has been produced and will be discussed under the Confidential agenda.</p> <p>The achievements were acknowledged by Board.</p> <p>MJ said he continued to recognise the achievements made on complaints, noting the percentage of complaints not related to the quality of work but rather to processes. This is a national trend. It was noted the situation will not get easier with Awaab's Law as processes need to be more robust.</p> <p>The Chair referred to the Wates/Property Services PRIP performance dashboard and noted the significant difference between the two, requesting an explanation. AGu mentioned that transactional surveys returned show Property Services performing higher than Wates for the last quarter. He referred to the issues on the RPO2 calculations and added that learning continues from Wates. The Head of Service is prioritising, and hopefully better use of systems should help. Work by Savills is also expected to contribute positively.</p> <p>MJ referred to the discrepancies between the time repairs are taking and the satisfaction with Wates performing better on this; he feels it is important that consideration be given on whether it is better for tenants to have repairs done properly, or on time and suggested further analysis be undertaken on this. He feels KPIs are needed that reflect what matters to tenants. MJ/AGu to collaborate.</p>	AGu/MJ



<p><b>Resolved</b></p> <ol style="list-style-type: none"> <li>1. Board considered the annual review report for 2024/25 and the 2024/25 year end performance for both Company and PRIP performance.</li> <li>2. Where performance targets were not achieved, Board were satisfied with the explanations provided and there are adequate controls and actions in place.</li> <li>3. Board did not identify any areas where they feel more detailed consideration is required by Customer Services Committee on any customer focused KPI's.</li> </ol>	
<p><b><u>Item 13 – Update on Berneslai Homes Business Action Plan and 3 Year Vision 2024/2025</u></b></p> <p>SR presented the report, referring to the key highlights at Section 4.2 of the report. The report will be discussed at the Council's Cabinet on the 13<sup>th</sup> August.</p> <p><b>Resolved:-</b></p> <p><b>Board noted the year end update of progress against the Annual Business Action Plan 24/25 and 3 year vision</b></p>	
<p><b><u>Item 14 – Resources Information Papers</u></b></p> <p><u>14.1 – Board Fact Sheet</u></p> <p>Noted.</p>	
<p><b><u>Item 15 - Board Mins and Actions from meeting held 27/3/2025</u></b></p> <p><b>Resolved:</b></p> <p><b>The minutes were approved as a true and accurate record and the actions were noted.</b></p>	
<p><b><u>Date of Next Meeting</u> – 24<sup>th</sup> July 2025</b></p>	