



Creating great homes and communities
with the people of Barnsley

BERNESLAI HOMES BOARD

26TH September, 2024 at 4 p.m. in Gateway Plaza

1. Apologies

2. Declarations of Interest

Reports/Items for Approval

3. Governance Update

4. Annual Governance Statement

5. Risk Management Annual Report

6. BH Ltd Report and Accounts for the period ended 31/3/2024

7. Compliance Policies – Amendments

8. Minutes of the previous Board Meeting held 11th July 2023 and Actions

Reports/Items for Information

9. 2024/2025 Quarter 1 Performance Summary

10. Disrepair Annual Report/Current Position

11. BH Sustainability Strategy 2022-27 Action Plan Progress Review

12. Board Fact Sheet



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Report Title	Governance Update	Confidential	No
Report Author	Head of Governance and Strategy	Report Status	For Approval
Report To	Board 26 September 2024	Officer Contact Details	samantharoebuck@berneslaihomes.co.uk clairedenson@berneslaihomes.co.uk

1. Executive Summary	<p style="text-align: center;"><u>Decisions made by Committees, Board and BMBC</u></p> <ul style="list-style-type: none"> Following the Board self-assessment session with DTP (external consultant) on 22nd February 2024, an action was agreed to review delegated decisions, and where reports should be approved. As part of this review, we are working with BMBC to ensure they have full and clear oversight of any reports that also require council approval under the scheme of delegations. We have consulted with BMBC, the Board Chair, the Chair of Audit & Risk Committee, the Chair of Remuneration Committee and the Vice Chair of Customer Services Committee to determine the approval routes. The full summary of key reports is available in Decision Time Resources. The proposed changes to reporting escalations are at Appendix A and Board are requested to approve these changes. <p style="text-align: center;"><u>Decision making Framework (Summary of Delegations)</u></p> <ul style="list-style-type: none"> The current Decision-Making Framework document (Appendix C) provides clarification of key decisions within the organisation. It outlines the role in decision making of the Council, Berneslai Homes' Board, Committees, EMT and SMT. It is best practice that Board reviews the Summary of Delegations at least annually. They were last reviewed in July 2023, where a number of recommendations were approved.
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- The Decision Making Framework / Summary of Delegations (**Appendix C**) has been reviewed, following consultation with BMBC and in line with the Services Agreement. The proposed changes are included in **Appendix B**, with tracked changes also highlighted in **Appendix C**.
- Following Board approval, any relevant changes will be made to the associated Terms of References, which will be presented to Board for formal approval on 5th December 2024. Report templates will also be reviewed to ensure discussions captured during the first hearing of a report are clear when the report is escalated for approval or information.

Board Champions

- Following discussions with Board members, as part of the appraisal process, Board are asked to approve the appointment of Board Champions. These are outlined below: -
 - Gez Morrall - Health and Safety Champion,
 - Jo Sugden - ED&I Champion, approved at the May Board meeting.
 - Engagement Champion – Rebecca Mather
 - Repairs and Investment Champion – Mark Johnson
- The Board Champion Terms of References have been produced for the ED and I Champion and Health and Safety Champion and Board are asked to approve these, linked on [Decision Time Resources](#).
- The terms of reference for the remaining champions will form part of the Governance update report on the 5th December for Board approval.
- Board should note that Co optee Eric Smith is currently the Complaints Champion.

Customer Voice/Impact

- The recommendations in Appendix A include Customer-focused reports for further escalation to either Board or BMBC.
- The Decision-Making Framework ensures that decision-making is transparent and compliant.

2. Recommendations	<p>It is recommended Board:</p> <ol style="list-style-type: none"> I. Approve the recommended changes in Appendix A to reporting escalations. II. Approve the recommended changes in Appendix B, to the Delegations Framework (summarised in Appendix C). III. Note that any amended terms of references for Committees and Board will be recommended for approval at Board on 5th December 2024. IV. Approve the appointment of Board Champions and approve the Terms of reference for the Health and Safety Champion and Ed& I Champion.
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3. Background

3.1 The purpose of this report is to provide an update to Board on governance issues.

3.2 To be a successful well-managed company, Berneslai Homes must uphold governance as a priority and is accountable to the Council under the Services Agreement between BMBC and Berneslai Homes. By ensuring that Board members are fully informed and curious, we are supporting the role of good governance and the delivery of the Strategic Plan.

4. Current Position /Issues for Consideration

Decisions made by Committees, Board and BMBC

4.1 Following the Board self-assessment session with DTP (external consultant) on 22nd February 2024, an action was agreed to review delegated decisions, and where reports should be approved. As part of this review, we are working with BMBC to ensure they have full and clear oversight of any reports that also require Council approval under the Scheme of Delegations.

4.2 We have liaised with BMBC, the Board Chair, the Chair of Audit & Risk Committee, the Chair of Remuneration Committee, and the Vice Chair of Customer Services Committee to determine the approval routes. The full summary of key reports is available in Decision Time Resources.

4.3 The proposed changes to reporting escalations are at **Appendix A** and Board are requested to approve these changes.

Decision-Making Framework (Summary of Delegations)

- 4.4 The current Decision-Making Framework document (**Appendix C**) provides clarification of key decisions within the organisation. It outlines the role in decision making of the Council, Berneslai Homes' Board, Committees, EMT and SMT.
- 4.5 It is best practice that Board reviews the Summary of Delegations at least annually. They were last reviewed in July 2023, where several recommendations were approved.
- 4.6 The Decision Making Framework / Summary of Delegations (Appendix C) have been reviewed, following consultation with BMBC and in line with the Services Agreement. The proposed changes are outlined in **Appendix B** for ease, with tracked changes also highlighted in **Appendix C**.
- 4.7 Following Board approval, any relevant changes will be made to the associated Terms of References, which will be presented to Board for formal approval on 5th December 2024. Report templates will also be reviewed to ensure discussions captured during the first hearing of a report are clear when the report is escalated for approval or information.

Board Champions

- 4.8 Following discussions with Board members, as part of the appraisal process, Board are asked to approve the appointment of Board Champions. These are outlined below: -
- Gez Morrall - Health and Safety Champion,
 - Jo Sugden - ED&I Champion, approved at the May Board meeting.
 - Rebecca Mather - Engagement Champion, approved at last Board meeting.
 - Mark Johnson - Repairs and Investment Champion
- 4.9 The Board Champion Terms of References have been produced for the EDI and Health and Safety Champions and Board are asked to approve them, linked on [Decision Time Resources](#).
- 4.10 The terms of reference for the remaining Champions will form part of the Governance Update report 5th December for Board approval.
- 4.11 Board should note that Co-optee Eric Smith is currently the Complaints Champion.

Governance Handbook

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

5. Customer Voice/Impact

- 5.1 This report is an update around the governance of the Board and therefore customer views have not been sought specifically for this report.
- 5.2 However, the recommendations include Customer Services Committee reports for further escalation to either Board or BMBC.
- 5.3 The decision-making framework is in place to ensure all staff are clear on where decisions should be made whilst also adhering to the financial regulations, contract procedure rules and the Services Agreement between BMBC and BH.

6. Risk and Risk Appetite

- 6.1 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.
- 6.2 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.

7. Strategic Alignment

- 7.1 The report aligns to the requirements from BMBC (Barnsley Metropolitan Borough Council) for the effective governance of Berneslai Homes. It also provides assurance to BMBC that decisions are being made in line with agreed processes and the Services Agreement. 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

8. Data Privacy

- 8.1 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.

9. Consumer Regulatory Standards

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

10. Other Statutory/Regulatory Compliance

10.1 To provide Board with assurance around our governance arrangements.

11. Financial

11.1 There are no financial implications arising directly from this report.

12. Human Resources and Equality, Diversity and Inclusion

12.1 There are no HR and EDI implications.

13. Sustainability Implications

13.1 No specific zero carbon implications from this report.

14. Associated Background Papers on Decision Time

14.1 [Governance Handbook](#)

14.2 [Full summary of key reports](#)

14.3 [Board Champion Terms of Reference](#)

15. Appendices

15.1 Appendix A - Proposed changes to reporting escalations.

15.2 Appendix B – Proposed changes to Decision-Making Framework: Summary of Current Delegations

15.3 Appendix C - Decision-Making Framework: Summary of Current Delegations (tracked changes)

Appendix A - Proposed Changes to Reporting Approvals and Escalations

Report	Current reporting process	Proposed reporting process	Comments
Annual Report to Tenants	1. Customer Services Committee for information	1. Customer Services Committee for Information 2. Board for information 3. Cabinet for information	Important that the Board and BMBC keep informed of how we have delivered tenant services.
Communications and Marketing strategy/performance report	1. EMT for approval	1. EMT recommend to Committee for approval 2. Customer Services Committee for approval	Could go to Customer Services Committee
Complaints Policy	1. Customer Services Committee for approval 2. Cabinet for endorsement	1. Customer Services Committee recommend to Board for approval 2. Board recommend for approval to Cabinet 3. Cabinet for approval	Committee should recommend to Board for approval to Cabinet for final approval
EDI Strategy	1. Board for approval	1. Board for approval 2. Cabinet for endorsement	To Cabinet for endorsement.
Employee H&S Annual Report and Policy	1. Board for approval	1. Audit Committee recommend approval to Board 2. Board for approval	Recommend it starts at Audit Committee
Housing Ombudsman Annual self-assessment	1. Customer Services Committee for approval	1. Customer Services Committee recommend to Board for approval 2. Board recommend to cabinet for approval 3. To Cabinet for approval	Important that the Board and BMBC approve matters related to complaints and Housing Ombudsman.
PRIP Quarterly performance report	1. Customer Services Committee for approval	1. Customer Services Committee for Information 2. To Cabinet for information	Performance reports should be for information. Should be submitted to Cabinet as BMBC contract.

Report	Current reporting process	Proposed reporting process	Comments
Regulator of Consumer Standards Annual Self-Assessment	<ol style="list-style-type: none"> 1. Customer Services Committee recommend to Board for approval. 2. Board for approval 	<ol style="list-style-type: none"> 1. Customer Services Committee recommend to Board for approval. 2. To Board for approval 3. To Cabinet for information 	Needs to go to cabinet as other updates around regulation have gone to cabinet.
STAR Survey reports	<ol style="list-style-type: none"> 1. Customer Services Committee for information 2. Cabinet for information 	<ol style="list-style-type: none"> 1. Customer Services Committee for information 2. Board for information 3. Cabinet for information 	Board have requested this goes to them
Strategic Plan and Annual Business Action Plan	<ol style="list-style-type: none"> 1. EMT review and Recommend 2. Board Approve 3. Cabinet Approve 	<ol style="list-style-type: none"> 1. EMT Review and Recommend 2. Board Review and Recommend 3. Cabinet Approve 	To Cabinet for final approval
Area Based Regeneration	<ol style="list-style-type: none"> 1. EMT Review and Recommend 2. Committee Review and Recommend 3. Board Approve 4. Council Approve 	<ol style="list-style-type: none"> 1. EMT Review and Recommend 2. Committee Review and Recommend 3. Board Review and Recommend 4. Council Approve 	To Council for final approval
Chief Executive Recruitment	<ol style="list-style-type: none"> 1. Board Approval 	<ol style="list-style-type: none"> 1. Board/BMBC approval 	The Council are involved in the recruitment process with BH, therefore a joint decision is made and then approved by Board in consultation with the council.

Appendix B - Proposed Updates to Decision Making Framework – Summary of Delegations

Process	Current reporting process	Proposed reporting process	Comments
1. Ten Year Berneslai Homes Strategic Plan And Annual Business Action Plan	1. EMT Review and Recommend 2. Board Approve	1. EMT Review and Recommend 2. Board Review and Recommend 3. Cabinet Approval	The proposed process is already undertaken; however, it wasn't recorded as such on the Framework
2. BH Strategies and associated Action Plans	1. SMT Review and Recommend 2. EMT Review and Recommend 3. Committee Approve 4. Board Approve	EDI: 1. SMT Review and Recommend 2. EMT Review and Recommend 3. Committee Review and Recommend 4. Board Approve 5. Cabinet for information Asset Management: 1. SMT Review and Recommend 2. EMT Review and Recommend 3. Committee Review and Recommend 4. Board Review and Recommend 5. Cabinet Approve Health and Wellbeing: 1. SMT Review and Recommend 2. EMT Review and Recommend 3. Committee Approve 4. Board for info People: 1. SMT Review and Recommend 2. EMT Review and Recommend 3. Committee Review and Recommend 4. Board Approve Customer Insight: 1. SMT Review and Recommend 2. EMT Review and Recommend	This would depend on the Strategy; it therefore needs to be specified.

Process	Current reporting process	Proposed reporting process	Comments
		3. Committee Review and Recommend 4. Board Review and Recommend 5. Cabinet Approve Procurement: 1. SMT Review and Recommend 2. EMT Review and Recommend 3. Audit and Risk Committee Approve 4. Board for info Value for Money: 1. SMT Review and Recommend 2. EMT Review and Recommend 3. Audit and Risk Committee Approve 4. Board for info Sustainability: 1. SMT Review and Recommend 2. EMT Review and Recommend 3. Board Review and Recommend 4. Council approval Data Strategy: 1. SMT review and recommend 2. EMT review and recommend 3. Audit Committee approve 4. Board for info in Decision Time	
10. Company acquisitions	Dependent on thresholds	Not required	BMBC responsibility now, so no longer required in the Framework.
14. Variations to Capital budget heads of less than £250K in total	1. EMT approve	1. EMT approve – in consultation with BMBC	Implications for budget discussed at Strategic Delivery Assurance Group

Process	Current reporting process	Proposed reporting process	Comments
16. Waivers to HRA contracts	<p>Up to £250K: 1. EMT Approve</p> <p>Up to £500k: 1. EMT Review and Recommend 2. Cabinet Spokesperson Approve</p> <p>Over £500k: 1. EMT Review and Recommend 2. Cabinet Approve</p>	<p>Up to £100k: 1. Joint SMT/EMT Approve</p> <p>Up to £250K: 1. EMT Approve</p> <p>Up to £500k: 1. EMT Review and Recommend 2. Cabinet Spokesperson Approve</p> <p>Over £500k: 1. EMT Review and Recommend 2. Cabinet Approve</p>	Confirmed with BH Procurement
17. Waivers to BH Contracts	<p>Up to £250K: 1. SMT Review and Recommend 2. EMT Approve</p> <p>Up to £500k: 1. EMT Approve</p> <p>Over £500k: 1. EMT Approve</p>	<p>Up to £100k: 1. Joint SMT/EMT Approve</p> <p>Up to £250K: 1. SMT Review and Recommend 2. EMT Approve</p> <p>Up to £500k: 1. EMT Approve</p> <p>Over £500k: 1. EMT Approve</p>	
20. Area Based Regeneration	<p>1. EMT Review and Recommend 2. Customer Services Committee Review and Recommend 3. Board Approve 4. Cabinet Approve</p>	<p>1. EMT Review and Recommend 2. Customer Services Committee Review and Recommend 3. Board Review and Recommend 4. Cabinet Approve</p>	
21. Company Funding Bids	<p>1. EMT Approve</p>	<p>1. EMT Approve</p>	Updated with (company) as most of the funding bids are directed by BMBC
29. Chief Executive Recruitment	<p>1. Board approve</p>	<p>1. Board / BMBC Approve</p>	BH and BMBC work together to recruit and approve. Appointed in consultation with BMBC.

Appendix C – Summary of Delegations (Delegations Framework)

KEY								Group
Decision	□	Review and Recommend	®	Delegate	◀	Not Applicable	NA	EMT – CEO and Executive Directors SMT – Heads of Service

DECISION MAKING FRAMEWORK – SUMMARY OF DELEGATIONS

		SMT	EMT	COMMITTEE	BOARD	COUNCIL
1	Ten Year Berneslai Homes Strategic Plan and Annual Business Action Plan		®	N/A	®☒	□ <u>Cabinet</u>
2.	BH Strategies and associated Action Plans: <u>EDI</u> <u>Asset Management</u> <u>HWB</u> <u>People</u> <u>Customer Insight</u> <u>Procurement</u> <u>Value for Money</u> <u>Sustainability</u> <u>Data Strategy</u>	® ® ® ® ® ® ® ® ®	® ® ® ® ® ® ® ® ®	□ ® ® □ ® ® □ □ □ □	□ □ ◀ For info □ ® ◀ ◀ For info ® ◀ For info	□ <u>Cabinet</u> □ <u>Cabinet</u> □ <u>Cabinet</u>
3	Annual Report to tenants		□	◀	◀	<u>For information</u>
4.	Annual Governance Statement		®	®	□	
5	Annual BH Construction Services Financial and Resource Plan		□	◀	◀	
6	Annual Budget Approvals • Berneslai Homes • Construction Services		® ®	N/A	□ □	□ Cabinet
7	Annual Company Accounts		®	®	□	

		SMT	EMT	COMMITTEE	BOARD	COUNCIL
8	Use of Surplus					
i)	Up to a maximum of £250,000 in any one year		□	N/A	N/A	□ In agreement with Service Director
ii)	Above £250,000		Ⓜ	N/A	Ⓜ	□ Cabinet Spokesperson
9	Housing Capital Programme – Investment proposals		N/A	N/A	N/A	□ Cabinet
10	Company acquisitions					
i)	Up to £250K		⊞			
ii)	Up to £500K		Ⓜ	◀	◀	⊞ Cabinet Spokesperson
iii)	Over £500K		Ⓜ	◀	◀	⊞ Cabinet
11	Conversions					
i)	Up to £250K		□			
ii)	Up to £500K		Ⓜ	◀	◀	□ Cabinet Spokesperson
iii)	Over £500K		Ⓜ	◀	◀	□ Cabinet
12	Annual release of Barnsley Home Schemes (<u>Decent Homes</u>)		Ⓜ	N/A	Ⓜ	□ Cabinet

		SMT	EMT	COMMITTEE	BOARD	COUNCIL
13	Release of other capital schemes		◀			
i)	Below £25k (Director)					
ii)	£25k - £100k (SMT)	®	□			
iii)	£100k to £250k (EMT)		□	◀	◀	□ Cabinet Spokesperson
iv)	Up to £500k		®			
v)	Over £500k		®	◀	◀	□ Cabinet
14	Variations to Capital budget heads of less than £250K in total		□	◀	◀	<u>Consult with BMBC</u>
15	Variations to Capital budget heads of more than £250K in total		®	N/A		□
16	Waivers to HRA contracts					
ii)	Up to £250k		□			
iii)	Up to £500k		®	◀	◀	□ Cabinet Spokesperson
iv)	Over 500k		®	◀	◀	□ Cabinet
17	Waivers to BH contracts					
i)	Up to £250K	®	□	◀	◀	
ii)	Up to £500K		□	◀	◀	
iii)	Over £500K		□	◀	◀	
18	Disposals		®	◀	◀	□
19	Demolitions:					

		SMT	EMT	COMMITTEE	BOARD	COUNCIL
i)	Consultation on schemes below £100k	®	☐	◀	◀	Consultation with BMBC at Core Group
ii)	Decision to demolish below £100k	®	☐	◀	◀	Consultation at BMBC Asset Board
iii)	Consultation on schemes between £100-£250k		®	N/A	◀	
iv)	Decision to demolish between £100-£250k		®	N/A	◀	☐ Service Director
v)	Consultation on schemes above £250k		®	N/A	N/A	☐ Service Director
vi)	Decision to demolish above £250K		®		®	☐ Cabinet Spokesperson ☐
20	Area Based Regeneration		®	®	®☐	☐
21	Funding Bids (Company)		☐	◀	◀	
22	Partnership Deals		®	®	☐	
23	Significant Policy Changes		®	®	☐	☐ Cabinet
24	Service Level Agreements with BMBC services					
i)	New	®	☐	◀	◀	
ii)	Review		☐	◀	◀	
iii)	Proposed change		☐	◀	◀	
25	Changes to employee terms and conditions		®	®	☐	
26	Staffing levels below Management Team		☐			

		SMT	EMT	COMMITTEE	BOARD	COUNCIL
27	Restructures (impacts less than 10% of Company) Significant Restructures (impacts 10% of company, fundamental service change and/or change to EMT)		<input type="checkbox"/> ®	◀ <input type="checkbox"/>	◀ <input type="checkbox"/>	<input type="checkbox"/> In agreement with Service Director (<u>early consultation</u>)
28	Executive Management Team Recruitment		N/A	<input type="checkbox"/> and CEO	◀	
29	Chief Executive Recruitment		N/A	N/A	<input type="checkbox"/>	<input type="checkbox"/> <u>BMBC involved in the recruitment</u>
30	Chief Executive/ EMT Remuneration and Conduct		N/A	<input type="checkbox"/>	<input type="checkbox"/> (Appeals only)	
31	Board Remuneration			<input type="checkbox"/>	◀	
32	Company Contract Authorisation		<input type="checkbox"/>	N/A	◀	
33	Contract Procurement Waivers				<input type="checkbox"/> <u>If related to EMT</u>	
i)	below £100k		Company <u>Executive Director</u> <input type="checkbox"/>			
ii)	above 100k		CEO Company Director x 2 and Procurement Manager <input type="checkbox"/>			

		SMT	EMT	COMMITTEE	BOARD	COUNCIL
34	New company business and grant approvals to an annual maximum of £6M					
i)	Below £250k		□	N/A	◀	In agreement with Service Director
35	New company business and grant approvals to an annual maximum of £6M					
i)	Below £250k		□	NA	◀	In agreement with Service Director
ii)	Above £250k		Ⓜ	N/A	Ⓜ	□ Service Director/ Written approval
iii)	Market rental and sale products		Ⓜ	N/A	Ⓜ	□

		SMT	EMT	COMMITTEE	BOARD	COUNCIL
36	Write off of Company (none HRA) Bad Debts in any financial year					
i)	Individual debtor below £10,000		<input type="checkbox"/>	◀	◀	
ii)	Individual Debtor above £10,000 to below £50,000		®	<input type="checkbox"/>	◀	
iii)	Aggregate debts below £50,000		<input type="checkbox"/>	◀	◀	
iv)	Aggregate debts above £50,000 and below£100,000		®	<input type="checkbox"/>	◀	

Revised September 2024

Summary of Delegations

1. Ten year Berneslai Homes Strategic Plan

The Strategic Plan is a 10-year visioning document with annual review on objectives and key performance indicators. The Business Action Plan is the Board's and BMBC's monitoring document to assess progress against targets and to ensure strategic alignment and outcomes against corporate priorities. Final version agreed by Board in December of each year. The Plan then goes to Cabinet for approval, with final amendments delegated to the BMBC Service Director and Portfolio Holder.

2. BH Strategies and Action Plans

These are the Berneslai Homes Strategies that underpin our Strategic Plan such as Sustainability Strategy-, ED and I strategy and the action plans within them.

3. Statutory Annual Report to tenants

This is the Annual Report made publicallypublicly available to all tenants by 1st October each year summarising key performance against the Social Housing Regulator's National Standards and our local offers.

4. Annual Governance Statement

This is a statutory document which explains the processes and procedures in place to enable Berneslai Homes to carry out its functions effectively.

5. Annual Construction Services Financial and Resource Plan

The plan outlines the annual workloads available, and resources required and projections for future years, this allows Construction Services to prioritise work and deploy resources as required. Construction Services annual budget is agreed by Board in March of each year.

6. Annual Budget Approvals

Budget setting cycle commences October with initial considerations of development and saving proposals by Board in November. Board approval is sought in December and referral to BMBC for agreement. Rent notices are delivered by the end of February to meet 4-week statutory notice period.

7. Annual Company Accounts

The Company Accounts include the Directors report on performance during the financial year and the audited financial statements. They are reported each year to Board during the autumn and sent to BMBC.

8. Use of Surplus

The Management Agreement with BMBC states that Berneslai Homes is entitled to use any surplus in accordance with any decision of its Board on reinvestment and in line with the organisation's business objectives, that support the Council's Strategic

objectives. Berneslai Homes' company year-end accounts are signed off at the AGM by BMBC as sole shareholder. The first call on surplus is to meet the needs of the Company.

Proposals on use of surplus above £250,000 would be presented to Board with the draft year end accounts in May of each year, in readiness for committing spend after sign off. These proposals require the approval of the Cabinet Spokesperson for Council Housing/full Cabinet.

Surplus decisions below £250,000 have been delegated by the Board to the Executive Management Team in agreement with the Service Director with responsibility for Council Housing. Within this context all Berneslai Homes surplus, over and above that required for company spend is pooled with HRA reserves as part of a strategic pool of unallocated resources.

9. Five Year Rolling Housing Capital Programme

The Housing Capital Programme is funded by the Council. It details capital expenditure planned and identifies all funding sources. Stock condition data is provided by Berneslai Homes to the Council to inform the ~~budget process.~~ HRA budget setting annually. This is signed off by the Council.

10. Acquisitions

~~This includes both individual and S106 acquisitions are no longer delegated to Berneslai Homes. Release of individual schemes up to the value of £250K is delegated to the Executive Management Team using the standard delegated decision form, requiring a minimum of three signatures. Scheme approvals up to £500K are by the Cabinet Spokesperson and to full Cabinet for schemes valued over £500K. All schemes above £250K go to the BMBC Capital Oversight Board.~~

11. Conversions

The same budgetary levels apply to conversions as detailed under point 9 Acquisitions.

12. Annual Release of Individual Barnsley Homes Standard Schemes

The annual decent homes programme, which is part of the housing capital programme is provided as an annual report to Board for approval by Cabinet. Monitoring of spend would form part of quarterly reporting to the Board.

13. Release of other Capital Schemes

The release of any other elemental capital scheme agreed within the Housing Capital Programme will form part of the annual report (11) to Board and Cabinet. Release of additional schemes in mid year over £250K will follow the same route as acquisitions and conversions.

14 & 15. Variations to Housing Capital Programme

Where there are significant changes to capital budget heads in the Housing Capital Programme these are reported to the Council for approval. Variations of £250,000 plus are reported to the Council on a monthly basis.

16. Waivers to HRA Contracts

Waivers to contract procurement rules are aligned to the delegations approval for capital spend.

17. Waivers to BH contracts

Waivers to contract procurement rules are aligned to the delegations approval for Berneslai Homes spend

18. Disposals

Where a property or small group of properties requires extensive repairs or major structural work an option appraisal is undertaken on their future use. Possible outcomes are repair/improve, mothball, demolition or disposal. Where disposal is the preferred option a cascade system is in place which aims to minimise the risk of creating poor quality private rented properties coming on to the market. First preference is to Housing Association partners to meet strategic housing needs, second to accredited private landlords and third sale on open market – usually by auction. EMT are delegated to make recommendations to the Council on disposals. [The BMBC / BH Asset Management Housing Stock Board has been developed for these types of AM stock review/decisions.](#)

Disposal of HRA land is [delegated to the responsibility of](#) BMBC Asset Management.

19. Demolitions

All demolitions require public consultation and depending on the total cost the decision is delegated to Berneslai Homes, or requires approval by the Council's Cabinet Spokesperson.

20. Area Based Regeneration

If work beyond the Barnsley Homes Standard is required to create sustainable neighbourhoods work occurs with the community, stakeholders and RSL partners along with bids for external funding in partnership with BMBC. [These proposals would be discussed and agreed at the joint BMBC/BH Asset Board.](#)

Master plans or blueprints are produced setting out detailed strategies for these areas. The Board considers and recommends these plans to the Council's Cabinet.

21. Funding Bids

The company seeks to maximise its revenue and capital streams by submitting bids to a number of external sources to maximise its income, for example, the Home and Communities Agency. These funds are normally time limited and supportive of wider social and environmental issues. [BMBC are responsible for funding bids related to the HRA.](#)

22. Partnership Deals

New partnership proposals are presented to Board from time to time as specific developments occur.

23. Significant Policy Changes

These will arise as a matter of review in order to meet legislative/statutory requirements or in response to customer feedback and consultation which have a resourcing implication. Draft proposals would be submitted to the Customer Services Committee for discussion before final versions were considered by the Board and Council if required. Each subject area would have a project plan and be risk assessed. Examples of significant policy change are the Lettings Policy and Tenancy Agreement review.

24. Service Level Agreements

Berneslai Homes has a number of Service Level Agreements (SLA) with BMBC. ~~Each SLA is for a time period, normally 2 years with the ability to review and serve notice by each party.~~ Reviews are undertaken regularly as part of officer delegations and where there are proposals to change the SLA ~~ie to market test or outsource.~~ ~~Any proposals to procure services differently must be jointly agreed with the Council.~~

25. Changes to Employee Terms and Conditions

Any changes would be considered by the Remuneration Committee and the necessary consultations had with trade unions.

26. Staffing levels below Management Team

Staffing decisions on vacancy release and changes to structures that can be contained within a directorate's overall budget profile and below £50k are part of the officer delegation schemes.

27. Significant Restructures

This is in reference to restructures where additional budget provision is required over and above £50,000 and 1 or more employees may be at risk as a consequence of the proposals, these decisions are for Board.

Decisions are only referred to the Council where there is a proposed 10% increase or decrease of the total staffing structure, a change that fundamentally amends the way services are provided and/or decisions affecting the Executive Team.

28. Executive Management Team Recruitment

Executive Management Team refers to direct reports of the Chief Executive.

Decision of the Remuneration Committee and the Chief Executive.

29. Chief Executive Recruitment

~~Decision~~ Joint decision of the Board and BMBC as the recruitment exercise is undertaken by a joint Panel.

30. Chief Executive/Executive Management Team Remuneration and Conduct

Annual pay increases in line with collective agreements, this delegation applies to any proposed changes in grade which is a decision of the Remuneration Committee on the recommendation from the Chair or Chief Executive as appropriate. Remuneration Committee to also act as disciplinary and grievance hearing panel, all appeals to full Board, excluding the Remuneration Committee members.

31. Board Remuneration

Decision of the Remuneration Committee with input from an independent source.

~~32. Company Contract Authorisation~~

~~All decisions to cease a Service Level Agreement with the Council (see delegation 21) and enter into an externally tendered contract to be approved by the Executive Management Team and signing of contracts under execution of deed delegated to the Chief Executive and Company Secretary.~~

33. Waivers to Contract Procurement Rules

Any waivers to contract procurement rules delegated to Director below £100k and EMT over £100k.

34 & 35 New Business and Grant Approvals

As part of the Strategic Plan and Management Agreement Berneslai Homes may externally trade to an annual limit of £6m. Depending on the potential value of the new business or grant being bid for the decision is delegated to the Executive below £250k in agreement with the Service Director, or above £250k to the Service Director with responsibility for Council Housing for written approval on behalf of the Council. This includes Berneslai Homes undertaking the delivery of market rents or sale products and additional work for Construction Services.

36. Company Bad Debts

All company (not HRA) bad debts to be written off have to be agreed by Audit and Risk Committee or officer delegation dependant on the level of debt.



Creating great homes and communities with
the people of Barnsley

Report Title	Annual Governance Statement	Confidential	No
Report Author	Chief Executive	Report Status	For Approval
Report To	Board 26 September 2024	Officer Contact Details	Claire Denson, Risk & Governance Manager clairedenson@berneslaihomes.co.uk Sam Roebuck, Head of Governance and Strategy samantharoebuck@berneslaihomes.co.uk

1. Executive Summary	<p>1.1 To receive the review of the internal controls for Berneslai Homes for the financial year 2023-24 and agree the Chief Executive's assurance statement for inclusion in the Director's Annual Report and Accounts that Berneslai Homes has an effective system of internal control (Appendix A). Audit and Risk Committee on 15 August 2024, recommended the assurance statement for approval by Board.</p> <p>1.2 Audit and Risk Committee recommended on 15 August 2024 that Board approve the linked Modern Slavery Statement 2023-24 (Appendix B) for signature by the Board Chair.</p> <p>1.3 The Audit and Risk Committee recommended on 15 August 2024 that Board approve the linked Senior Information Risk Owner Annual Report 2023-24 (Appendix C).</p> <p>1.4 Audit and Risk Committee were satisfied with the report and had no feedback for Board. They agreed at the meeting that they:</p> <p style="padding-left: 20px;">I. were satisfied that the assurance provided in the report, in relation to internal control arrangements, was sound and formed a satisfactory basis for the Statement attached as Appendix A for inclusion in the 2023-24 Accounts and recommended its approval to Board.</p>
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- II. noted the proposed 2024-25 Plan for improving the robustness of the system of internal control.
- III. recommended that Board approve the Modern Slavery Statement 2023-24 for signature by the Board Chair.
- IV. recommended that Board approve the Senior Information Risk Owner Annual Report 2023-24.

Review of Effectiveness

- 1.5 To monitor and maintain the effectiveness of Berneslai Homes' governance arrangements and drive continuous improvement, an audit-based evaluation has been undertaken of the internal control framework, in the form of our [Assurance Framework self-assessment](#). This Framework links into the risk management framework and monitors compliance against the high-level strategic risk areas (governance domains).
- 1.6 In carrying out this evaluation, the following actions have been undertaken:
- a) Heads of Service/Service Leads have completed the Assurance Framework self-assessment in respect of their services' general compliance with the framework.
 - b) Heads of Service/Service Leads have reviewed those self-assessments in respect of the areas that they lead on to gain assurance of overall compliance.
 - c) The Executive Management Team have reviewed the Assurance self-assessments and signed Assurance Statements – from which any actions are logged in the 2024-25 action plan in Section 14 – which provides assurance of overall compliance with the Assurance Framework.

Governance

- 1.7 Berneslai Homes has again achieved in excess of £36M turnover and is therefore legally obliged to publish a slavery and human trafficking statement for the financial year. The statement must disclose either the steps the business has taken during the financial year to ensure that slavery and human trafficking is not taking place in our operations and in our supply chain: or that we have taken no such steps. The statement for 2023-24 is attached at **Appendix B**.

Control Framework

- 1.8 Berneslai Homes is an accredited Investors in People (IIP) organisation. In March 2024, the Company achieved silver accreditation. Following consultation with BMBC, it was decided that IIP will not be renewed moving forward. A review is therefore underway to determine how we evaluate

staff satisfaction and the effective management and development of people.

- 1.9 An annual Performance Development Review (PDR) ensures the identification of training needs and the effective review of achievements against performance objectives and targets linked to the strategic objectives. The PDR review captures performance against the core competencies, where employees use behaviours to demonstrate their achievements. A full zero-based review of the PDR process is underway, with an interim review implemented to streamline the process, which includes the removal of the 6-month review.
- 1.10 The back log of repairs and the restrictions applied on the release of the equipment and adaptations works have contributed to dissatisfaction with the repairs and maintenance service and this has significantly impacted on levels of satisfaction across our communities. With demand for works projected to outweigh the budget provision it was necessary to implement a plan to reduce the repairs backlog that ensured the budget at year-end was closer to a balanced position. Overall satisfaction in 23/24 reduced from 84.2% to 77%, and there was an increase in complaints at both stages.
- 1.11 The Housing Ombudsman Service (HOS) [2024 HOS Complaint Handling Code](#) was introduced from 1st April 2024 as part of the Ombudsman's powers in the Housing Ombudsman Scheme. The Housing Ombudsman Self-Assessment was completed and published on our [website](#) and submitted to the HOS in line with statutory requirements and ahead of the 30th June 2024 deadline, which included the response from the BMBC Member responsible for complaints and our Board Complaint Champion. The policy was approved by Customer Services Committee in May 2024 and endorsed by BMBC Cabinet in June 2024. The HOS have since provided confirmation that they are satisfied that we have provided and published all necessary documents as part of the submission. The HOS Duty to Monitor team will now carry out an assessment of the submission to determine if we demonstrate compliance and if our approach is fair and reasonable and we will be notified of the outcome in due course.
- 1.12 We received 712 stage one complaints (39.63 per 1,000 properties) in 2023/24, of which 74.02% were responded to in Housing Ombudsman Code target timescales. Of the 136 stage two complaints (7.57 per 1,000 properties) received in 2023/24, 96.32% were responded to in Housing Ombudsman Code target timescales. We received

approximately double the number of stage one and stage two complaints in 2023/24 compared with the previous year.

- 1.13 We ended 2023/24 achieving a rent collection rate of 96.25%, an improved position from the previous year. This continued improvement is a significant shift in performance given the previous challenges of covid income recovery restrictions and the cost-of-living crisis. The roll-out of Universal Credit managed migration began for customers in receipt of tax credits through the final quarter and the team were able to advise and guide tenants during the process. We enter 2024/25 with additional pressures due to the continued roll-out of Universal Credit managed migration and the 53rd rent week but are confident our robust planning will mitigate as much impact as possible. We will continue with this 'Customer First' approach, and progress with new technology due to be implemented in the 3rd quarter.
- 1.14 Void rent loss (all voids) at year end 2023/24 was 1.56% which equates to £1,222,925.40, meaning performance is rated as red against a target of 1.05%; for comparison 2022/23 year-end performance was 0.76% so performance in year deteriorated by 0.8 percentage points. Performance on routine voids remains good with partners achieving the 9-day KPI with a low-cost turnaround. The number of voids requiring extensive works during 2023/24 has seen a vast increase on previous years. Budgets set for 2023/24 were not aligned to meet this increased demand therefore we were unable to release all extensive/major voids in 2023/24. We have carried out a full review and have worked with BMBC to reprioritise monies to enable work to begin on several major works voids. Budgets for 2024/25 have been aligned to 2023/24 demand including the clearing of voids that were not completed in 2023/24.

Data Protection and GDPR Reporting

Subject Access (SAR) and Freedom of Information (FOI) requests have increased in comparison to previous years. For 2023/24, Berneslai Homes had 120 requests in comparison with 88 in 22/23, 99 in 2021/22, and 40 in 2020/21.

- 1.15 The actual number of reported information security incidents for 2023/24 have remained insignificant in numbers, in line with previous years, and appear to be stabilising. All incidents have been categorised as low in terms of severity and as a result there has been no reporting to the Information Commissioner's Office.

Incident type	2019/20 Quarterly averages	2020/21 Quarterly averages	2021/22 Quarterly averages	2022/23 Quarterly averages	2023/24 Quarterly averages
Actual breaches	10	7	9	6	6

1.16 The linked [Senior Information Risk Owner \(SIRO\) Annual Report](#) has been prepared to provide assurance to the SIRO that Berneslai Homes has sufficient policies and procedures in place to effectively manage its information. The report highlights key activities that have been delivered over 2023-24 and identifies actions for 2024-25.

Audit

1.17 The Head of Corporate Assurance (Internal Audit) provides an annual report, which gives an assurance opinion in relation to the Company's Governance, Risk and Internal Control Framework. This is based on the Corporate Assurance Team's advisory and compliance work undertaken during the year, in accordance with the approved plan of activity and for which the Audit & Risk Committee receive updates at each meeting. In terms of the 2023/24 report, which the Berneslai Homes Audit and Risk Committee considered at its meeting on the 13th June 2024, the Head of Corporate Assurance gave a Reasonable (positive) annual assurance opinion. Whilst a reasonable assurance opinion was given, the Audit and Risk Committee were asked to ensure that the agreed management actions, included in the assurance reports received throughout the year to address findings and implications raised, are fully and timely implemented to improve the framework. The 2023/24 agreed management actions were generally implemented on a timely basis, with valid reasons having been provided by management where revised implementation dates were required.

Health and Safety

1.18 The Quarterly employee health and safety performance monitoring is delegated by Board to the Executive Management Team. The Annual Health and Safety Report 2023-24 was reported to Board on the 11th July 2024, utilising the collation of Berneslai Homes' health and safety data and input by the Health and Safety Management Groups. The Health and Safety Policy is reviewed and re-issued annually in-line with the Report. The statistics found an increase from the previous year in the number of accidents reported and in the number of days lost due to incidents. The reports of violence and aggression had decreased from the previous year.

Emergency Planning and Business Continuity

1.19 The Emergency and Business Continuity plans have continued to evolve throughout 2023-24 to provide essential and critical services to customers throughout incidents. At least two emergency planning sessions are scheduled in each year. Sessions held throughout 2023-24, include: a cyber security simulation based around the potential loss of IT and training sessions focused on roles and responsibilities and adverse weather. Real incidents have also tested our resilience arrangements over the last 12 months.

Risk Management

1.20 Corporate Assurance undertook a follow up review of the Risk Management System in November 2023 and confirmed a positive assurance opinion, which concluded that the “Risk Management arrangements are now fully embedded across the organisation and that a framework exists upon which risk owners can effectively identify, manage, monitor, and report on key strategic risks and concerns”.

Annual Fraud Update

1.21 The Anti-Fraud and Corruption Policy documents have undergone a full two-year review for approval by Audit and Risk Committee. Whilst the documents have been refreshed to ensure they remain dynamic; no key procedures have been changed. They are available to view in Decision Time:

- [Whistleblowing Policy \(Appendix D\)](#)
- [Anti-Fraud and Corruption Policy \(Appendix E\)](#)
- [Anti-Bribery Policy \(Appendix F\)](#)
- [Fraud Response Plan \(Appendix G\)](#)
- [Prosecutions Policy \(Appendix H\)](#)

1.22 Berneslai Homes have investigated 75 incidents of tenancy fraud during 2023/24. The majority of these alleged frauds had insufficient evidence to pursue.

Details	2022/23	2023/24
Alleged application fraud – no evidence of fraud	6	2
Alleged non-residency – no evidence of fraud	8	21
Property recovered due to tenant’s non-residency	2	3
Parting With Possession – no evidence of fraud	3	5
Parting With Possession – property recovered	1	0
Alleged fraudulent attempt to succeed tenancy – no evidence of fraud	9	2

Prevention of false attempts to succeed tenancy	0	2
Allegation of sub-letting - no evidence of fraud	10	5
Allegation of sub-letting – tenancy terminated	1	0
Referred back to Berneslai Homes to deal with as breach of tenancy	8	0
Ongoing	14	35
Total	62	75

Conclusion and Action Plan 2024-25

1.23 The annual Assurance Framework self-assessments for 2023-24 concluded that there were no fundamental issues around Berneslai Homes' internal controls. However, the assessments highlighted areas of development and improvement that are underway, which are being addressed during 2024-25. Whilst the majority of these actions were already in place and not identified as a result of the self-assessment, they have been included in the **Action Plan at 14.2** to highlight our ongoing developments with regards to these areas of internal control.

2 Recommendations

It is recommended by Audit and Risk Committee that:

- i. Board satisfies itself that the assurance provided in this report, in relation to internal control arrangements, is sound and forms a satisfactory basis for the Statement attached as Appendix A for inclusion in the 2023-24 Accounts and recommend its approval to Board.
- ii. Board note the proposed 2024-25 Plan for improving the robustness of the system of internal control.
- iii. Board approve the Modern Slavery Statement 2023-24 for signature by the Board Chair.
- iv. Board approve the Senior Information Risk Owner Annual Report 2023-24.

3. Background

- 3.1 The Annual Governance Statement provides an overall assessment of Berneslai Homes' governance arrangements. The Statement includes an appraisal of the key controls in place to manage the principal governance risks and the effectiveness of systems and processes governing decision-making and financial control.
- 3.2 Berneslai Homes is responsible for ensuring that its business is conducted in accordance with the law and proper standards. It is also responsible for ensuring that public money is safeguarded, properly accounted for and used economically, efficiently and effectively.
- 3.3 In discharging these responsibilities, Berneslai Homes has in place proper arrangements for the governance of its undertakings, which includes arrangements for the management of risk.

- 3.4 Corporate governance describes how Berneslai Homes controls what it does. Good governance provides the conditions for Berneslai Homes and its partners to work effectively, economically and ethically. Berneslai Homes should carry out its functions in a way that demonstrates accountability, transparency, effectiveness, integrity, and inclusivity. Good governance will support the company to pursue its vision and secure its agreed objectives.
- 3.5 Berneslai Homes' governance framework encompasses the systems and processes, and culture and values, by which Berneslai Homes is directed and controlled. This also includes accountable activities and engagement with the community. It enables the organisation to monitor the achievement of its strategic objectives and to consider whether those objectives have led to the delivery of appropriate, cost-effective services.
- 3.6 The Annual Governance Statement demonstrates how Berneslai Homes is doing the right things, in the right way in a timely, inclusive, open, effective, honest and accountable manner.
- 3.7 Berneslai Homes has adopted the principles outlined in the CIPFA/SOLACE Framework as part of our internal control framework, 'Delivering Good Governance in Local Government'.
- 3.8 Berneslai Homes undertake an annual self-assessment against the National Housing Federation (NHF) Code of Governance, which is then audited annually by BMBC Corporate Assurance, which continues to receive positive assurance. The Code is designed to help housing organisations achieve the highest standards of governance and board excellence. Berneslai Homes committed to the current 2020 Code and undertook an in-depth self-assessment of the code in consultation with EMT, SMT and Board. The annual self-assessment ensures we have an ongoing development Action Plan, which is monitored by Audit and Risk Committee.
- 3.9 This report is for the Audit and Risk Committee and Board to acknowledge that it is responsible for the organisation's systems of internal control and to advise on the effectiveness of the systems in place.
- 3.10 The Annual Report and Accounts includes a statement (**Appendix A**) that Berneslai Homes has an effective system of internal control.

4. Review of Effectiveness

- 4.1 To monitor and maintain the effectiveness of Berneslai Homes governance arrangements and drive continuous improvement, an audit-based evaluation has been undertaken of the internal control framework, in the form of our [Assurance Framework self-assessment](#). This Framework links into the risk management framework and monitors compliance against the high-level strategic risk areas (governance domains).

- 4.2 In carrying out this evaluation, the following actions have been undertaken:
- a) Heads of Service have completed the Assurance Framework self-assessment in respect of their services' general compliance with the framework.
 - b) Service Leads have reviewed those self-assessments in respect of the areas that they lead on to gain assurance of overall compliance.
 - c) The Executive Management Team have reviewed the Assurance self-assessments and signed Assurance Statements – from which any actions are logged in the 2024-25 action plan in Section 14 – which provides assurance of overall compliance with the Assurance Framework.
- 4.3 These mechanisms of review contribute to the overall assurance for the Annual Governance statement. The key sources of assurance include the 2023-24:
- a) BMBC Corporate Assurance Annual Report.
 - b) Risk Management Annual Report.
 - c) Performance Management Reports.
 - d) External Audit and Inspection findings, including the External Audit Annual Audit Letter.
 - e) Health and Safety Annual Report.
 - f) Your Comments Count Report, including complaints referred to and investigated by the Ombudsman.
 - g) Review of the 2022-23 AGS Action Plan.

5. Governance

- 5.1 The Senior and Executive Management Teams have responsibility for developing and implementing internal control systems and procedures. Berneslai Homes has embedded written policies and procedures in all areas of operation. These policies and procedures are available online via the intranet and/or SharePoint. Each year the application and implementation of policies and procedures are subject to audit by BMBC Corporate Assurance, with reports being presented to the Audit and Risk Committee.
- 5.2 The internal control framework comprises the following principal elements:
- Memorandum & Articles of Association
 - Section 27 Agreement
 - Scheme of Delegation
 - Strategic Plan
 - Board Governance Pack in Decision Time Resources
 - Council Contract Procedure Rules as adopted by Berneslai Homes
 - Financial Regulations
 - Employee/Board Code of Conduct
 - Housing policies and procedures
 - Risk Management Framework Strategy
 - Performance Management Framework
 - Procurement Strategy
 - Contract Management Policy

- Prosecutions Policy
 - Budget monitoring and reporting procedures
 - SAP/EBP/Financial system procedures
 - Human Resources policies
 - Equality, Diversity and Inclusion Strategy
 - Information Management & Governance policies
 - Employee Health & Safety Policy
 - Business Continuity & Resilience plans
 - BMBC Corporate Assurance
 - Terms of Reference for Board and Committees
 - Whistleblowing (Confidential Reporting) Policy
 - Complaints Procedures
 - Corporate Debt Strategy
 - Business Planning Financials
 - Anti-Fraud & Corruption Policy
 - Value for Money Strategy
- 5.3 In 2022, DTP undertook a follow-up review following their initial 2020 Governance review with positive results and BMBC Corporate Assurance undertook a review of the implementation of the Risk Management Framework, also with positive results. A fresh review will be undertaken in 2025 by DTP.
- 5.4 The Board sets the organisation's vision and objectives and identifies the opportunities and threats to achieve those objectives and ensures a framework of risk management is in place to obtain assurance that policies are adopted and operating effectively. The Memorandum & Articles of Association set out the Board's objectives, powers and functions. The Services Agreement sets out the responsibilities delegated from the Council to Berneslai Homes.
- 5.5 The Services Agreement with the Council is in place until 2031. The governance arrangements for Berneslai Homes contained within the Agreement are:
- Independently appointed Chair.
 - Board membership of a maximum of 9 members – two tenants/leaseholders, two Council Nominees, four independents and the Chair. The Shareholder representative is also an attendee.
 - Remuneration for all Board Members.
 - Memorandum & Articles of Association.
- 5.6 Each member of the Board undertakes a tailored induction programme with access to Decision Time Resources, which includes the Governance Pack and useful policies and procedures. This information is regularly reviewed and updated to reflect any corporate and legislative changes. The Chair undertakes annual appraisals with Board Members. The Senior Independent Director and the Audit and Risk Committee Chair undertake an annual appraisal with the Chair.

5.7 **Modern Slavery Statement pursuant to Section 54(1) of the Modern Slavery Act 2015.**

5.7.1 The Modern Slavery Act was introduced during 2015. It sets out a range of measures on how modern slavery and human trafficking is dealt with in the UK. Whilst the entire Act is not directly relevant for businesses, Section 54 entitled 'Transparency in supply chains etc.' impacts the corporate sector. Businesses must comply with the Act if it meets two criteria:

- Global Turnover of more than £36M;
- and carries on a business in any part of the United Kingdom.

5.7.2 Berneslai Homes has achieved in excess of £36M turnover and is therefore legally obliged to publish a slavery and human trafficking statement for the financial year. The statement must disclose either the steps the business has taken during the financial year to ensure that slavery and human trafficking is not taking place in our operations and in our supply chain: or that we have taken no such steps. The statement for 2023-24 is attached at **Appendix B**.

5.7.3 The Act states that the statement must be approved by the Board of Directors (or equivalent management body) and signed by a Director or equivalent. Audit and Risk Committee recommend to Board that the Modern Slavery Statement is approved and is signed by the Board Chair.

5.8 The Head of Governance and Strategy is appointed as the Company Secretary for Berneslai Homes.

6. Financial Controls

6.1 Berneslai Homes uses the Council's financial system (SAP) and currently operates financial controls developed by the Council. Berneslai Homes has its own Financial Regulations, which are reviewed in line with BMBC's. Berneslai Homes adopts the Council's Contract Procedure Rules with minimum amendments.

6.2 A system of budget management and financial monitoring has been implemented with clear procedures. A robust financial monitoring framework is in place with direct reporting to, and consideration by, the Board who meet on a quarterly basis.

7. Control Framework

7.1 Berneslai Homes is an accredited Investors in People (IIP) organisation. The Standard provides a framework that helps organisations to improve performance and realise objectives through the effective management and development of their people. In March 2024, the Company achieved Silver accreditation. Following consultation with BMBC, it was decided that IIP would not be renewed moving forward and a review is underway to decide how to evaluate staff satisfaction and the effective management and development of people. Berneslai Homes achieved the Be Well @ Work award in April 2023.

- 7.2 All new staff follow a four-week induction programme which incorporates a one-day corporate induction training course. An annual Performance Development Review (PDR) ensures the identification of training needs and the effective review of achievements against performance objectives and targets linked to the strategic objectives. The PDR review captures performance against the core competencies, where employees use behaviours to demonstrate their achievements. A full zero-based review of the PDR process is underway, with an interim review implemented to streamline the process, which includes the removal of the 6-month review.
- 7.3 Core competencies are incorporated into the recruitment and selection process. All recruitment is via competitive interview and recruiting managers are encouraged to use some form of assessment to measure essential criteria as this allows candidates to demonstrate their experience and knowledge. All recruiting panels are trained in recruitment and selection methods and policies. An analysis of recruitment and selection by protected characteristics is produced each year and submitted to the EMT and Board. In addition, audits are carried out by the HR team to ensure the processes are followed correctly and documentation stored appropriately.
- 7.4 The Board approve the creation and review of policies and procedures relating to the company's principal activities. These are embedded through staff information, instruction and training, and placed on the intranet and/or SharePoint.
- 7.5 The Board receive quarterly performance management reports that focus on key performance indicators, which measure achievement against our strategic objectives.
- 7.6 The back log of repairs and the restrictions applied on the release of the Equipment and Adaptations works have contributed to dissatisfaction with the repairs and maintenance service, which has significantly impacted on levels of satisfaction across our communities. With demand for works projecting to outweigh the budget provision it was necessary to implement a plan to reduce the repairs backlog that ensured the budget at year-end was closer to a balanced position. Overall satisfaction in 23/24 reduced from 84.2% to 77%, and there was an increase in complaints at both stages.
- 7.7 We ended 2023/24 achieving a rent collection rate of 96.25%, an improved position from the previous year. This continued improvement is a significant shift in performance given the previous challenges of covid income recovery restrictions and the cost-of-living crisis. We continued to experience change within the service throughout this period, including a new service manager and embedding of a 'patch based' income recovery model. Following these changes, staff morale and motivation has improved giving officers increased ownership and accountability. Relationships with tenants have also improved via effective communication and more timely focussed interventions in increase collection. We have also seen the staffing position stabilise, as turnover and sickness absence continues to reduce. The roll-out of Universal Credit managed migration began for customers in receipt of tax credits through the final quarter and the team were able to advise and guide tenants during the process. We enter 2024/25 with additional pressures due to the

continued roll-out of Universal Credit managed migration and the 53rd rent week but are confident our robust planning will mitigate as much impact as possible. We will continue with this 'Customer First' approach and progress with new technology due to be implemented in the 3rd quarter. The 'Voicescape' software uses behavioural insights, data science and automation to maximise revenue and drive efficiency, freeing up time to work with our most financially vulnerable customers to ensure they are provided with the best possible support, advice and guidance to manage their rent accounts successfully and sustain their tenancies.

- 7.8 Void rent loss (all voids) at year end 2023/24 was 1.56% which equates to £1,222,925.40 meaning performance is rated as red against a target of 1.05%, for comparison 2022/23 year-end performance was 0.76% so performance in year deteriorated by 0.8 percentage points. Performance on routine voids remains good with partners achieving the 9-day KPI with a low-cost turnaround. The number of voids requiring extensive works that have come in during 2023/24 has seen a vast increase on previous years. Budgets set for 2023/24 were not aligned to meet this increased demand therefore we were unable to release any more extensive/major voids in 2023/24. We have carried out a full review and have worked with BMBC to reprioritise monies to enable work to begin on a number of major works voids. Budgets for 2024/25 have been aligned to 2023/24 demand including clearing voids that were not completed in 2023/24.
- 7.9 The Housing Ombudsman Service (HOS) [2024 HOS Complaint Handling Code](#) was introduced from 1st April 2024 as part of the Ombudsman's powers in the Housing Ombudsman Scheme. The Housing Ombudsman Self-Assessment was completed and published on our [website](#) and submitted to the HOS in line with statutory requirements and ahead of the 30th June 2024 deadline. This includes the response from the BMBC member responsible for complaints and our board Complaint Champion. The policy was approved by Customer Services Committee in May 2024 and endorsed by BMBC Cabinet in June 2024. The HOS have since provided confirmation that they are satisfied that we have provided and published all necessary documents as part of the submission. The HOS Duty to Monitor team will now carry out an assessment of the submission to determine if we demonstrate compliance and if our approach is fair and reasonable and we will be notified of the outcome in due course.
- 7.10 The Tenant Voice Panel continue to provide in-depth challenge, ensuring we remain compliant and explore areas of service that they feel may require further investigation, from a tenant's perspective. The Scrutiny Panel have completed five projects to date, around Website accessibility, compliance against the Housing Ombudsman's Complaints Handling Code, Damp and Mould through the eyes of a customer, communication around Planned Repairs and Equipment and Adaptations. They are in the process of revisiting the Damp and Mould project, to review the action plan and are currently working on a plan for the next 12 months.

8. Data Protection and GDPR Reporting

8.1 Subject Access (SAR) and Freedom of Information (FOI) requests have increased in comparison to previous years. For 2023/24, Berneslai Homes had 120 requests in comparison with 88 in 22/23, 99 in 2021/22, and 40 in 2020/21.

Data Incidents

8.2 The actual number of reported information security incidents for 2023/24 have remained insignificant in numbers, in line with previous years, and appear to be stabilising. All incidents have been categorised as low in terms of severity, and as a result there has been no reporting to the Information Commissioner's Office.

Incident type	2019/20 Quarterly averages	2020/21 Quarterly averages	2021/22 Quarterly averages	2022/23 Quarterly averages	2023/24 Quarterly averages
Actual breaches	10	7	9	6	6

8.3 Additionally, if comparing this year's total average data incidents (which includes near misses and those of third parties) with previous years, then we can equally observe a gradual stabilising pattern.

All incidents	2019/20	2020/21	2021/22	2022/23	2023/24
Total number of average quarterly data incidents	17	19	14	8	8

8.4 Whilst it is a possibility that employees could be under reporting incidents, there is evidence of over reporting in 2023/24, as in 2022/23, for 'no breach' incidents. Indeed, these false positives indicate that teams are aware of data incidents and their potential impact on customers and Berneslai Homes. Therefore, teams have emailed the Data Protection team for advice or have completed an Incident Form.

8.5 To ensure that incidents have continued to remain low in number, the Data Protection team have undertaken ongoing prevention steps, taking a proactive rather than a reactive approach. For instance, meetings/communications are held with line managers and responsible officers to provide next step advice, such as the changing of procedures and processes to prevent future incidents. Moreover, the Data Protection team continue to publish organisation-wide comms on the matter, along with how to report security incidents.

Training and Development

8.6 Data Protection Training and Awareness has continued in many forms to encourage engagement and to ensure that data incidents remain low and the principles of the **UK GDPR** are adhered to.

- 8.7 Staff training and awareness has been supported with a yearly training programme, developed from the Information Governance training strategy and matrix.
- 8.8. The “Agile working” e-learning module has been refreshed in 2024 for staff and for craft. Additionally, the “Information Management, Governance and Security” eLearning module has been greatly revised with an associated guide to enable staff to self-serve.

Documentation

- 8.9 All Information Governance policies, relevant to data protection and information security, have been reviewed and published on the Information Governance intranet page for staff to access. Notably, the Confidentiality Policy has been updated and published on the Intranet and communicated to staff, ensuring they are fully aware of their responsibilities towards the confidentiality of written and verbal personal data, as well as sensitive business information.

Monitoring and Review

- 8.10 Over the last 12 months, there have been 2 specific reviews covering aspects of data protection:

Area Audited	Key Areas	Assurance Opinion
SARs/FOIRS Management	Updating of job titles on an internal team process and the identification of documents to be deleted in line with the retention period for SARs and FOIRs.	Reasonable (positive)
UK GDPR Data Protection Survey (Staff)	Address awareness issues on DPIAs, Fines and Enforcement Action, including legal basis for processing personal data.	Reasonable (positive)

- 8.11 The Information Governance team have provided a positive assurance opinion to the Berneslai Homes’ DPO for these two reviews. The actions arising have been implemented as planned or are on target. For instance, awareness of fines and enforcement action have been provided in the updated Induction material and uploaded guides for Information Management, Governance and Security, with several company-wide communications, directing all staff to these resources. Additionally, the lawful grounds for processing personal data has been delivered through a Team brief, ensuring that all managers discuss the legal grounds for the processing of personal data. Furthermore, the internal operational guidance document has been updated for the team. The deletion of records outside of the retention schedule remains on-track, with records relating to SAR and FOI requests deleted from SharePoint prior to 2020.

Records Management

- 8.12 Understanding the organisation's use and requirements of data has played a key role this year. Workshops with all business areas have provided an overview of what issues and challenges colleagues are facing with their data. Subsequently, these results have now been collated and reviewed, resulting in a Data Strategy being produced.
- 8.13 Data cleansing work continues. Due to technical constraints, manual data analysis has been carried out across SharePoint, matching records to their retention period. This has highlighted areas where records are being held beyond retention. Liaising with different teams, these areas are now being cleansed to ensure greater compliance around our data holdings.
- 8.14 Technical capabilities continue to be explored to prevent the issue expanding. Automated retention features within SharePoint are still being explored and continually pursued alongside assistance from BMBC. These features will automatically apply correct retention periods to records and allow for technical deletion, with minimal manual input. This will ensure compliance across the organisation without the need for extensive resources and prevent the issue from reoccurring.
- 8.15 A full policy and procedural review has been undertaken to ensure all documentation is accurate and up to date. In addition, new guidelines and technical glossaries have been produced and are now accessible to all Berneslai Homes staff on the intranet.
- 8.16 The Senior Information Risk Owner (SIRO) Annual Report has been prepared to provide assurance to the SIRO that Berneslai Homes has sufficient policies and procedures in place to effectively manage its information. The report highlights key activities that have been delivered over 2023-24 and identifies actions for 2024-25 (**Appendix C**).

9. Audit

- 9.1 The Board is accountable for the Company's management and internal control system, delegating some of the tasks to Audit and Risk Committee.
- 9.2 The Council's Corporate Assurance Team provides assurance (audit) coverage through a Service Level Agreement. The role of the Corporate Assurance Team is to operate both independently and objectively. The Audit & Risk Committee agrees an annual assurance (audit) plan and a Corporate Assurance activity report is provided at the quarterly Committee meeting.
- 9.3 The Head of Corporate Assurance (Internal Audit) provides an annual report, which gives an assurance opinion in relation to the Company's Governance, Risk and Internal Control Framework. This is based on the Team's advisory and compliance work undertaken during the year, in accordance with the approved plan of activity and for which the Audit & Risk Committee receive updates at each meeting. In terms of the 2023/24 report, which the Berneslai Homes Audit and Risk Committee considered at its meeting on the 13th June

2024, the Head of Corporate Assurance gave a Reasonable (positive) annual assurance opinion. Whilst a reasonable assurance opinion was given, the Audit and Risk Committee were asked to ensure that the agreed management actions, included in the assurance reports throughout the year to address findings and implications raised, are fully and timely implemented to improve the framework. The 2023/24 agreed management actions were generally implemented on a timely basis, with valid reasons having been provided by management where revised implementation dates were required.

10. Health and Safety

- 10.1 Berneslai Homes operates two Health and Safety Management Groups: one for Construction Services and one for the remaining part of the company. Each Group comprises of: staff representation from a cross-section of departments; an EMT member; the Council's Health and Safety Advisor as part of the SLA; Trade Union / Employee representation, if available; and the Risk and Governance Manager and Construction Services Health and Safety Manager, to ensure consistency across the two Groups and provide support. The Groups meet quarterly (Housing Management) and bi-monthly (Construction Services) to monitor progress on health and safety and discuss and action any new and emerging issues.
- 10.2 The Quarterly employee health and safety performance monitoring is delegated by Board to the Executive Management Team. The Annual Health and Safety Report 2023-24 was reported to Board on the 11th July 2024, utilising the collation of Berneslai Homes' health and safety data and input by the Health and Safety Management Groups. The Health and Safety Policy is reviewed and re-issued annually in-line with the Report. The statistics found an increase from the previous year in the number of accidents reported and in the number of days lost due to incidents. The reports of violence and aggression had decreased from the previous year.
- 10.3 Health and Safety is a standard agenda item on the bi-monthly Union Liaison meeting.
- 10.4 Health and Safety risks are identified within the Strategic and Operational Issues and Concerns Registers.
- 10.5 Risk assessments and safe working guidance are in place for all Occupation Groups and health and safety-related tasks. The Health and Safety Standards provide guidance on how we undertake the requirements of our corporate Health and Safety Policy. All documents are reviewed annually and as required.
- 10.6 The corporate induction process includes risk management, fire safety, health and safety and emergency planning.

Emergency Planning and Business Continuity

- 10.7 Berneslai Homes works in collaboration with Barnsley Council as part of our Emergency planning and Business Continuity arrangements. We also have our own Emergency and Business Continuity Plans, which detail critical

services provided to our customers, which are reviewed annually by named officers. These have been successfully tested over the past several years. 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.

- 10.8 The plans have continued to evolve throughout 2023-24 in continuing to provide essential and critical services to customers throughout incidents. At least two emergency planning sessions are scheduled in each year. Sessions held throughout 2023-24, include: a cyber security simulation, based around the potential loss of IT; and training sessions focused on roles and responsibilities and adverse weather. Real incidents have also tested our resilience arrangements over the last 12 months.
- 10.9 A dedicated Emergency Planning site was also built on SharePoint during 2023-24 to ensure we have a full visible and organised system should the plans need to be actioned.

11. Risk Management

- 11.1 BMBC Corporate Assurance undertook a review of the risk management framework in 2022 to ensure the new risk monitoring system was being effectively embedded and received positive assurance. After 12 months of embedding the new system, Corporate Assurance undertook a follow up review in November 2023 and confirmed a positive assurance opinion, which concluded that the “Risk Management arrangements are now fully embedded across the organisation and that a framework exists upon which risk owners can effectively identify, manage, monitor, and report on key strategic risks and concerns”.
- 11.2 The full analysis of the Risk Management Framework, including risk analysis, is undertaken as part of the quarterly and annual risk reports to Audit and Risk Committee and Board.
- 11.3 The Board and Chief Executive have ownership of risk management. The Risk and Governance Manager coordinates and supports all aspects of the Company’s risk management activities and reviews and evaluates the Risk Management Strategy and supporting systems.
- 11.4 The Strategic Issues and Concerns Register is updated at least monthly by EMT, supported by the Risk and Governance Manager. The two-yearly zero-based review is scheduled for November 2024 by EMT and board members and will be facilitated by an external consultant (DTP).
- 11.5 Each Directorate produces an Operational Issues and Concerns Register, which is also updated at least quarterly by lead officers, with the facilitated zero-based review of each register scheduled during 2024/25.
- 11.6 The Board Risk Appetite was reviewed and approved by Board in February 2023 to ensure it remains a live document. A full zero-based review will be undertaken in early 2025.

11.7 All Board reports contain a section on 'Risk Implications'. This is also the case for many other management reports. Where major projects are being implemented, separate Project Risk Registers are created, reviewed and managed for the life of the projects.

12. Annual Fraud Update

12.1 The Anti-Fraud and Corruption Policy documents have undergone a full two-year review for approval by Committee. Whilst the documents have been refreshed to ensure they remain dynamic; no key procedures have been changed. They are available to view in Decision Time:

- Whistleblowing Policy (Appendix D)
- Anti-Fraud and Corruption Policy (Appendix E)
- Anti-Bribery Policy (Appendix F)
- Fraud Response Plan (Appendix G)
- Prosecutions Policy (Appendix H)

Proactive Anti-Fraud and Corruption activity during 2023-24:

12.2 The Fraud Issues and Concerns register is reviewed at least quarterly by lead officers and is included as part of the quarterly risk update to EMT, Audit and Risk Committee and Board.

12.3 We have an ongoing programme of fraud awareness. During 2022 and 2023, Board Members and the Leadership Forum undertook high level Fraud Awareness training delivered by HQN, staff and some Board members undertook Tenancy Fraud Awareness training, and Mandatory fraud e-Learning was rolled out to all staff and included as part of the corporate induction.

12.4 Tenancy fraud awareness and checking tenancy records submitted via Internal Audit is an integral part of the team's day-to-day activities.

12.5 Staff are pro-active when looking at tenants' accounts for any irregularities in payments or when visiting properties.

12.6 Reports of whistleblowing and fraud matters and investigations are annually collated and reported within this report.

12.7 Berneslai Homes have investigated 75 incidents of tenancy fraud during 2023/24. The majority of these alleged frauds had insufficient evidence to pursue.

Details	2022/23	2023/24
Alleged application fraud – no evidence of fraud	6	2
Alleged non-residency – no evidence of fraud	8	21
Property recovered due to tenant's non-residency	2	3
Parting With Possession – no evidence of fraud	3	5
Parting With Possession – property recovered	1	0

Details	2022/23	2023/24
Alleged fraudulent attempt to succeed tenancy – no evidence of fraud	9	2
Prevention of false attempts to succeed tenancy	0	2
Allegation of sub-letting - no evidence of fraud	10	5
Allegation of sub-letting – tenancy terminated	1	0
Referred back to Berneslai Homes to deal with as breach of tenancy	8	0
Ongoing	14	35
Total	62	75

12.8 There were 0 whistleblowing reports made during 2023/24.

12.9 There were 0 referrals to the BMBC Corporate Anti-Fraud Team regarding staff-related fraud.

13. Action Plan 2023-24

13.1 The 2023-24 Action Plan from the 2022-23 Annual Governance Statement report was reviewed quarterly by lead officers and is included as part of the quarterly risk update to EMT, Audit and Risk Committee and Board.

13.2 A number of actions have transferred from the 23/24 action plan to the 24/25 action plan. An explanation has been provided for each carried over action at 14.2.

14. Conclusion and Action Plan 2024-25

14.1 The annual Assurance Framework self-assessments for 2023-24 concluded that there were no fundamental issues around Berneslai Homes' internal controls. However, the assessments highlighted areas of development and improvement that are underway, which are being addressed during 2024-25. Whilst the majority of these actions were already in place and not identified as a result of the self-assessment, they have been included in the Action Plan at 14.2 to highlight our ongoing developments with regards to these areas of internal control.

14.2 2024-25 Action Plan:

Action	Action owner	Timetable
Reviewing performance framework to ensure performance data and monitoring of is integral to relevant roles (carried over)	Performance and Improvement Manager	September 2024 (Delayed from April 2024 as the review is ongoing)
Definition documents for every Performance Indicator (PI) (carried over)	Performance and Improvement Manager	PI – September 2024 (original target date)
Reviewing complaints reports in line with new Housing Ombudsman Code	Head of Customer Services	September 2024
Implementing a quarterly HR and OD dashboard for people and comms	Head of HR and OD	September 2024
Review Budget setting timetable	Head of Finance	September 2024
Refresher training re managing staff – Recruitment and Selection (carried over)	HR Manager and OD Manager	October 2024 (Delayed from March 2024 – pilot scheduled for October 2024)
SYSMAX compliance system to be implemented at Construction Services (carried over)	Head of Operations CS	December 2024 (Delayed from April 2024 due to difficulties with SYSMAX ability to be on any frameworks)
Developing role-specific training programme for Lettings (carried over)	Lettings Manager	December 2024 (Delayed from December 2023 - date extended to account for onboarding of new team leader.
Health and Safety refresher training for Board (carried over)	Risk and Governance Manager	December 2024 (original target date)
Project Management policy and procedure to support work of Transformation Board (carried over)	Head of Finance	December 2024 (original target date)
Construction Services employing a dedicated Customer Services role, to monitor and report and feedback trends and performance on customer complaints received at Construction Services	Commercial Manager CS	December 2024

Action	Action owner	Timetable
New tenant satisfaction survey for Construction Services in line with Repairs First	Head of Operations CS	December 2024
Consistent Data Standards – to ensure a consistent, agreed approach to how data is inputted in specific formats.	Head of Governance and Strategy	December 2024
Knowing our Customer Strategy under development – dependent on IT/CRM system	Head of Customer Services and Head of Governance and Strategy	December 2024
Embedding efficiency savings into business as usual - work in progress.	Head of Finance	December 2024
Review of scheme of delegation and associated comms and accessible online	Head of Governance	December 2024
Professionalism agenda action plan to ensure compliance.	Head of HR and OD	January 2025
Asset management database as part of NEC phase 2 to be implemented within the agreed program timeframe.	Head of Asset Management	March 2025
The new Procurement Act will involve new activities within the procurement process. Training will be in conjunction with BMBC. Including regular comms.	Procurement Manager	March 2025
Financial Regulations to be reviewed, followed by comms to all staff	Head of Finance	March 2025
Implement actions from liP	Head of HR and OD	March 2025
Knowing your customer project - Comparing tenant data with staff data around EDI.	Head of HR and OD	March 2025
Stock condition and energy performance data to 100% position (carried over)	Head of Asset Management	Mop up in 24/25 – March 2025
Equality Impact Assessment process review	Head of HR and OD	May 2025
Full review of training and development offer, including new training matrix, Leadership & Development and the PDR process.	Head of HR and OD	May 2025

15. Customer Voice/Impact

15.1 The aim of the review of internal controls is to scrutinise the internal risk management system and therefore customer views are not sought for this report. A number of internal controls seek to enhance the customer voice.

16. Risks

16.1 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 Internal Control Framework ensures that effective mechanisms are in place for the management of risk.

16.2 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.

16.3 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.

17. Strategic Alignment

17.1 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.

18. Data Privacy

18.1 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.

19. Consumer Regulatory Standards

19.1 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.

- 20. Other Statutory/Regulatory Compliance
- 20.1 To provide Board with assurance around our risk management arrangements.
- 21. Financial
- 21.1 There are no financial implications arising directly from this report.
- 22. Human Resources and Equality, Diversity and Inclusion
- 22.1 Human Resources Policies and Procedures, including Equality, Diversity and Inclusion are key internal controls and seek to mitigate any associated risks.
- 23. Sustainability Implications
- 23.1 No specific zero carbon implications from this report.
- 24. Glossary
- 24.1 The **CIPFA/SOLACE Framework** focuses on six key principles of corporate governance. The Framework sets out the actions authorities need to follow to achieve 'Good Governance' when applying the six key principles. These actions include a review of existing governance arrangements against the CIPFA/SOLACE Framework.
- 25. Associated Background Papers on Decision Time
- 25.1 [Assurance Framework template](#)
- 26. List of Appendices
- 26.1 Appendix A – Draft Statement for inclusion in the 2023-24 Report and Accounts.
- 26.2 [Appendix B – Modern Slavery Statement 2023-24.](#)
- 26.3 [Appendix C – Senior Information Risk Owner Annual Report 2023-24.](#)
- 26.4 [Appendix D - Whistleblowing Policy - Available to view in Decision Time Resources](#)
- 26.5 [Appendix E - Anti-Fraud and Corruption Policy - Available to view in Decision Time Resources](#)
- 26.6 [Appendix F - Anti-Bribery Policy - Available to view in Decision Time Resources](#)
- 26.7 [Appendix G - Fraud Response Plan - Available to view in Decision Time Resources](#)
- 26.8 [Appendix H - Prosecutions Policy - Available to view in Decision Time Resources](#)

APPENDIX A

DRAFT STATEMENT FOR INCLUSION IN THE 2023-24 REPORT AND ACCOUNTS

The Board is accountable for the Company’s management and internal control system. The Chief Executive has responsibility for maintaining a sound system of control which supports the achievement of the organisation’s aims and objectives. The systems are designed to manage rather than eliminate the risk of failure to achieve these objectives. It can therefore only provide reasonable and not absolute assurance of effectiveness.

The Chief Executive has reviewed the Internal Control framework developed by the Executive Team and taken account of comments made by Corporate Assurance and External Audit, External Accreditation.

Signed

Amanda Garrard
Chief Executive
Berneslai Homes



Creating great homes and communities
with the people of Barnsley

Report Title	Risk Management Annual Report	Confidential	No
Report Author	Executive Director of Resources	Report Status	For Approval
Report To	Board 26 th September 2024	Officer Contact Details	Claire Denson, Risk & Governance Manager clairedenson@berneslaihomes.co.uk

1. Executive Summary	<p>1.1 To provide Board with a reflection on the risk management operations in 2023-24.</p> <p>1.2 The Audit and Risk Committee on 15 August recommended the annual risk management report and 2024-25 action plan for approval by Board. Committee appreciated the comprehensive report and felt assured that the company had a good understanding of the risks and mitigations required moving forward.</p> <p>1.3 Berneslai Homes recognises its responsibility to manage risk to successfully achieve its objectives through the linked Risk Management Framework Strategy (Appendix A), which has undergone the formal 2-year review for approval by Audit Committee. Whilst the document has been refreshed to ensure it remains dynamic, no key procedures have been changed. Updates include:</p> <ul style="list-style-type: none"> • The risk actions are no longer linked to the relevant governance domain; only the risk itself is now linked. Having monitored this, it was felt it to be unnecessary and of no benefit to the monitoring, review and reporting of risk. (Section 4). • Following a review by Corporate Assurance, in January 2024, the procedure was clarified to confirm that Strategic Risks are reviewed on a monthly basis. Whilst this was already working practice, it is now stated as procedure. (para 2.3 & Section 6.3). • The reference to the risk report being a 'resource report' has been reviewed as this is no longer the case. (para 1.6). • It was clarified that Audit and Risk Committee recommend the Quarterly Risk Report for approval by Board. (para 8.1).
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- 1.4 The Risk Appetite Statement forms part of the Risk Management Framework Strategy and is therefore attached to the Strategy. A zero-based review of the Risk Appetite was undertaken by Board on 23rd February 2023. Board were asked to review the Risk Appetite Statement at the 30th May 2024 Board meeting to ensure it remained fit for purpose and did not make any recommendations for any changes.
- 1.5 Corporate Assurance undertook a review of the risk management framework in 2022 to ensure the new risk monitoring system was being effectively embedded and received positive assurance. After 12 months of embedding the new system, Corporate Assurance undertook a follow up review in November 2023 and confirmed a positive assurance opinion, which concluded that the “Risk Management arrangements are now fully embedded across the organisation and that a framework exists upon which risk owners can effectively identify, manage, monitor, and report on key strategic risks and concerns”
- 1.6 There are currently 17 active strategic issues and concerns. The Summary of Issues and Concerns are attached (**Appendix B**). This report focuses on the Strategic Issues and Concerns Register, but the Board are also asked to note the Operational and Fraud issues and concerns registers, all available to view on the [risk system](#)
- 1.7 As part of this report to Audit and Risk Committee on 15 August 2024, the Head of HR and OD presented the linked [deep dive into the strategic risk of the ‘Increase in staff mental ill health and wellbeing’](#). The Committee found the presentation interesting and asked lots of questions, with a good discussion around the subject. Assurances were provided on mitigations both current and target. Committee felt they better understood the position and would continue to monitor the situation and they requested a verbal update on the risk at the October 2024 Committee. Remuneration Committee also consider this risk as part of their monitoring of the Health and Wellbeing Strategy and the Sickness report.
- 1.8 The Contingent liabilities register attached at **Appendix C** 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. There are no additions to the register since this was last reviewed by Audit and Risk Committee.
- 1.9 All actions from the 2023-24 risk management report were successfully undertaken. Development in the following areas is planned for 2024-25 to build on the work to date:

	<table border="1"> <thead> <tr> <th>Actions</th> <th>Target</th> <th>Responsible</th> </tr> </thead> <tbody> <tr> <td>Zero-based review of the Strategic Risks</td> <td>Nov-2024</td> <td>Risk and Governance Manager</td> </tr> <tr> <td>Zero-based review of the Board Risk Appetite</td> <td>Mar-2025</td> <td>Risk and Governance Manager</td> </tr> <tr> <td>Lone worker survey</td> <td>Mar-2025</td> <td>Risk and Governance Manager</td> </tr> <tr> <td>Ongoing monitoring of the Risk Management System</td> <td>Ongoing</td> <td>Risk and Governance Manager</td> </tr> <tr> <td>Provide advice and guidance on risk management topics for Board Members, Managers and Partners as required</td> <td>Ongoing</td> <td>Risk and Governance Manager</td> </tr> </tbody> </table>	Actions	Target	Responsible	Zero-based review of the Strategic Risks	Nov-2024	Risk and Governance Manager	Zero-based review of the Board Risk Appetite	Mar-2025	Risk and Governance Manager	Lone worker survey	Mar-2025	Risk and Governance Manager	Ongoing monitoring of the Risk Management System	Ongoing	Risk and Governance Manager	Provide advice and guidance on risk management topics for Board Members, Managers and Partners as required	Ongoing	Risk and Governance Manager
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Provide advice and guidance on risk management topics for Board Members, Managers and Partners as required	Ongoing	Risk and Governance Manager																	
<p>2. Recommendations</p> <p>It is recommended by Audit and Risk Committee that:</p> <ol style="list-style-type: none"> i. The Risk Management Annual Report for 2023-24 be approved by Board. ii. The proposed 2024-25 Action Plan at Section 11 be approved by Board. iii. Board agree they feel sufficiently informed about risk management. 																			

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 most significant strategic risks in 2023-24.

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 2023-24.

- 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, which has undergone the formal 2-year review for approval by Audit and Risk Committee (**Appendix A**). Whilst the document has been refreshed to ensure it remains dynamic, no key procedures have been changed. Updates include:

- The risk actions are no longer linked to the relevant governance domain; only the risk itself is now linked. Having monitored this, it was felt it to be unnecessary and of no benefit to the monitoring, review and reporting of risk. (Section 4).
- Following a review by Corporate Assurance, in January 2024, the procedure was clarified to confirm that Strategic Risks are reviewed on a monthly basis. Whilst this was already working practice, it is now stated as procedure. (para 2.3 & Section 6.3).
- The reference to the risk report being a 'resource report' has been reviewed as this is no longer the case. (para 1.6).
- It was clarified that Audit and Risk Committee recommend the Quarterly Risk Report for approval by Board. (para 8.1).

- 4.2 The Risk Appetite Statement forms part of the Risk Management Framework Strategy and is therefore attached to the Strategy. A zero-based review of the Risk Appetite was undertaken by Board on 23rd February 2023. Board were asked to review the Risk Appetite Statement at the 30th May 2024 Board meeting to ensure it remained fit for purpose and did not make any recommendations for any changes. A full facilitated review of the appetite will be undertaken in early 2025, following a zero-based review of the strategic risks on 7th November 2024.

- 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 a review of the risk management framework in 2022 to ensure the new risk monitoring system was being effectively embedded and received positive assurance. After 12 months of embedding the new system, Corporate Assurance undertook a follow up review in November 2023 and confirmed a positive assurance opinion, which concluded that the "Risk Management arrangements are now fully embedded across the organisation and that a framework exists upon which risk owners can effectively identify, manage, monitor, and report on key strategic risks and concerns".

5. Managing Risk

- 5.1 The Strategic risks are reviewed monthly (and as required) by Executive Management Team (EMT) and action owners, with quarterly updates to Audit and Risk Committee and Board, who also have full access to the risks system. The last two-yearly 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.
- 5.2 There are currently 17 active strategic issues and concerns. The Summary of Issues and Concerns are attached (**Appendix B**). This report focuses on the Strategic Issues and Concerns Register, but the Board are also asked to note the Operational and Fraud issues and concerns registers, all available to view on the [risk system](#).
- 5.3 All issues and concerns have been cross-referenced to the RSH's latest Sector Risk Profile, to ensure all risks in the report, which are relevant to Berneslai Homes, have been captured.
- 5.4 Each Service has a separate operational risk register, covering the day-to-day management of services. They are monitored and reviewed regularly by the respective SMT/EMT member and action owners. Each Service also undertakes the two-yearly zero-based review of their register, which follow the same format as the strategic review. These reviews were undertaken during 2022 and are scheduled for Autumn 2024.
- 5.5 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.
- 5.6 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 implementation of Repairs system, and Cyber Security. The Transformation Board reviews all new projects, which must include the assessment of risk.
- 5.7 As part of this report to Audit and Risk Committee on 15 August 2024, the Head of HR and OD presented the linked [deep dive into the strategic risk of the 'Increase in staff mental ill health and wellbeing'](#). The Committee found the presentation interesting and asked lots of questions, with a good discussion around the subject. Assurances were provided on mitigations both current and target.
- 5.8 The Contingent liabilities register attached at Appendix C 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. There are no additions to the register since this was last reviewed by Audit and Risk Committee.

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 board training, surveys, Team Brief and key messages, and health and safety training.
- 6.3 Risk management is included within the Health and Safety staff induction training. It is an interactive session, which also highlights our zero tolerance to fraud.
- 6.4 Risk management is evaluated as part of the Core Competencies process and 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.
- 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 BMBC Corporate Assurance monitors the implementation of their audit recommendations and reports 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 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 to Audit and Risk Committee.

- 9.2 BMBC Corporate Assurance provide 6-monthly fraud activity updates to Audit and Risk Committee.
- 9.3 We have an ongoing programme of fraud awareness, with the latest round of training for Board, EMT, Leaders and staff taking place throughout 2022 and 2023. Mandatory fraud e-learning is an induction requirement.
- 9.4 The Fraud Issues and Concerns register is reviewed regularly by relevant managers and is reported 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 2023-24 with exceptional results of 100% (Corporate Services), 98% (Asset Management), and 100% (Repairs, Maintenance and Building Safety), and 100% (Estate Services).
- 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. The resulting action plan will be monitored by EMT.
- 10.3 A mandatory Health and Safety eLearning module was introduced (in addition to the face-to-face induction training) as part of the corporate induction in 2024, 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 is planned for 2024-25 to evaluate employee perceptions of lone working and the impact of the fobs. An action plan will be developed and monitored by SMT.
- 10.5 Berneslai Homes works to the same format as Barnsley Council for its Resilience and Continuity arrangements, whilst also having more detailed Resilience and Continuity Plans in accordance with the services provided to tenants. Ongoing training is provided to key officers.

11. Action Plans

- 11.1 All actions from the 2023-24 risk management report were successfully undertaken.
- 11.2 Development in the following areas is now planned for 2024-25 to build on the work to date:

Actions	Target	Responsible
Zero-based review of the Strategic Risks	November 2024	Risk and Governance Manager
Zero-based review of the Board Risk Appetite	March 2025	Risk and Governance Manager

Actions	Target	Responsible
Lone worker survey	March 2025	Risk and Governance Manager
Ongoing monitoring of the Risk Management System	Ongoing	Risk and Governance Manager
Provide advice and guidance on risk management topics for Board Members, managers and partners as required	Ongoing	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. 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.

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 2023](#)
- 21.3 [Deep Dive presentation into the strategic risk – Increase in staff mental ill health and wellbeing](#)
- 22. Appendices
- 22.1 [Appendix A – Risk Management Framework Strategy](#)
- 22.2 Appendix B - Strategic Risks Summary.
- 22.4 Appendix C – Contingent Liabilities Register.



berneslai
homes

**RISK MANAGEMENT
FRAMEWORK STRATEGY
2024 to 2026**

Document Control

Title	Risk Management Framework Strategy
Responsible officer	Risk and Governance Manager
Author	Claire Denson
Subject	Risk Management
Information Asset Owner	Head of Governance
Approved by	Audit & Risk Committee: 9 th October 2020 Berneslai Homes Board: 10 th December 2020
Approved date	9 October 2020
Review responsibility	Risk and Governance Manager
Review date	Annual: Required June 2023
Applicable to	All BH employees and Board member
DPIA completion date	n/a
EIA completion date	January 2021
Overarching policy	Risk Management
Regulatory framework	Regulator for Social Housing
Training details	Ongoing

Revision History

Date	Version	Author	Comments
October/ December 2020	V1.1	Claire Denson	Full review following Risk review by DTP approved by Audit & Risk Committee and Board
June/July 2021	V1.1	Claire Denson	Annual review by Audit & Risk Committee and Board
June / July 2022	V1.2	Claire Denson	Annual review by Audit & Risk Committee and Board
August/ September 2023	V1.3	Claire Denson	Annual review by Audit & Risk Committee and Board – for info within annual Risk report in August/ September 2023 (approved by EMT)
January 2024	V1.3	Claire Denson	Updated Strategic risks review to 'Monthly'.
August 2024	V1.4	Claire Denson	Formal 2-year review to be approved by Audit Committee

Consultation and Distribution

Type	Details
Approvals by	EMT, Audit Committee and Board

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1.	Scope and Objectives
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4.	Strategic Concerns and Issues
5.	Risk Appetite
6.	Reporting
7.	Assurance
8.	Review and Revision
9.	Terms and Definitions
Appendix A	Risk Appetite Statement

1. Scope and Objectives

- 1.1 Risk is the possibility of an event and the consequences it has on the achievement of objectives, both at a strategic and operational level. Risk creates uncertainty which we must understand, control and monitor to reduce the uncertainty to an acceptable level.
- 1.2 This document sets out our strategic framework for managing risk across Berneslai Homes. It covers our strategic approach to risk, our methodology for the assessment of risk, reporting mechanisms, timing and specific risk management responsibilities. It also includes risk appetite. Berneslai Homes maintains strategic, operational, project and fraud risks, issues and concerns registers, which are stored and managed on a dedicated Risk system.
- 1.3 The overall objective of this 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.
- 1.4 Berneslai Homes has four priorities which will help us achieve our vision:
 - Excellent customer services
 - Sustainable communities
 - Partnership working
 - Well-managed company.
- 1.5 To help us achieve these priorities and deliver our Strategic Plan, it is essential that we identify risks to delivery and manage them accordingly. Risks identified can be categorised as:
 - **Strategic Risks (issues and concerns)** – relate directly to the achievement of the Strategic Plan and would impact the strategic direction of Berneslai Homes
 - **Operational Risks (issues and concerns)**– relate to specific service delivery and compliance objectives
 - **Projects Risks (issues and concerns)** – relate to the delivery of a specific time bound project. Examples could include the implementation of new system, a review of a service, a change to a service.
 - **Fraud Risks (issues and concerns)** – captures key fraud risks, assessing the impact they have on Berneslai Homes and key controls in place to prevent and detect.
- 1.6 To help identify emerging or new risks, the Company uses information from external and internal sources, including the RSH sector risk profile. Intelligence is then shared at every Audit & Risk Committee and board meeting and discussed regularly in Executive Management Team meetings.
- 1.7 We will ensure that the needs and expectations of stakeholders, in particular our key stakeholder Barnsley Metropolitan Borough Council (BMBC) and the expectations set out in the agreement for services we have with the Council, are identified when assessing individual risks.

2. Roles and Responsibilities

- 2.1 **Berneslai Homes Board** has ultimate responsibility for establishing and overseeing the risk management framework. In addition to specific Board responsibilities, it will:
- Review and approve the Risk Management Framework at least annually
 - Seek assurance from the Audit & Risk Committee on the effectiveness of the risk management framework.
 - Review, the strategic issues and concerns register and its implications on achieving our Strategic Plan, seeking assurance on risks that are increasing in concern.
 - Assess regularly the effectiveness of internal controls.
 - Determine the nature and extent of significant risks it is willing to take in achieving its strategic objectives, by setting the risk appetite and reviewing it at least annually.
 - Ensure it understands the risk implications of strategic decisions and that it is satisfied with the control of risk.
 - Seek assurance from Audit & Risk Committee on 'deep dive' analysis on emerging risks or control effectiveness of an existing risk.
 - Receive regular horizon scanning reports from the Chief Executive.
- 2.2 **Audit & Risk Committee** has responsibility to ensure that the risk management framework is working effectively across the organisation and advise Berneslai Homes Board. Specifically, **it will**:
- Review the strategic issues and concerns register, ensuring that 'Critical' and 'more concerned' risks are appropriately reviewed, and action is being taken, and that new/emerging risks are considered and added if necessary.
 - Escalate any issues or concerns resulting from the review of strategic risks to the Board as part of the usual communications between Committee and Board.
 - Review operational issues and concerns registers, ensuring that risks are appropriately reviewed, and that any changes to risks needed are made.
 - Review the Assurance Framework on an annual basis and report on its effectiveness to the Board.
 - Ensure that the annual Internal Audit plan is linked to the strategic issues and concerns register.
 - Identify any improvements to the risk management process and ensure risk management is an integral part of Berneslai Homes' internal controls
 - Annually assess the risk management framework and report on its effectiveness to the Board.
- 2.3 **Executive Management Team (EMT)** will ensure that the risk management framework is followed, and that risk is effectively managed across Berneslai Homes. Specifically, it will:
- Have a regular standing agenda item on risk at EMT meetings
 - Own the strategic risks relevant to each directorate area
 - Review emerging strategic risks at least quarterly
 - Review Berneslai Homes' strategic issues and concerns registers monthly and assess effectiveness of internal controls prior to submission for review at Audit & Risk Committee
 - Ensure that risks to the Strategic Plan are integrated within the strategic issues and concerns register.
 - Have a clear understanding of risks facing individual service areas and the impact on the delivery of the Strategic Plan

- Ensure that an issues and concerns register has been completed for any significant project, and that risks are reviewed at an agreed frequency
- Ensure that all risks are identified and assessed on board and committee reports.
- The relevant director to review operational issues and concerns registers at least every quarter to provide assurance that risks are being effectively managed
- Review the issues and concerns registers quarterly, to support the planning process, before presentation of the registers to the Audit & Risk Committee and Board.
- Review escalated critical (red) operational risks 6-monthly. These will be brought to EMT by the Risk and Governance Manager.

2.4 **Risk and Governance Manager** Is responsible for maintaining the risk management framework and co-ordinating assurance activity across Berneslai Homes. Specifically, **they will:**

- Develop the risk management framework and ensure that the risk management system is up to date and relevant
- Provide advice and training on the risk management framework
- Support the business with appropriate risk management processes and techniques
- Co-ordinate the appropriate and timely delivery of risk management information
- Maintain the strategic and emerging issues and concerns register and reports status to EMT, Audit & Risk Committee and Board quarterly
- Monitor the application and effectiveness of risk management processes and escalate weaknesses to EMT
- Manage the assurance framework, including an annual assurance framework exercise
- Ensure the Risk Management Framework is reviewed annually.
- Escalate critical (red) operational risks to EMT 6-monthly.

2.5 **Managers** are responsible for operational risks within their service areas. Specifically, they will:

- Regularly update their risks, actions and scores on the Strategic, Operational, Project and Fraud risk registers
- Ensure that operational controls are in place and effective
- Ensure that staff are competent and have the resources required to manage risk
- Identify emerging risks and escalate any risks that is out of appetite to EMT
- Cooperate with internal audit and assurance activities.

2.6 **All employees** have responsibility for identifying new risks as appropriate and ensure that identified actions to control risk are carried out.

2.7 All identified risks (strategic and operational) have assigned **Risk Owners**. Strategic risks must be owned by the relevant EMT member. It is the responsibility of risk owners to ensure that their risk is managed within the agreed risk appetite. Specifically, **they will:**

- Undertake risk assessments and understand the cause and consequence of the risk occurring
- Understand the implications of the risk on stakeholders and communicates responsibilities
- Design suitable internal controls to manage the risk
- Ensure that any controls required to manage the risk are implemented in a timely manner
- Review the risk regularly and update the issues and concerns register.
- Assess events that may change the risk and escalate appropriately.

3. Assurance Framework

- 3.1 Everything that happens in the organisation is achieved through the following themes (domains), which enable the delivery of services and responsibilities. These themes are the domains of strategic responsibility that should be a key focus of EMT and SMT.
- 3.2 Each domain (Table 3.3) should have a strategic level ‘owner’, someone who is accountable for the organisational-wide management of that area. It is important to determine whether risk management processes are working effectively and whether internal controls are being managed effectively.

3.3

Domains of Strategic responsibility	Purpose	Owner
Financial Management	A framework of policies and procedures that ensures the organisation can manage its financial resources in an efficient and effective way.	Executive Director of Resources
Workforce / HR Management	A framework of policies and procedures that ensures the organisation can manage its human resources and talent in an efficient and effective way.	Executive Director of Resources
Information Systems Management	A framework of policies and procedures that ensures the organisation has a suite of information systems and technology that supports and enables the organisation to deliver its objectives.	Executive Director of Resources
Information Governance / Security	A framework of policies and procedures that ensures the organisation maintains its information assets in a way that secures compliance with legislation but also supports the organisation to deliver its objectives in an efficient way.	Executive Director of Resources
Procurement, Commissioning and Contract Management	A framework of policies and procedures that ensures the organisation procures, commissions and manages its contracts in a way that ensures compliance with legislation, delivers value for money and supports the organisation to meet its objectives.	Executive Director of Resources
Partnership / Relationship / Collaboration Governance	A framework of policies and procedures that ensures that the collaborative arrangements in place are effectively governed and managed to support the organisation to deliver its objectives.	Chief Executive
Performance Management / Data Quality	A framework of policies and procedures that ensures the organisation can manage its performance through quality, timely and reliable data such that performance and accountability is measured and reported to drive continuous improvement.	Executive Director of Resources
Asset Management (estates, non-IT equipment)	A framework of policies and procedures that ensures the organisation can manage and utilise its physical assets to best effect to support the delivery of services.	Executive Director of Property Services
Ethical Standards / Conduct Management	A framework of policies and procedures that ensures its employees and those working with and for the organisation discharge their responsibilities with the highest ethical standards	Executive Director of Resources

Domains of Strategic responsibility	Purpose	Owner
	meeting all aspects of public expectation for conduct and integrity.	
Project / Programme Management	A framework of policies and procedures that ensures the effective and efficient management and delivery of the projects and programmes of the organisation.	Executive Director of Property Services
Health and Safety	A framework of policies and procedures that ensures the organisation discharges its legislative and good practice responsibilities for the health, safety and welfare of its employees, customers and wider stakeholders.	Executive Director of Property and Director of Resources
Business Continuity / Emergency Resilience	A framework of policies and procedures that ensures the organisation understands its BC and ER arrangements, staff, partners and other organisations understand their respective roles should an incident arise and that services are restored as quickly and efficiently as possible.	Executive Director of Resources
Safeguarding (Children and Adults)	A framework of policies and procedures that ensures the organisation's responsibilities for the safeguarding of children and adults are discharged as effectively and efficiently as possible.	Executive Director of Customer and Estate Services
Legislative Compliance	A framework of arrangements that ensures the organisation understands and meets its legislative responsibilities.	Chief Executive
Equalities and Inclusion	A framework of policies and procedures that ensures the organisation has due regard for equality and inclusion in how it delivers its services, manages its staff and supports the wider community, meeting legislative and good practice standards in doing so.	Executive Director of Resources
Decision-Making Arrangements	A framework of policies and procedures that ensures the organisation makes sound decisions in a publicly accountable and transparent manner, meeting the requirements of legislation and internal arrangements.	Chief Executive
Risk Management	A framework of policies and procedures that ensures the organisation has regard to risk, that the overall framework is managed and that the delivery of services and responsibilities is supported through impactful and enabling mitigating actions.	Executive Director of Resources

- 3.4 The Strategic Assurance Framework identifies the core controls required to mitigate the risks within each of the governance domains.

4. Strategic Risks, Concerns and Issues

- 4.1 Whilst the governance domains are the areas of strategic responsibility, there is also a separate mechanism to capture and manage risks, issues and concerns; ensuring areas of priority are identified, captured and managed. These are problems and failures that have occurred and/or concerns in the future that need planning for, including aspects of change and improvement, or significant projects/programmes that should be on EMT's radar.

- 4.2 The risks, issues and concerns register identifies what we are concerned about and why we are concerned about it and states whether the response to the issue is Critical, Important or Requires Attention. Each risk is linked to the relevant governance domain. Progress on actions are RAG rated.

5. Risk Appetite

- 5.1 Risk appetite is the level of risk (uncertainty) an organisation is prepared to accept in order to meet its strategic priorities, deliver its values and ambitions, and meet its targets.
- 5.2 Activities which could potentially have a major adverse impact on Berneslai Homes (regardless of any control mechanisms in place) will not be undertaken without explicit approval from Berneslai Homes Board (and once all the potential risks have been set out and fully explained). Activities which fall outside of the agreed risk appetite should not be undertaken.

Context

- 5.3 Risk appetite is not a single fixed concept. Berneslai Homes has a range of appetites for different risks, and indeed these appetites may well vary over time as circumstances change.

Risk Appetite Statement

- 5.4 We have established a risk appetite statement which acknowledges a range of risk appetites for different areas of risk, but which also establishes a coherent framework that provides the Board with assurance that effective control measures are in place.
- 5.5 The framework defines the extent to which risk is encouraged and tolerated across Berneslai Homes.

Assessment of Risk Appetite

- 5.6 See [Appendix 1](#) for full Risk Appetite statement and assessment of risk.

Application of the Risk Appetite Statement

- 5.7 The Statement sets out the amount of risk we are willing to accept, to guide the amount of control we need for each risk area. The risk appetite should be considered when assessing the individual risks. If the risk is above the required appetite, then further controls should be considered to either reduce the likelihood of the risk occurring or reduce the impact if the risk were to occur. Additional controls should be clear with achievable timescales. Implementation of the additional controls should be monitored by the risk owner to ensure they are implemented in a timely manner.
- 5.8 Where the risk cannot be brought within appetite, then the risk must be escalated to the Board for review. A decision is required on the overall treatment of these risks. The Board and SMT will make the decision for strategic risks.
- 5.9 The Board may decide to amend its risk appetite in the light of actual scenarios/opportunities/ decisions made, and in any event will review it on an annual basis.

6. Reporting

Key Reporting Cycles

- 6.1 The table below (6. 3) sets a minimum standard. Risk review dates are scheduled on an individual basis and are the responsibility of the risk owner.
- 6.2 Each risk report presented to Audit & Risk Committee and Board will include:
- A summary/commentary covering high level risks.
 - Work undertaken since the last report, including action in respect of high-risk areas previously identified.
- 6.3

Monthly	Prepared by	Reviewed by
Strategic Risks, Concerns and Issues Register review	Risk and Governance Manager	EMT/SMT/Managers
Quarterly	Prepared by	Reviewed by
Operational Risks, Concerns and Issues Register review	Risk and Governance Manager	EMT/SMT/Managers
Strategic Risk Update Report	Risk and Governance Manager	EMT/Audit & Risk Committee/Board
Progress with Corporate Assurance Recommendations	Corporate Assurance	Audit & Risk Committee
Horizon Scanning Report	Chief Executive	Board
Six-monthly	Prepared by	Reviewed by
Fraud Update	Head of Corporate Assurance	Audit & Risk Committee
Annual	Prepared by	Reviewed by
Strategic Risk review Report	Risk and Governance Manager	EMT/Audit & Risk Committee/Board
Review of the Risk Management Framework Strategy	Risk and Governance Manager	EMT/Audit & Risk Committee/Board
Head of Corporate Assurance's Annual Report	Head of Corporate Assurance	Audit & Risk Committee
Internal control Assurance review (Annual Governance Statement)	Risk and Governance Manager	SMT/EMT/Audit & Risk Committee/Board
External Audit of Statutory Accounts	External Audit	Audit & Risk Committee/Board
As scheduled	Prepared by	Reviewed by
Corporate Assurance Reports	Corporate Assurance	EMT/Audit & Risk Committee
Assurance Reports	Relevant manager	EMT/Audit & Risk Committee
Project issues and concerns register updates	Project Lead	Project Group

'Deep Dive' Review of Operational Risks	SMT/EMT Lead	EMT/Audit & Risk Committee
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7. Assurance

Management review

- 7.1 Managers are responsible for regular management reviews of their risks and actions. The purpose of a management review is to ensure we have sufficient resources and controls in place to manage risk. Any significant gaps are raised with the Lead SMT/EMT member for action.

Assurance Review

- 7.2 The Risk and Governance Manager follows an approved assurance process which tests core controls in key risk areas. An Internal Control Assurance report (Annual Governance Statement) is produced every 12 months and the findings presented to EMT/Audit & Risk Committee/Board for continual improvement. Each member of the EMT signs off a statement of assurance for their area.

BMBC Corporate Assurance

- 7.3 BMBC Corporate Assurance provide an objective evaluation and opinion on the overall adequacy and effectiveness of Berneslai Homes' risk management, control and governance processes. The annual Corporate Assurance programme is set using a risk-based approach and is approved by Audit & Risk Committee and Board.
- 7.4 Corporate Assurance reports provide an overall opinion on the level of assurance of internal controls and the effectiveness of risk management. Recommendations are made and corrective actions agreed by EMT before being presented to Audit & Risk Committee. Any areas where no assurance can be given, and urgent action is required are reported directly to the Chair of Audit & Risk Committee (who may choose to escalate these to the Chair of the Board).
- 7.5 It is good practice for Corporate Assurance to specifically consider the effectiveness of an organisation's risk management arrangements to facilitate a truly risk-based approach. Therefore, they will review the risk management arrangements of Berneslai Homes annually as part of the audit planning process and more fundamentally every few years or where there is a significant change.
- 7.6 The Audit & Risk Committee is responsible for monitoring progress on corrective actions resulting from internal audits. Follow up audits are undertaken to verify that recommendations have been implemented.

External Audit

- 7.7 Audit & Risk Committee is responsible for appointing External Auditors to carry out an annual audit of the statutory financial statements. This is carried out in accordance with International Standards on Auditing (UK and Ireland) to ensure that:
- The financial statements give a true and fair view of the state of the organisation's affairs as at 31 March, and of the organisation's surplus or deficit for the year then ended

- The financial statements have been prepared in accordance with the appropriate legislation
- The information given in the Directors' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

7.8 Key risk areas will be assessed and any recommendation for improvement will be approved and monitored by Audit & Risk Committee.

8. Review and Revision

- 8.1 This Risk Management Framework is reviewed by the Audit & Risk Committee, who will recommend to Board for approved. The Corporate Assurance annual opinion and strategic risks are used to inform the review.
- 8.2 As referred to above, Corporate Assurance is constantly assessing the effectiveness of the risk management arrangements as part of its annual and specific job planning processes. They will also undertake a specific assurance review of the risk management framework every two-three years to provide an independent assessment. All Corporate Assurance reports will highlight where action should be considered to improve the risk management process. The recommendations made by Corporate Assurance will be monitored by Audit & Risk Committee.
- 8.3 Any weaknesses identified in the annual review are assessed by EMT, and agreed actions set to strengthen the Framework. Progress on these actions is monitored by EMT and the Audit & Risk Committee to ensure they are successfully implemented, and improvements made.
- 8.4 The Risk Management Framework is updated according to the findings and approved by the Board annually.

9. Terms and Definitions

Risk Management	The process which helps us identify, understand, evaluate and take action on our risks with a view to increasing the probability of success.
Risk Appetite	The amount of risk we are willing to take to achieve our objectives.
Risk Exposure	Level of risk to which the organisation is actually exposed, either with regard to an individual risk or the cumulative exposure to the risks faced by the organisation.
Assurance Framework	A tool that combines the internal controls within each of the governance domains of strategic responsibility into one document to provide a visual representation of the control framework.
Control	A measure that has been put in place to reduce, minimise or eliminate a risk e.g. a policy or procedure, a working practice, training provision, a reporting mechanism.
Issues and concerns Register	Record of the significant issues and concerns faced by an organisation, the controls currently in place, additional controls that are required and responsibility for control activities.
Management System	Documentation that includes all risk management policies, procedures, protocols and guidelines.
Internal Control	Internal control is a process effected by an entity's board of directors, management, and other personnel, designed to provide reasonable assurance regarding the achievement of objectives relating to operations, reporting, and compliance.
Horizon Scanning	A technique for detecting early signs of potentially significant risks through a systematic examination of potential threats and opportunities. The method calls for determining what is constant, what changes, and what constantly changes. It explores novel and unexpected issues as well as persistent problems and trends.
Stakeholder Map	Identification of all stakeholders needs and expectations in relation to the organisation and risk.

Appendix A. Risk Appetite Statement

1. What is risk appetite?

Risk appetite is the level of risk (uncertainty) an organisation is prepared to accept in order to meet its strategic objectives, deliver its values and meet its targets.

2. Why is a risk appetite statement important?

By considering and defining our risk appetite, the organisation can arrive at an appropriate balance between uncontrolled innovation and excessive caution. It provides guidance on the level of risk permitted and encourages consistency of approach across the organisation.

The Board is responsible for setting the direction of risk management, by determining the nature and extent of the significant risks it is willing to take in achieving its strategic objectives. The Risk Appetite Statement is an aid to the organisation in making decisions by articulating the level of risk that the Board is willing to take in given areas and providing a rationale for decisions which can be justified and evidenced. It can be particularly useful for Board and staff in selecting which projects to initiate, as the organisation's desire to take on risk or minimise risk in given areas is clearly stated.

Risk appetite is not static, and the Board may vary the amount of risk it is prepared to take dependent on time and circumstances (e.g. we may be prepared to accept a higher degree of risk if something is time-bound, or if there is a clear exit strategy). It is also true to say that we may have to tolerate risks that fall outside of our appetite if they are beyond our control.

To communicate to the organisation the amount of risk that is acceptable or unacceptable, the Board will consider and refresh its risk appetite as a minimum on an annual basis.

Berneslai Homes' Risk Appetite Statement is articulated through a combination of qualitative statements, limits and thresholds which vary depending on the type of activity being considered. These statements give guidance on the limits of risk that the Board considers it appropriate to accept.

3. Berneslai Homes' Risk Appetite – descriptors and definitions

4.

Whilst Berneslai Homes is on a journey from being risk averse to wishing to be more open for risks, many areas are linked to compliance and must therefore be managed with less uncertainty, which is why we remain risk averse in these areas. This risk appetite statement is therefore very much a dynamic one, which we fully expect to be subject to change on a regular basis, to reflect the progress we make on our journey. The risk drivers agreed by the Board have been created through a combination of areas of activity and strategic themes from the Berneslai Homes' Strategic Plan 2021-31 and its Strategic Concerns and Issues Register.

The table below sets out each risk driver and the risk appetite agreed for each area. Where there is shading in two boxes, the **blue** indicates the current position, whilst the **green** suggests the direction of travel, or aspirational risk appetite. Not all risk drivers

have an aspirational rating; in those cases, this is because appetite is very unlikely to change over time.

Risk Descriptors 2023						
	Risk Drivers	Averse	Cautious	Balanced	Open	Hungry
1	The Customer Experience					
2	Consumer Regulation					
3	Asset management					
4	Sustainability (net zero carbon)					
5	Strategic delivery and partnership with BMBC					
6	Building Safety					
7	Health and safety					
8	Income risk					
9	Financial Stability					
10	Third/counter party risk					
11	Workforce (HR, recruitment, training etc.)					
12	Data quality and data integrity					
13	Cyber security					
14	Reputation					

Key:

- **Averse** = avoidance of risk and uncertainty as a key organisational objective; prepared only to accept the very lowest level of risk
- **Cautious** = preference for extremely safe business delivery options that have low degrees of inherent risk and only have potential for limited reward
- **Balanced** = preference for safe business delivery options that have a degree of inherent risk and may only have limited potential reward; tending towards only modest risk exposure
- **Open** = willing to consider all potential options and choose the one that is most likely to result in success, while providing an acceptable level of reward
- **Hungry** = eager to be innovative and to choose options with potentially higher returns despite greater inherent risk.

5. Berneslai Homes' Risk Appetite – narrative

The narrative in the table below expands further on each risk driver, and sets out the rationale for the selection of the risk appetite in that particular area. It is important that this narrative is considered when using the Risk Appetite Statement to inform decision-making, as there are some carefully nuanced and balanced considerations to take into account.

Risk Descriptors:

	Risk Driver	Appetite (current)	Appetite (aspirational)	What this means to Berneslai Homes (BH)
1	The customer experience	Averse	Cautious	<p>Berneslai Homes is committed to providing a good quality service to all our customers. We are a listening organisation, valuing and encouraging feedback from customers, working together to continuously improve services. Customer perception and experience of the services we deliver are the best source of feedback to shape future service improvement. There are occasions when, for various reasons, someone may be dissatisfied with the level or standard of service that they have received. We aim to ensure that there is an established and effective way in which compliments, complaints or suggestions are dealt with positively and consistently.</p> <p>BH is on a continuous journey in terms of customer service. Whilst we want to be innovative in finding the best solutions for great service, we are unwilling to take risks that may negatively impact way that we deliver to our customers. Proactive solutions include the Repairs First project; however, we will not exclude more traditional forms of service delivery (phone, face-to-face). BH accepts that in some areas of customer service delivery it does not have full control (e.g., contact centre) which limits the amount of risk it can take.</p> <p>BH is committed to the new professionalism agenda and will continue to embed a culture of customer first, ensuring all staff have the skills to interact with customers in an exemplary way.</p> <p>BH acknowledge that we must manage customer expectations and focus on ensuring we deliver what we say we can deliver and be open about what we can do with the resources we have available.</p>
2	Consumer Regulation	Averse	n/a	<p>Some very tragic circumstances in housing have rightly led to the government focus to improve housing services across the UK. The new Social Housing legislation will bring about one of the most fundamental changes to social housing</p>

	Risk Driver	Appetite (current)	Appetite (aspirational)	What this means to Berneslai Homes (BH)
				<p>regulation for over a decade. It will set new expectations on the services that we provide for our tenants and give the regulator stronger powers to hold us to account. The new Consumer Standards will change the current framework and the Housing Ombudsman has greater powers to challenge and enforce. BH has more challenging targets to meet, including the implementation of the Tenant Satisfaction Measures TSMs. BH must be open and transparent with all stakeholders on our progress and any challenges.</p> <p>The BH Board will have new performance measures in place to enable them to effectively challenge and scrutinise. Board is fully aware of its responsibilities and uses its knowledge, skills and experience to monitor compliance on a regular basis. 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.</p>
3	Asset management	Cautious	Balanced	<p>Berneslai Homes' Asset Management Strategy 2021-2026 was co-designed with BMBC. BH has the challenge of making our stock more sustainable by investing in properties and reducing the need for repairs. Data quality is essential to inform the Asset Management Strategy. We have a target of 100% stock condition and EPC data by March 2024. There is a need for BH to invest appropriately in its assets, but only where those assets are viable in the future.</p> <p>The approach is a cautious one as BH have ongoing and new challenges to meet, such as achieving Decent Homes across our stock, supply chain sustainability, damp and mould, retaining a skilled workforce, alongside increasing statutory obligations. BH must work with BMBC to influence funding for regenerating the borough and BH is ambitious in considering innovative solutions.</p>
4	Sustainability (net zero carbon)	Cautious	Balanced	<p>Berneslai Homes' Sustainability Strategy 2022-2027 is an ambitious zero carbon plan developed in line with BMBC sustainability targets. BH is cautious with the risk of early adopting building and heating technology without knowing enough about how it will evolve and whether it will still be sustainable in the future. However, if we're too cautious for too long, we may risk falling behind and therefore aspire to have a balanced appetite.</p>
5	Strategic delivery and	Balanced	Open	<p>BH is closely aligned with BMBC. There is a good, balanced working partnership in place, and it is imperative to maintain this, hence the Balanced appetite.</p>

	Risk Driver	Appetite (current)	Appetite (aspirational)	What this means to Berneslai Homes (BH)
	partnership with BMBC			BH is prepared to innovate where it is right for the customers we serve. Innovation must be appropriate to the BH and BMBC mission and objectives. Where there is clear community benefit, we are prepared to be innovative and invest.
6	Building Safety	Averse	n/a	The Building Safety and Fire Safety Acts have increased the legislative challenges around building safety. The BH Board is fully aware of its responsibilities and uses its knowledge, skills and experience to monitor compliance on a regular basis. 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 seek contract certainty and understanding of all key terms before signing. We have zero tolerance for failure to meet deadlines set by regulators.
7	Health and safety	Averse	n/a	BH has a zero-tolerance approach to non-compliance with all aspects of health and safety. This includes its workforce, contractors, partners, customers and the general public. BH will always seek 100% compliance with health and safety legal requirements and is not willing to take any risks in this area.
8	Income risk	Averse	n/a	BH is financially dependent on the management fee it receives annually from BMBC and is averse to doing anything which puts this income at risk. Likewise, it has a keen maximise its income which is then used to pay for services to tenants by focusing on rent collection, service charges, leaseholder service charges and recharges and minimising rent lost through void processes.
9	Financial Stability	Averse	n/a	BH's overriding imperative is to remain financially viable, therefore it is risk averse when it comes to the strategic management of its finances. Financial performance relies on meeting budgetary targets and PRIP targets. BH have a responsibility to run a business that is aligned with our plans, which may require us to draw more from BMBC to manage those demands. BH and BMBC need to continue to have sensible conversations about budget. Whilst BH does not have to comply with the RSH's VFM Standard, it wishes to be mindful of it and takes a risk averse approach to VFM in that it seeks to maximise local, social value and impact in Barnsley for the money it spends there.
10	Third/counter party risk	Cautious	n/a	BH takes a cautious approach to the contracts it has in place with third parties. If a third party were to cease operating, tenants could potentially be put at risk. Safe delivery of contracts is paramount. BH is more open to risks when it comes to new opportunities with third parties.

	Risk Driver	Appetite (current)	Appetite (aspirational)	What this means to Berneslai Homes (BH)
				The current economic environment has increased the risks in supply chain, so BH must ensure we have a Plan B. We may need to look at longer term partnerships. We may need to bring some services in-house to deliver effectively. The procurement rules are changing and there is currently no certainty around what the new rules will mean for BH.
11	Workforce (HR, recruitment, training etc.)	Cautious	Balanced	Increased regulatory challenges and ongoing issues with skills shortages is putting pressure on the workforce. Recruitment to specialist posts is more difficult. BH is hungry to improve its approach to training, education and skills in line with the new professionalism agenda. There is uncertainty of what housing qualifications the government will expect of housing employees in the future. BH is risk averse around legal compliance on HR matters.
12	Data quality and data integrity	Averse	Cautious	Data quality has a significant impact in decision making. It is essential for sustainability, innovation, service provision, health and safety and performance monitoring, and much more. There is opportunity inherent in having good data. It has also become a priority regulatory concern. BH are on a journey to achieving effective collation of data, as referred to in the appetites for Asset Management, Customer Experience and Consumer Regulation. BH aims to use proven methods when it comes to ICT. We have a low tolerance of ICT outages and have effective and tested Business Continuity Plans in place to respond to outages of 3 hours or more. IT, however, is an enabler of service delivery, and in that sense, there is more appetite for taking risks, such as the new Repairs First project. There is so much data available and we have a strong responsibility to be stewards of that data. We have zero tolerance for the loss or compromise of personal/sensitive data. The UK Housing Data Standards aim to support the housing sector to improve its data and overcome current challenges by increasing data governance, improving performance and streamlining regulatory reporting in social housing.
13	Cyber security	Averse	n/a	Cyber security is a global issue with increasing risks of such areas as malware and ransom attacks. BH must understand and prioritise controls and assurance, which are reported to the Audit and Risk Committee. BH with BMBC undertake resilience exercises on cyber-attacks. Expertise on this area sits with BMBC.
14	Reputation	Averse	n/a	BH holds dearly its reputation as an excellent provider of management and other services in Barnsley, as a key partner of BMBC and as an employer. We fully

	Risk Driver	Appetite (current)	Appetite (aspirational)	What this means to Berneslai Homes (BH)
				accept that there will be reputational challenges given the nature of our business, and we will look to fully understand and mitigate these challenges. We have a low appetite for reputational risk generally, in all areas of the business. We aspire to high standards of corporate governance and legal compliance, have zero tolerance for serious injury or death caused by H&S failure, and seek to avoid any legal action against the organisation.

Appendix B

Title of Risk	Risk Owner	Description	Assessment	Status:	Impact:	Response Rating	Level of Concern since previous review	Strategic Risk Area (Sector Risk Profile)	Risk Appetite	Ambitions
Reduction in customer satisfaction	Chief Executive	Incorporating 'Ability to meet statutory duties and tenant expectations as a result contact centre performance' and 'Customers unable to access repairs services online effectively'. <ul style="list-style-type: none"> Increasing demands from customers – they require increasing support Increasing regulatory demands Reduction in funding – more with less Contact Centre performance – we could miss significant issues Customers unable to access repairs services online effectively 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.	<ul style="list-style-type: none"> Cost of living Planned repairs and reduced budgets Regulatory intervention 	Actual	Actual	Critical	More Concerned \wedge	Delivering Services to Tenants	Averse	Hearing Customers
Mould, damp and condensation	Executive Director of Property Services	Are we keeping tenants safe by ensuring that damp, mould and condensation are not a health risk to tenants? A letter by Michael Gove says that govt expect landlords to be undertaking assessments of: <ul style="list-style-type: none"> damp and mould issues affecting our properties, including the prevalence of category 1 and 2 damp and mould hazards; the action we have identified that may need to be taken in relation to damp and mould issues affecting our properties 18.03.24 - Awaab's Law - consultation submission to DLUCH. Concern remains increased. 09.07.24 - Awaiting enactment of Awaab's Law	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. A letter by Michael Gove warns of the consequences of not taking responsibility and treating damp and mould seriously The issue is prevalent in the news and tenants are fighting back	Actual	Actual	Critical	More Concerned \wedge	Health and Safety	Averse	Keeping Tenants Safe
Ability to deliver historical & in year R&M works within current financial resources available	Executive Director of Property Services	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	Actual	Actual	Critical	Same Concerned $>$	R&M	Hungry	Hearing Customers
High value claim as a result of Private management service	Executive Director of Property Services	23.01.23: Legal proceedings issued against BH re accident in a property management by BH on behalf of a private landlord (2019).	23.01.23: Legal proceedings issued against BH re accident in a property management by BH on behalf of a private landlord (2019).	Actual	Actual	Critical	Same Concerned $>$	Compliance	Cautious	Growth of Homes and Services

Title of Risk	Risk Owner	Description	Assessment	Status:	Impact:	Response Rating	Level of Concern since previous review	Strategic Risk Area (Sector Risk Profile)	Risk Appetite	Ambitions
The HRA does not cover service requirements	Chief Executive	<ul style="list-style-type: none"> Rent caps, inflation, CPI, use of reserves, management fee Tenant financial hardship Insufficient resources to support vulnerable customers Pensions – impact on balance sheet Reduction in funding for repairs and investment in stock – PRIP - impact on CS profit – reputation Impact on Strategic plan - resources to deliver the priorities - reputation with BMBC Relationship with the Council is crucial 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. <p>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 in Decent Homes.</p> <p>22.11.23: Concern remains increased.</p> <p>04.04.24 - regulatory changes putting increased expectations on HRA.</p>	<ul style="list-style-type: none"> 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. There was a financial overspend on Repairs and Maintenance budgets for 21-22. Increasing number of tenants on Universal Credit reducing rental income 	Actual	Actual	Critical	Same Concerned >	Costs and Inflation	Averse	Growth of Homes and Services
Regulatory inspection announced by RSH for Q2	Executive Director of Customer and Estate Services	<p>The Regulator of Social Housing (RSH) has given us notice that Barnsley will be inspected during quarter two (July-September).</p> <p>The Regulator will spend time with both us and Barnsley Council. As the council is the landlord, the RSH will expect that they have proper oversight and governance arrangements in place to make sure we're delivering good quality services to tenants.</p> <p>15.07.24: reputational risk with public and BMBC if low score.</p>	Inspection announced.	Actual	Actual	Critical	Same Concerned >	Delivering against expectations	Averse	Hearing Customers
The cost-of-living crisis is impacting tenants and our communities	Exec Dir Customer & Estate Services and Exec Dir of Property Services	<ul style="list-style-type: none"> Condition of homes – changing behaviours Vulnerable tenants – changing behaviours Rent arrears, govt policy, Less tenant turnover – reduction in void levels Disrepair cases – legal costs – increasing Communal heating systems - affordability Unpredictability of tenant behaviour - increased violence and aggression towards staff, chaotic lifestyles Sustainability of estates – increased ASB, crime, DV <p>Opportunity:</p> <ul style="list-style-type: none"> Tenants may want to move to smaller accommodation, which will release family-sized properties. <p>09.07.24 - increase in disrepair cases.</p>	<ul style="list-style-type: none"> Cost of Living Reduced funding More support needs 	Actual	Actual	Critical	Same Concerned >	Delivering Services to Tenants	Averse	Hearing Customers
Business continuity	Chief Executive	<ul style="list-style-type: none"> Are we prepared for industrial action / civil unrest, power cuts, services going down, another virus outbreak? Are we prepared for a cyber attack Are we prepared for climate change – heat, fires, floods Impact on business, staff and tenants <p>22.11.23: Increased response level due to increased risks e.g. cyber attacks in the sector and recent floods.</p>	Are we prepared for potential impact of disaster situations to operations?	Potential	Potential	Critical	Same Concerned >	Delivering Services to tenants	Averse	Employment and Training

Title of Risk	Risk Owner	Description	Assessment	Status:	Impact:	Response Rating	Level of Concern since previous review	Strategic Risk Area (Sector Risk Profile)	Risk Appetite	Ambitions
Vulnerability of in-house and third party systems to cyber attack	Executive Director of Corporate Services	<ul style="list-style-type: none"> • Vulnerability may be exploited leading to cyber-attack of in-house and/or third-party systems impacting confidentiality, integrity or availability of data and information. • This could lead to, amongst others, financial loss, fines, regulator intervention, inability to deliver services, reputational. • 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. 	<ul style="list-style-type: none"> • 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. • Legislation in place which means risk management is crucial. <p>24.11.23: More news of cyber attack risks due to current economic and political crisis.</p>	Potential	Potential	Critical	Same Concerned >	Data and Cyber Security	Averse	Technology and Innovation
Increase in staff mental ill health and wellbeing	Executive Director of Corporate Services	<ul style="list-style-type: none"> • Increased service demands, more difficult and complex cases to manage. • Staff wellbeing is increasing sickness absence <p>21.03.23 - report to EMT re HWB survey undertaken in Feb 23 - stats say 22% of LT sickness is linked to mental ill health - therefore reduced from critical to Important Response 16.07.24: Risk increased as mental ill health absence levels continue to rise.</p>	Complex issue. Reflection of employee engagement, mental health much more visible in society.	Actual	Actual	Important	More Concerned ^	Health and Safety	Cautious	Employment and Training
The zero-carbon agenda is not sufficiently funded or skilled	Executive Director of Property Services	<ul style="list-style-type: none"> • Questions around the sustainability of some estates – types of homes / energy efficiency • Difficult to maximise funding opportunities – essential partnership working with BMBC • Requires upskilling of staff – technical skills are more expensive • Change in behaviour required of staff and tenants <p>17.07.24: BMBC looking to add in future business plan.</p>	<ul style="list-style-type: none"> • Strategic priority in line with local and national government 	Actual	Actual	Important	Same Concerned >	Delivering against expectations	Cautious	Zero Carbon
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)	Chief Executive	<ul style="list-style-type: none"> • Sufficient resources to implement data strategy and action plan • Dynamic Scheduling system. • Not meeting customer expectations - Poor reputation and satisfaction. • Data regarding both customers and assets. <p>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</p>	<ul style="list-style-type: none"> • We do not currently have fully effective data quality systems in place regarding customers and assets . 	Actual	Actual	Important	Same Concerned >	Delivering Services to Tenants	Averse	Technology and Innovation
That we do not effectively embed a culture that acknowledges, promotes and celebrates the diverse talents and backgrounds of staff and tenants	Executive Director of Corporate Services	<ul style="list-style-type: none"> • We need to ensure that equality, diversity and inclusion is fully embedded and part of the DNA of Berneslai Homes. • 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). <p>01.03.24 Review date changed as on going risk 05.09.24 - the risk has been updated to status:actual, so more concerning, due to feedback from the Customer First training, which includes some behaviour and attitude concerns.</p>	<ul style="list-style-type: none"> • Due to staffing resources, ED&I development lost it momentum. Following HDN assessment, ED&I was developed, launched and in the process of being fully embedded across the organisation. <p>17.11.23- New OD in post from 1.8.23- ED&I development back in progress.</p>	Actual	Potential	Important	More Concerned ^	Delivering Services to Tenants	Averse	Employment and Training

Title of Risk	Risk Owner	Description	Assessment	Status:	Impact:	Response Rating	Level of Concern since previous review	Strategic Risk Area (Sector Risk Profile)	Risk Appetite	Ambitions
Gap and lack of recent reviews in policies and procedures, leaves us at risk with the Housing Ombudsman and the Social Housing Regulator	Head of Customer Services	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.	Review of AM policy and procedures has identified some significant gaps in relation to the service area.	Actual	Potential	Important	Same Concerned >	Delivering against expectations	Averse	Employment and Training
The health and safety of tenants and staff	Exec Dir Customer & Estate Services and Exec Dir of Property Services	<ul style="list-style-type: none"> Statutory H&S requirements - Safe working practices to keep tenants and staff safe Failure to implement policies and procedures and associated communications / training. One working / personal safety / violence and aggression - JD 13.09.23 High value claims to BMBC / BH	Failure to comply with H&S legislation could result in injury or death and associated business risks.	Potential	Potential	Important	Same Concerned >	Health and Safety	Averse	Keeping Tenants Safe
Failure to meet increasing and changing regulatory requirements	Chief Executive	<ul style="list-style-type: none"> 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)	A change and strengthening in regulatory approach is being implemented nationally, including the professionalism agenda (CIH).	Potential	Potential	Important	Same Concerned >	Delivering against expectations	Averse	Hearing Customers
Far Right Extremism and Rioting	Executive Director of Customer and Estate Services	Added 07.08.24: Due to the unrest spreading throughout the country, and protests anticipated in Barnsley.	Recent unrest.	Potential	Potential	Important	Same Concerned >		Averse	Keeping Tenants Safe

Appendix C

Berneslai Homes
Register of Contingent Liabilities
Last Updated: 6th September 2024

Ref	Nature of Potential Liability	Details	Estimated Potential Value		Liability Funded From	Added to Register	Expected Date Resolved	Risk Profile Assessment				Comments
			Maximum Exposure	Reasonable Worst Case				Likelihood	Date Reviewed	Date of Next Review	Risk Owner	
2024-01	Personal Injury Claim	Injuries resulting from a fall caused by alleged maintenance / repair failings at a property formerly managed by Berneslai.	£500,000	£100,000	Reserves	08/04/2024	30/09/2024	Possible	06/09/2024	30/09/2024	ED Prop Servs	Claim in excess of £500k (above which insurance will cover) strongly contested on liability, and value. Strong case presented and reasonable confidence of no liability, high confidence that should liability be established it will be significantly lower than the claimed value. Judgement awaited at time of review (Sept 24)

Definitions and notes

- Contingent Liability A potential liability that may occur in the future, and can be reasonably estimated. Examples would include pending litigation or disputed insurance claims.
- Materiality Contingent Liabilities will be considered material and registered if the total maximum exposure exceeds £100,000
- Maximum Exposure The "worst case" liability
- Reasonable Worst Case The most likely liability should it crystallise (become an actual liability)
- Expected Date Resolved When the issue will either become an actual liability, or be averted. E.g. a court decision on a claim.
- Likelihood - Probable The liability is more likely than not to crystallise
- Likelihood - Possible The liability is as likely as not to crystallise.
- Likelihood - Remote The liability will most likely not crystallise
- Review of Risk Risk owners should review contingent liabilities at least monthly, or when new information dictates.



Creating great homes and communities
with the people of Barnsley

Report Title	Berneslai Homes Limited Report and Accounts for the period ended 31st March 2024	Confidential	No
Report Author	Executive Director of Resources	Report Status	For Approval
Report To	Board 26 th September 2024	Officer Contact Details	Rachel Taylor racheltaylor@berneslaihomes.co.uk

1. Executive Summary	<p>The Company's final Annual Report and Accounts for the year ending 31st March 2024 are attached as Appendix A for Board approval. A near final version was presented to and discussed by the Audit & Risk Committee on 15th August 2024. The Committee agreed to recommend approval of the annual report and accounts to Board.</p> <p>Our External Auditors BDO have finalised their audit of the Accounts and their report is attached at Appendix C. Representatives from BDO attended the Audit & Risk Committee Members to present their findings. The Committee also met with BDO without Berneslai Homes officers present.</p> <p>The key financial results are:</p> <ul style="list-style-type: none"> • net current assets of £7.273M compared to £8.160M for 2022/23. • The retained surplus excluding pension assets is £7.353M as at 31st March 2024 and total retained surplus £6.882M (after accounting for pension liabilities under FRS102). • a deficit of £0.837M for 2023/24 (£3.333M deficit in 2022/23) which is adjusted to a deficit of £1.803M (£7.925M deficit in 2022/23) after accounting for pension costs and holiday pay accrual movement in accordance with FRS102. The reported deficit is partially due to the release of an approved payment of £0.620M to the Council in 2023/24 (£3.047M released in 2022/23), as part of an overall sum earmarked from reserves to support housing growth. The remainder relates to the contribution from reserves towards the Management Fee services and Repairs First Project.
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2. Recommendation/s

1. The Audit & Risk Committee recommend the Board:
 - a. Consider the Berneslai Homes Limited Annual Report and Accounts for the period ended 31st March 2024 (Appendix A)
 - b. Consider the letter from BMBC (Appendix B)
 - c. Consider the final audit report from the external auditors, BDO (Appendix C)
 - d. Approve the Berneslai Homes Limited Annual Report and Accounts for the period ended 31st March 2024.
 - e. Approve the Chair of the Board, the Chair of the Audit & Risk Committee and the Head of Governance & Strategy sign the Annual Report and Accounts for the period ended 31st March 2024 at the relevant sections;
 - f. Approve the Chair of the Board signs the letters of representation (Appendix D)

3. Background

- 3.1 Berneslai Homes Ltd is a company limited by guarantee, registered with Companies House, which must comply with the Companies Act 2006. The Company provides both management and maintenance services for Barnsley Metropolitan Borough Council Dwellings and other HRA assets. The Report and Accounts for the period ending 31st March 2024 are attached at Appendix A.
- 3.2 The annual report and accounts must be subject to an audit by a suitably qualified firm of external auditors. BDO LLP were appointed by the Board at the Annual General Meeting on 28th September 2023 to perform the audit on the attached annual report and accounts.
- 3.3 The draft annual report and accounts and the draft audit findings reports from BDO were considered and discussed in depth at the Audit & Risk Committee on 15th August 2024.

4. Strategic and Directors' Reports

- 4.1 The annual report and accounts will be publicly available through the Companies House section of the gov.uk website. The annual report provides Berneslai Homes the opportunity to inform readers of its strategic direction, its achievements and challenges as well as an overview of all the great work the company does.
- 4.2 The Companies Act requires the annual report to include a Strategic Report and a Directors' Report. The strategic report must include the following components: information to help shareholders to assess how Directors have performed their duty to promote the success of the company; context for the financial statements; insight into its main objectives and strategy; a description of the principal risks; relevant non-financial and sustainability information; and analysis of performance. The Directors' report provides other regulatory and statutory information.

- 4.3 The Strategic Report has been further enhanced from the version presented to the Audit & Risk Committee on 15th August 2024 based upon feedback from BDO.
5. Financial Statements
- 5.1 The financial statements are made up of several elements including detailed notes which provide additional information. The information presented in the final version remains the same as was presented to the Audit & Risk Committee on 15th August.
- 5.2 The key results within the Income Statement are:
- The Company reports a deficit of £0.837M in 2023/24 (£3.333M deficit in 2022/23) which is adjusted to a **deficit of £1.730M** (£7.925M deficit in 2022/23) after accounting for pension costs and holiday pay accrual movement in accordance with FRS102.
 - The reported deficit is partially due to the release of an approved payment of £0.620M to the Council in 2023/24 (£3.047M released in 2022/23), as part of an overall sum earmarked from reserves to support housing growth.
- 5.3 The key results within the Statement of Financial Position are:
- **Net current assets of £7.346M** for 2023/24 compared to £8.160M in 2022/23. Current assets are stock (£0.782M), debtors and work in progress (£4.956M), short term investments and cash (£5.712M) being partly offset by liabilities in relation to creditors (£4.103M).
 - Retained **surplus excluding pension assets** is **£7.426M** and total retained surplus £6.882M after accounting for pension assets under FRS102. Based upon the financial assumptions used in FRS102, the **value of pension scheme asset** for 2023/24 is £28.285M, as per IFRIC14 the asset has been **restricted to £0M** and the **unfunded obligations of £0.471M** have been recognised in the financial statements, both figures as calculated by the actuary. As a result of the new methodology, last year's pension scheme asset value has changed from £15.210M to £18.925M.
- 5.4 The Statement of Cash Flows shows a decrease in cash of £1.472M compared to the position at 31st March 2023. This is largely due to a decrease in creditors (£1.101M) and the £0.620M housing growth payment to BMBC during the year.
- 5.5 The Pension Asset has been restricted to £0M (£18.925M asset in 2022/23 as restated) and the unfunded obligations of £0.471M have been recognised as the Pension Liability, both figures as calculated by the actuary.
- 5.6 The accounting rules on recognition of pension assets is complex and actuaries' default methodology for the preparation of the asset ceiling has changed since 2023 due to auditor and practitioner views. The changes were discussed in depth at the Audit & Risk Committee on 15th August 2024.

5.7 External Audit has evaluated the assumptions used by the actuary and concluded that they are consistent to those used by similar schemes.

6. Going Concern

6.1 A key focus of the audit each year is an assessment of the Company's going concern position, that is that we are financially viable for a minimum of 12 months from when the accounts are signed in September. Taking into consideration current and future income forecasts and the current long-term contracts in place with the Council on the Management Services and Construction Services (CS) the auditors agreed with our assessment that our entity is a going concern. Both contracts are for a period of 10 years and the CS PRIP contract and the Management Service Contract ending in 2030/31.

6.2 To provide assurance to the Board and BDO regarding the certainty of income the Council provides an annual letter attached as Appendix B which confirms the ongoing service agreement.

7. External Audit

7.1 The auditors have now completed their work and issued their final audit findings report, attached as Appendix C. The report confirms there are no outstanding matter; no requirements to change any matters within the annual report and accounts; and the accounts will include an unqualified auditor's opinion (clean bill of health).

7.2 The auditors presented a draft findings reports to the Audit & Risk Committee, which highlighted there were two main outstanding items (pension asset valuation and provision for personal damages claim). We have continued to work with BDO following the Audit & Risk Committee meeting on both these matters.

7.3 Following further consideration and analysis BDO are satisfied with how the pension asset valuation is disclosed within the accounts, no amendment was required to the information within the draft annual report and accounts presented to the Audit & Risk Committee on 15th August.

7.4 Berneslai Homes (BH) are the second defendant in a personal injury claim which was heard in court between 29th August and 3rd September 2024. A judgement was not made at the end of the hearing and at the time of writing a date for the judgement is not known.

7.5 BH legal advisors provided an overview of the hearing and their closing statement. This information was shared with BDO who also spoke to the legal advisors to understand their assessment of the likelihood a significant settlement would be made against BH. The opinion of the Senior Finance Leadership at BH and BDO is it is unlikely a significant settlement will be made against BH, therefore, with BDO's agreement no disclosure regarding this matter has been included in the annual report and accounts.

8. Letters of Representation

8.1 BDO require the Board to make several representations regarding the information provided during the audit and the information included in the annual report and accounts. BDO has provided the letter of representation attached as Appendix D for Board to approve is signed on their behalf.

9. Customer Voice/Impact

9.1 None arising directly from this report.

10. Risk and Risk Appetite

10.1 Set out in the External Auditor's report attached.

11. Strategic Alignment

11.1 Production of the accounts is a statutory requirement.

12. Data Privacy

12.1 This involves the processing of personal data and on completion of Part A of the DPIA form no new data privacy risks have been identified.

13. Consumer Regulatory Standards

13.1 None arising directly from this report.

14. Other Statutory/Regulatory Compliance

14.1 None arising directly from this report.

15. Financial

15.1 The audit approach adopted by the auditors has been designed to obtain the required level of assurance in accordance with the UK auditing standards.

16. Human Resources and Equality. Diversity and Inclusion

16.1 There are no employee implications arising directly from this report.

17. Sustainability Implications

17.1 There are no implications arising directly from this report.

18. Associated Background Papers

18.1 Berneslai Homes Ltd 2023/24 Final Accounts as at 31st March 2024.

19. Appendices

19.1 Appendix A – Berneslai Homes Ltd Final Annual Report and Accounts for the financial period to 31st March 2024.

15.2 Appendix B – BMBC Letter to Board.

15.3 Appendix C – External Audit Final Audit Findings Report

15.4 Appendix D – Letter of Representation

16. Glossary

16.1 CS - Construction Services.

16.2 FRS - Financial Reporting Standard.

Registered company number 4548803

BERNESLAI HOMES LIMITED

(A Company Limited by Guarantee)

Annual Report and Accounts for the year ended 31 March 2024

Berneslai Homes Limited

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Board of Directors

Ken Taylor
Chair of the Board
(Date of appointment 15.11.23)

Sinéad Butters
Chair of the Board
(Date of resignation 28.09.23)

Adam Hutchinson
Independent Member

Richard Fryer
Independent Member

Jo Sugden
Independent Member

Councillor Kevin Osborne

Gez Morrall
Tenant Board Member
(Date of appointment 07.12.23)

Mark Johnson
Independent Member

Councillor Sarah Tattersall

Adriana Rustemi
Tenant Member
(Date of resignation 28.09.23)

Eric Smith
Board Co-optee
(Tenant Board Member up to
22.02.24)

Executive Officers

Amanda Garrard
Chief Executive

Kulvinder Sihota
Interim Executive Director
of Corporate Services

Dave Fullen
Executive Director of Customer
and Estates Services

Arturo Gulla
Executive Director of
Property Services

Lee Winterbottom
Managing Director
Construction Services

Samantha Roebuck
Company Secretary

Auditor

BDO LLP
6th Floor
Central Square
29 Wellington Street
Leeds
LS1 4DL

Bankers

Barclays Bank
PLC
10-18 Queen Street
Barnsley
S70 1SJ

Solicitors

Walker Morris LLP
33 Wellington Street
Leeds
LS1 4DL

Registered Office

10th Floor
Gateway Plaza
Off Sackville Street
Barnsley
S70 2RD

Statement from the Chair

Last year has seen Berneslai Homes continue to deliver high quality housing and responsive maintenance services whilst also supporting tenants with financial hardship and into work. It has done this at a time when the housing sector is facing many challenges and so I am extremely proud of the Berneslai Homes team and grateful for the hard work of all our colleagues in helping to deliver our ambitions for a modern, forward looking, organisation that puts the needs of our customers first.

We now move into year four of a 10-year contract with Barnsley Metropolitan Borough Council, providing housing management and maintenance services across the council housing stock. Having a strong partnership with the council is crucial for Berneslai Homes and by building on this successful relationship we can drive improvements to deliver excellent housing services whilst ensuring that customers are kept at the heart of everything we do. Furthermore, the Board has reshaped our 10-year strategic plan to ensure alignment with the Council's 2030 Plan. In turn, I am excited by the impact we can have on jobs, skills, training and the environment, all of which the Board are keen and committed to support.

As we move forward, we will continue to implement significant improvements to strengthen assurance around building and fire safety and the new Consumer Regulations and Tenant Satisfaction Measures. The Board has the highest level of visibility for the delivery of safety actions and will provide a strong level of scrutiny as we look to deliver our ambitions in our Strategic Plan.

Our Tenant Voice Panel and Scrutiny Panel have worked closely with us to make sure that we are in a strong position to meet the Regulator for Social Housing proactive framework for both setting high standards for tenants and measuring how landlords deliver against those standards. We have listened harder than ever to our extensive tenant feedback through their social media posts, opinions at meetings, views in surveys and mapped out their experiences of the service we deliver day in and day out. Most importantly we have developed a service improvement framework which will deliver those on the ground and practical changes that our tenants deserve. As we move into this new regulatory era, we are strengthening our partnership with tenants, supporting our Tenants and Resident Associations in their communities, involving tenants openly in our governance and assurance arrangements, co-designing services, and supporting tenants as they test and inspect our service.

Throughout all of our work we will continue to embed our values of Customer First, Can Do and Curious. These are the fundamental principles on which Berneslai Homes is based and which reflect our ethics and culture.

I would like to thank all of my fellow members of the Board for their hard work and dedication throughout the year. In particular, I would like to say thank you to Sinéad Butters who has stepped down as Chair of the Board, for the considerable and positive impact she has had on developing the Board since joining us in 2020, and Adriana Rrustemi who also retired from the Board in September for her valued contribution over the last 6 years.

And finally, on behalf of the Board, I would also like to thank the Council and tenants who have worked with us for their support and all the Berneslai Homes staff for their continued hard work and commitment. I am looking forward to working with you all as we deliver on our new Berneslai Homes strategy and live our values as we deliver high quality services, keep our tenants safe, support people into work and invest in our neighbourhoods.

Ken Taylor
Chair
26 September 2024

Strategic Report

Activities of the Company

Berneslai Homes Limited is a wholly owned and controlled Company of Barnsley Metropolitan Borough Council (BMBC) and is limited by guarantee. The Company manages and maintains the Housing stock and other Housing Revenue Account assets on behalf of the Council.

Business review

The financial year 2023/24 was again a challenging year for the housing sector which placed a strain on budgets and exacerbated recruitment and supply issues. Whilst facing these challenges the Company responded to the cost-of-living impact on Tenants by introducing a Hardship Fund.

The new Property Repairs and Improvement Partnership (PRIP) contract began its fourth year with Construction Services (CS) responsible for delivering two thirds of the contract. The outturn for the year was turnover of £27.3M, with a surplus of £720K. An allowance was earmarked for disallowed costs of £442K. This is a form of risk pricing for where the pricing caps have been breached. The pricing cap breaches tend to be linked to pricing rates that are unachievable and market conditions relating to inflationary increases on material and from suppliers.

Performance in relation to compliance has been a key focus during the year. A revised reporting framework is now in place and reviewed regularly by the Board, EMT, the Council and verified independently by third party auditors.

The Arm's Length Management Organisation continues to deliver for tenants, the Council and the communities we serve. Despite the challenging year overall tenant satisfaction with the services we deliver remains high at 76.8% (2022/23: 84.2%). The downturn in satisfaction since last year is reflective of the national picture in housing across the UK which has dropped to its lowest score since 2015. Across the Housing Sector, customer satisfaction scores have been significantly impacted by the cost-of-living crisis, inflationary rent increases, damp mould and condensation negative press coverage and shortages in labour and materials. A plan is in place to address the local issues affecting tenant satisfaction. We remain committed to listening to our customers, hearing what they say and making sure they feel safe in their homes.

Rent collection performance for the year is at 96.25% which is just below the stretch target of 97%. Across the sector, the cost-of-living crisis has impacted on collection levels. Approximately two thirds of tenants' rents are met through either housing benefit or an element of Universal Credit. For the remaining third of tenants who do not receive support with their rents, or for any tenant experiencing severe financial hardship a wide range of support is available. Through our tenant support team and the Money Advice Worker we fund at Citizens Advice we have secured £944,405 benefit gain/grants for tenants.

Performance on re-letting void properties saw an increase with void turnaround time being 46 days (2022/23: 30 days). We are working to reduce the number of empty homes but have seen a high number of properties requiring significant works. An empty homes action plan has been developed to address these issues.

Our benchmarking club continues to evidence that we are high performing and low cost with high levels of satisfaction.

Principal risks and uncertainties

Risk is a key consideration throughout our business planning process and the Risk Management Framework Strategy is an important component of Berneslai Homes' assurance framework. The Board and the Chief Executive have overall responsibility for risk management. The Head of Governance and Strategy, supported by the Risk & Governance Manager, is responsible for the organisation and promotion of risk management within Berneslai Homes.

Berneslai Homes Limited

The Corporate Risk Appetite was fully refreshed in February 2023 by EMT and Board, which brought the appetite factors into line with the refreshed Strategic Plan and current external environment. Board reviewed the current Risk Appetite in February 2024, and found it remained fit-for-purpose.

The strategic risks, issues and concerns register is reviewed quarterly by the Executive Management Team (EMT), by Audit and Risk Committee and the Board. Every two years, a complete zero-based review of the strategic issues and concerns is also undertaken, during which a brainstorming session is undertaken providing an opportunity for everyone to discuss the significant areas of concern. The next zero-based review of the strategic issues and concerns is scheduled for 7th November 2024 by EMT and Board Members.

Each Directorate has a separate issues and concerns register, which assesses the concerns at an operational level. Operational concerns, the day-to-day issues arising whilst managing a service, are the responsibility of managers. They are monitored and reviewed at least quarterly by the respective senior manager, and risk and action owners. Each Directorate also undertakes two-yearly zero-based register reviews, which follows the same format as the strategic review. These reviews are also scheduled for late 2024.

EMT monitor the red (critical response) concerns from each of the operational registers. 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.

Key current issues and concerns

There are currently 17 active strategic issues and concerns, of which 9 have been identified as requiring a Critical (Red) Response, which ensures they are given priority with high level mitigations. The 9 critical response risks are: 1) Mould, Damp and Condensation. 2) Reduction in customer satisfaction. 3) The HRA does not cover service requirements. 4) Regulatory inspection announced by RSH for Q2. 5) Ability to deliver historical & in year R&M works within current financial resources available. 6) The cost-of-living crisis is impacting tenants and our communities. 7) High value claim as a result of Private Management Service. 8) Vulnerability of in-house and third party systems to cyber attack. 9) Business continuity.

Financial Performance for the year

The Board reports a deficit of £1.8M for the year (2023: deficit £7.9M). The deficit principally arose from expenses in relation to the company's share of the Local Government Pension Scheme and contributions to the BMBC HRA Capital Programme, excluding such expenses the company made a deficit before taxation of £0.2M (2023: £0.07M). Turnover for the Company was £43.4M (2023: £38.3M).

The Company had net assets of £7.0M (2023: £27.2M as restated) after accounting for net pension liabilities of £0.5M (2023: net asset £18.9M as restated). The pension actuaries default methodology for the preparation of the asset ceiling has changed since 2023 due to auditor and practitioner views, the prior year calculation has been updated to reflect which has resulted in an increase to the prior year net assets.

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Emissions and Energy Consumption

The Company's greenhouse gas emissions and energy consumption are as follows:

	2023/24 CO2e (t)	2022/23 CO2e (t)
Scope 1: Direct emissions resulting from activities for which the Company is responsible involving natural gas and vehicle fleet	2,432	2,343
Scope 2: Indirect emissions resulting from activities for which the Company is responsible involving electricity	550	548
Scope 3: Indirect emissions resulting from activities for which the Company is responsible but does not control involving business mileage and Home Working	670	662

The intensity ratio for the year was 84.2 CO2e per £m turnover (2022/23 was 92.7).

The main source of CO2 emissions is from gas supplies primarily in relation to the district heating systems. Included in our Sustainability Strategy 2022-2027 our ambition is to monitor and trial new heating technologies offering affordable warmth and carbon reduction. Further detail of initiatives is included in Section 172 Reporting.

The data has been taken from monthly invoices received from suppliers and converted using the UK government GHG Conversion Factors for Company Reporting.

Section 172 Reporting

Directors' duties

Directors of UK companies must act in accordance with a set of general duties. These duties are detailed in section 172(1) of the Companies Act 2006 which is summarised as follows:

'A director of a company must act in the way they consider, in good faith, would be most likely to promote the success of the company for the benefit of its members as a whole and, in doing so have regard (amongst other matters) to:

- the likely consequences of any decisions in the long term;
- the interests of the company's employees;
- the need to foster the company's business relationships with suppliers, customers and others;
- the impact of the company's operations on the community and environment;
- the need to maintain a reputation for high standards of business conduct; and
- the need to act fairly between members of the Company.'

Business Conduct

Directors are briefed on their duties and they can access professional advice on these, either from the Company Secretary or, if they judge it necessary, from an independent adviser. It is important to recognise that in a large organisation such as ours, the Directors fulfil their duties partly through a governance framework that delegates day-to-day decision-making to employees of the Company.

People

Berneslai Homes is committed to being a responsible business. We work to build strong partnerships that meet the expectations of our Board, employees, customers and suppliers. Employees are at the heart of our services. For our business to be successful we need to manage the performance of our people whilst developing talent, ensuring that we operate as efficiently as possible. Berneslai Homes

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is certified to Silver standard by Investors in People and Gold Be Well @ Work, which assesses the organisation’s health and wellbeing culture.

Partnership

Berneslai Homes work closely with Barnsley 2030 Board, our local communities and different businesses and organisations across all sectors to achieve their vision of Barnsley being a place of possibilities. We are a listening organisation: valuing and encouraging feedback from customers, working together to continuously improve services, and ensuring their views are at the heart of our decision making. We continue to learn, grow and change so we adapt to any given situation.

Community and Environment

Berneslai Homes embrace diversity and inclusion, provide work opportunities, support carers, and contribute to the zero-carbon agenda. We invest and spend wisely in our homes and communities whilst also supporting the local economy and investing in our town.

The right home environment is critical to our tenant’s physical and mental health and wellbeing. Good quality, energy efficient and safe housing helps people stay healthy and provides the base to help achieve a decent quality of life. Berneslai Homes work with Public Health and other health partners to ensure our tenants can access information and support, to stay fit and well all year round and to provide additional help to keep warm and well during colder weather. We invest over £2 million per annum in equipment and adaptations to assist tenants to remain in their homes.

The Board recognises the need to operate sustainably, which is defined in the Board approved Sustainability Strategy.

Communication with stakeholders

Good governance is essential in ensuring that stakeholders continue to be supportive of Berneslai Homes and its Strategic Plan.

The table below shows three key events and decisions made by the Board, the stakeholders they impact and the associated actions taken by the Directors to engage with the relevant stakeholders. Key events and decisions have been determined by assessing items which are either material or that have a significant impact on one or many categories of stakeholders.

Key event / decision	Stakeholders affected	Action and Impact
Approved the Financial Regulations Policy (July 2023)	All Stakeholders, inc BMBC, Board, Employees, Customers	1) The policy was reviewed in conjunction with Internal Audit and BMBC to ensure alignment. The main changes were detailed in the Summary of Changes. 2) Board commented on the importance of the document in making financial decisions and recommended that this needs to be kept under review to make more user friendly for the future. 3) Board approved the Financial Regulations and noted the main changes detailed in the Summary of Changes.

<p>The decision to focus resources on the repairs backlog (December 2023)</p>	<p>All Stakeholders, inc BMBC, Board, Employees, Customers</p>	<ol style="list-style-type: none"> 1) Board were informed of the significant work and analysis that has been undertaken resulting in a proposal to introduce a 1 year plan to consolidate and clear accumulated repairs and maintenance works. As a result of this change, it was proposed that next year's BHS programme be reduced to £4.5M to maintain decency (438 properties instead of the usual 1200). Working with partners will be critical due to the significant changes to the allocation of resources. 2) Also of significant importance is communication and Board were assured this would continue. Board requested sight of the communication plan and felt it would also be helpful to see the messages being circulated. 3) Another impact on the approach to clear the repairs backlog is that there will be no environmental work carried out and the pilot on the independent living schemes will also not take place. A brief overview of works being stripped away was requested to gain an understanding of what this will mean for tenants. 4) Assurance was provided that 100% decency will be retained with this approach. 5) Categorisation of jobs was explained, noted priority Category 1 relating to health and safety and vulnerability. 6) Board felt it was important to get a 'grip' on the backlog situation and fully support the proposal of a year of consolidation, followed by a more efficient delivery model. 7) Board approved and recommended to BMBC the 2024/25 one-year approach for repairs and maintenance to consolidate and clear accumulated works and the revised approach going forward based on stock condition information.
<p>The decision to implement a 3-year vision (January 2024)</p>	<p>All Stakeholders, inc BMBC, Board, Employees, Customers</p>	<ol style="list-style-type: none"> 1) Board agreed at their away day in January 2024 to produce a 3-year vision. 2) The vision was to move from being a reactive organisation to one that is more proactive and predictive. 3) The 3 year vision is to develop the approach to efficiencies and actual cash savings.

Berneslai Homes Limited

		<p>4) 2024/25 will be to ensure the basics are in place, 2025/26 will concentrate on the structure and 2026/27 will be around embedding what has been implemented in the previous 2 years.</p> <p>5) Board accepted the final 3-year plan at the May 2024 Board.</p>
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Key performance indicators

Performance management is linked to the aims and objectives of the Company and is central to ensuring the delivery of key business and service priorities.

The following key performance indicators are part of a suite of indicators reported quarterly to the Board and our shareholder Barnsley Metropolitan Borough Council.

Table of key Performance Indicators

Indicator	2022/23 Target	2022/23 Performance	2023/24 Target	2023/24 Performance
The percentage of all tenants satisfied with the overall service provided	89%	84.2%	84%	76.8%
The percentage of tenants satisfied with the repairs	89%	83.1%	83.1%	75.1%
The proportion of local authority dwellings which are decent dwellings	100%	99.67%	100%	99.91%
Rent collected by the local authority as a proportion of rents owed on HRA dwellings	97%	96.06%	97%	96.25%

Specific actions to address KPIs behind target are included within our published performance reports.

Financial KPIs analyse operating performance against agreed budgets for the financial year and inform management decision making and Board oversight. Details for the year are as follows:

	Actual	Budget	Variance			Actual	Budget	Variance	
	£,000	£,000	£,000			£,000	£,000	£,000	
Operating Income					Operating Costs				
Management Fee	16,085	15,540	545	3.5%	Management Fee	16,983	16,436	- 547	-3.3%
Construction Services	27,305	23,000	4,305	18.7%	Construction Services	26,752	22,201	-4,551	-20.5%
Other Operating	459	-	459						
Contribution to Capital	613	613	-	0.0%	Capital Projects	1,110	866	- 244	-28.2%
TOTAL	44,462	39,153	5,309	13.6%	TOTAL	44,845	39,503	-5,342	-13.5%

Samantha Roebuck
 Company Secretary
 26 September 2024

Directors' Report

The directors present their report and accounts for the year ended 31 March 2024.

Activities of the Company

The activities of the Company are shown in the Strategic Report.

Board Members and Executive Directors

The Board Members and the Executive Officers of the Company are set out on page 1. The Board comprises an Independent Chair, 2 tenant representatives, 2 BMBC nominees and 4 independents.

The Executive Officers are the Chief Executive and the Functional Directors. All Executive Officers served throughout the year. The Board Members and Executive Officers have no financial interest in the Company.

Employee Involvement and Development

It is recognised that the commitment of every employee is critical for the success of the Company. Employees are kept well informed by a variety of methods including team briefings, key messages, 1-2-1s, toolbox talks and focus groups to examine and consult upon specific issues. Berneslai Homes also has its own intranet site. We constantly seek feedback from our employees, using a variety of methods which include annual employee satisfaction surveys, regular pulse surveys and the Performance and Development Review (PDR) Process.

We recognise a number of trade unions and have a well-established consultation framework.

We are an Investors in People (IIP) employer which recognises the significant work undertaken to support and train staff. In March 2023, we also achieved the Gold Wellbeing Award from Be Well @ Work, a South Yorkshire award scheme which recognises excellent health and wellbeing culture embedded within organisations.

We believe that saying thank you and celebrating successes is important and to appreciate our employees who show a commitment to our values of putting the customer first, being curious and having a can-do attitude, we have introduced 'Be Berneslai' which is our new reward and recognition programme.

We also believe in providing volunteering opportunities, giving employees the chance to engage in community-based volunteering.

Training needs for all employees are identified through the PDR process. Development is not limited to attending courses and conferences and we encourage employees to job shadow, undertake back to the floor days and to network with other internal and external colleagues and organisations to maximise their potential.

In 2021, we developed and launched our 'coaching culture' model which provides opportunities for those that wish to become accredited coaches. In addition, all our managers are trained in coaching skills. A full review of our Leadership offer will be undertaken within the next 12 months to make sure the programme continues to be fit for purpose and in line with current and innovative practices.

We continue to offer work placements to young people and have nine T-level placements across the organisation. We regularly host a range of school and other work experience placements.

To ensure compliance with the new professionalism standards shortly to be introduced by the Social Housing (Regulation) Act 2023, we have developed a 'regulation ready' action plan. As an organisation we are defining what professionalisation looks like for us and our staff in key frontline roles. Qualifications forms a part of this, but we are also putting in place a robust plan of ongoing

CPD, coaching and mentoring, and sharing knowledge with internal and external networking and learning communities.

Employees with Disabilities

It is our policy that people with disabilities should have full and fair consideration for all vacancies, and those who meet the essential criteria are guaranteed an interview. In employment we ensure that reasonable adjustments are made for disabled employees and we have a Supporting Disabled People at Work Policy. The policy ensures a consistent approach to the implementation of adjustments.

Those employees who become disabled during their employment are provided with support where possible to enable them to remain in their existing roles.

We have partnered with Barnsley College to provide placements for supported internships aimed at young people with disabilities. These enable them, with the support of a workplace coach, to gain experience in real workplace settings and develop their employability skills. We currently have two young people on placements, working within our Construction Services and Organisational Development teams. We are looking to continue this into the next academic year and looking at the possibility of expanding the number of placements we are able to offer.

Equality, Diversity and Inclusion

Berneslai Homes is committed to equality and inclusion. We see equality and inclusion as core business values, which are embedded in our services, policies, and procedures; from recruitment and selection, through to training and development, from service delivery that meets customers' needs to involvement and engagement of diverse customers.

Our EDI Strategy 2022-25 reflects the strategic aims of Barnsley 2030 and aligns with our Strategic Plan 2021-31. Our ambition is to become a beacon employer of best practice in EDI by going above and beyond our duties outlined in the Equality Act 2010 and Public Sector Equality Duty 2011. The company recognises that equality is an integral part of delivering a first-class service. It is our policy to promote equality of opportunity for all, in an environment free from discrimination, harassment and victimisation. We embrace and promote diversity, recognising the benefits that it brings in terms of culture, employee retention and recruitment, and business excellence.

We continue to raise the profile of our EDI Champions who are individuals from across the organisation who help to promote and support our EDI ambitions, support staff and raise awareness of all matters relating to EDI. We will continue to deliver a comprehensive EDI training programme which is mandatory for all staff.

Internal Controls Assurance

The Board is accountable for the Company's management and internal control system. The Chief Executive has responsibility for maintaining a sound system of control which supports the achievement of the organisation's aims and objectives. The systems are designed to manage rather than eliminate the risk of failure to achieve these objectives. It can therefore only provide reasonable and not absolute assurance of effectiveness.

The Chief Executive has reviewed the Internal Control framework developed by the Executive Team and taken account of comments made by Internal and External Audit, the IIP External Accreditation Report, and the Audit & Risk Committee and has confirmed that adequate procedures are in place. She is satisfied that there is sufficient evidence to confirm adequate systems of internal control existed and were operated throughout the year to ensure the proper management of significant risks

Berneslai Homes Limited

facing the Company. No weaknesses were identified which have resulted in material misstatement or loss, which would have required disclosure in the financial statements.

Financial Instruments

The Company's financial risk management objective is broadly to seek to make neither profit nor loss from exposure to currency or interest rate risks. The Company has no borrowings and the policy is to finance working capital from the retained cash surplus.

The Company does not actively use financial instruments as part of its financial risk management.

Going Concern

The Company's management service and Construction Services PRIP contracts with BMBC are both for a period of 10 years ending 2030/31, thereby securing the Company's income streams for the foreseeable future. BMBC have issued a representation letter in respect of the service agreement.

The Management Fee and Construction Services budgets for 2024/2025 have been approved by the Board.

Directors have considered the operating surplus, cashflow and level of reserves plans which are in-line with expectations and are forecast to continue to be in-line for at least 12 months from the date of signing the Annual Report and Financial Statements. A sensitivity stress test has been carried out to assess the ability to continue operating in the event of a downturn in turnover highlighting any mitigating actions which management could take.

Based on the assessment undertaken, the Directors have a reasonable expectation that the Company has adequate resources to continue in operational existence for the foreseeable future, being a period of 12 months after the date on which the Annual Report and Financial Statements are signed. For this reason, it continues to adopt the going concern basis for the Financial Statements.

Directors Qualifying Indemnity Provision

The Directors benefited from qualifying third party indemnity provisions in place during the year and at the date of this report.

Modern Slavery Act – Transparency Statement

Berneslai Homes is committed to eliminate as far as possible the risk of modern slavery and human trafficking in our organisation and in our supply chain. Our turnover for the year ended the 31 March 2024 is in excess of £36m, therefore we are legally obliged to publish a Modern Slavery Statement each financial year which can be obtained by writing to the Company.

Auditor

A resolution to reappoint BDO LLP as auditor of the Company was agreed at the Annual General Meeting on 28 September 2023.

Information Given to Auditors

So far as each of the Directors are aware at the time the report is approved:

- There is no relevant audit information of which the Company's auditors are unaware, and
- The Directors have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information.

Approved by the Board of Directors and signed on behalf of the Board on 26 September 2024.

Samantha, Roebuck, Company Secretary
26 September 2024

Statement of Directors' Responsibilities

The directors are responsible for preparing the strategic report, the directors' report and the financial statements in accordance with applicable law and regulations.

Company law requires the directors to prepare financial statements for each financial year. Under that law the directors have elected to prepare the financial statements in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards and applicable law). Under company law the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the company and of the profit or loss of the company for that period.

In preparing these financial statements the directors are required to:

- select suitable accounting policies and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

The directors are responsible for keeping adequate accounting records that are sufficient to show and explain the company's transactions and disclose with reasonable accuracy at any time the financial position of the company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Financial statements are published on the company's website in accordance with legislation in the United Kingdom governing the preparation and dissemination of financial statements, which may vary from legislation in other jurisdictions. The maintenance and integrity of the company's website is the responsibility of the directors. The directors' responsibility also extends to the ongoing integrity of the financial statements contained therein.

Independent Auditor's Report to the Members of Berneslai Homes Limited

Opinion on the financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the Company's affairs as at 31 March 2024 and of its deficit for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

We have audited the financial statements of Berneslai Homes Limited ("the Company") for the year ended 31 March 2024 which comprise the income statement, the statement of comprehensive income, the statement of financial position, the statement of changes in equity, the statement of cash flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Independence

We are independent of the Company in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the Directors' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the Company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the Directors with respect to going concern are described in the relevant sections of this report.

Other information

The Directors are responsible for the other information. The other information comprises the information included in the Report and Accounts, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements, or our knowledge obtained in the course of the audit or otherwise appears to be materially misstated. If we identify such material

Berneslai Homes Limited

inconsistencies or apparent material misstatements, we are required to determine whether this gives rise to a material misstatement in the financial statements themselves. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

Other Companies Act 2006 reporting

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Strategic report and the Directors' report for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Strategic report and the Directors' report have been prepared in accordance with applicable legal requirements.

In the light of the knowledge and understanding of the Company and its environment obtained in the course of the audit, we have not identified material misstatements in the Strategic report or the Directors' report.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of Directors' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of Directors

As explained more fully in the Statement of Directors' Responsibilities, the Directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Directors determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Directors are responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Directors either intend to liquidate the Company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Extent to which the audit was capable of detecting irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in

respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Non-compliance with laws and regulations

Based on:

- Our understanding of the Company and the industry in which it operates;
- Discussion with management and the Audit and Risk Committee; and
- Obtaining and understanding of the Company's policies and procedures regarding compliance with laws and regulations;

we considered the significant laws and regulations to be UK GAAP and those that relates to payment of employees.

The Company is also subject to laws and regulations where the consequence of non-compliance could have a material effect on the amount or disclosures in the financial statements, for example through the imposition of fines or litigations. We identified such laws and regulations to be health and safety legislation.

Our procedures in respect of the above included:

- Review of minutes of meeting of those charged with governance for any instances of non-compliance with laws and regulations;
- Review of financial statement disclosures and agreeing to supporting documentation; and
- Review of legal expenditure accounts to understand the nature of expenditure incurred;

Fraud

We assessed the susceptibility of the financial statements to material misstatement, including fraud. Our risk assessment procedures included:

- Enquiry with management and the Audit and Risk Committee regarding any known or suspected instances of fraud;
- Obtaining an understanding of the Company's policies and procedures relating to:
 - Detecting and responding to the risks of fraud; and
 - Internal controls established to mitigate risks related to fraud.
- Review of minutes of meeting of those charged with governance for any known or suspected instances of fraud;
- Discussion amongst the engagement team as to how and where fraud might occur in the financial statements;
- Performing analytical procedures to identify any unusual or unexpected relationships that may indicate risks of material misstatement due to fraud;

Based on our risk assessment, we considered the areas most susceptible to fraud to be in relation to the posting inappropriate journal entries and management bias in accounting estimates.

Our procedures in respect of the above included:

- Testing a sample of journal entries throughout the year, which met a defined risk criteria, including unusual combinations in postings to revenue by agreeing to supporting documentation; and
- Assessing significant estimates made by management for bias.

We also communicated relevant identified laws and regulations and potential fraud risks to all engagement team members who were all deemed to have appropriate competence and capabilities

and remained alert to any indications of fraud or non-compliance with laws and regulations throughout the audit.

Our audit procedures were designed to respond to risks of material misstatement in the financial statements, recognising that the risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate concealment by, for example, forgery, misrepresentations or through collusion. There are inherent limitations in the audit procedures performed and the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely we are to become aware of it.

A further description of our responsibilities is available on the Financial Reporting Council's website at:

<https://www.frc.org.uk/auditorsresponsibilities>. This description forms part of our auditor's report.

Use of our report

This report is made solely to the Company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the Company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the Company and the Company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Matthew Whitehouse (Senior Statutory Auditor)
For and on behalf of BDO LLP, Statutory Auditor
Manchester, UK

Date:

BDO LLP is a limited liability partnership registered in England and Wales (with registered number OC305127).

Income statement for the year ended 31 March 2024

	Notes	Year Ended 31 March 24 £'000	Year Ended 31 March 23 £'000
Turnover	4	43,389	38,343
Other operating income	7	1,072	1,362
Operating cost		<u>(47,315)</u>	<u>(47,037)</u>
Operating deficit	6	(2,854)	(7,332)
Other finance cost	12	858	(748)
Interest receivable	8	<u>266</u>	<u>181</u>
Deficit on ordinary activities before Taxation		(1,730)	(7,899)
Taxation on deficit ordinary activities	13	(73)	(26)
Retained deficit for the year		<u>(1,803)</u>	<u>(7,925)</u>

All activities are continuing.

The notes on pages 23 to 34 form part of these financial statements.

**Statement of comprehensive income
for the year ended 31 March 2024**

	Notes	Year ended 31 March 24	Year ended 31 March 23 as restated
		£'000	£'000
Deficit for the financial year		(1,803)	(7,925)
Actuarial (loss)/income on defined benefit pension scheme	12	<u>(18,507)</u>	<u>49,420</u>
Total comprehensive (loss) / income for the year		<u>(20,310)</u>	<u>41,495</u>

The notes on pages 23 to 34 form part of these financial statements.

Statement of financial position at 31 March 2024

	Notes	As at 31 March 24		As at 31 March 23 as restated
		£'000	£'000	£'000
Tangible assets	14		80	107
Current assets				
Stock	16	782		704
Debtors	15	4,948		5,575
Short term investments		2,430		5,600
Cash at bank and in hand		3,282		1,584
		<u>11,442</u>		<u>13,463</u>
Creditors: amounts falling due within one year	17	(4,169)		(5,303)
Net current assets			<u>7,273</u>	<u>8,160</u>
Total assets less current liabilities			<u>7,353</u>	<u>8,267</u>
Pension (liabilities) / assets	12		(471)	18,925
Net assets			<u><u>6,882</u></u>	<u><u>27,192</u></u>
Capital and reserves				
Retained surplus (excluding pension (liability) / asset)			7,353	8,267
Pensions reserve			(471)	18,925
Retained surplus			<u><u>6,882</u></u>	<u><u>27,192</u></u>

The financial statements were approved and authorised for issue by the Board and were signed on its behalf on 26 September 2024.

Ken Taylor

Adam Hutchinson

Chair Berneslai Homes Board

Board Member

Statement of changes in equity for the year ended 31 March 2024

	Notes	Pension Reserve £'000	Retained Surplus £'000	Total Equity £'000
Comprehensive (deficit) / income brought forward at 1 April 2023:				
As Financial Statements at 31 st March 2023		15,210	8,267	23,477
Asset Ceiling prior year restatement	12	3,715	-	3,715
Brought forward as restated		18,925	8,267	27,192
Deficit for the year		-	(1,803)	(1,803)
Current service cost of pension scheme	12	(3,587)	3,587	-
Actuarial Gain on pension scheme	12	(18,507)	-	(18,507)
Employer contributions to pension scheme	12	1,805	(1,805)	-
Past Service Costs	12	(2)	2	-
Curtailment	12	37	(37)	-
Net interest from pension scheme	12	858	(858)	-
Other Comprehensive income for the year		(19,396)	889	(18,507)
Comprehensive income carried forward at 31 March 2024		(471)	7,353	6,882

	Notes	Pension Reserve as restated £'000	Retained Surplus £'000	Total Equity as restated £'000
Comprehensive (deficit) / income brought forward at 1 April 2022				
Deficit for the year		(25,716)	11,413	(14,303)
Current service cost of pension scheme	12	(5,916)	5,916	-
Actuarial gain on pension scheme	12	49,420	-	49,420
Employer contributions to pension scheme	12	1,851	(1,851)	-
Curtailment	12	34	(34)	-
Net interest from pension scheme	12	(748)	748	-
Other comprehensive income for the year		44,641	4,779	49,420
Comprehensive income carried forward at 31 March 2023		18,925	8,267	27,192

The pension reserve forms part of the Company's Retained Surplus but is disclosed separately to show separately the movements in relation to the Company's Defined Benefit Pension Scheme.

The notes on page 23 to 34 form part of these financial statements.

Statement of cash flows for the year ended 31 March 2024

	Notes	Year ended 31 March 24 £'000	Year ended 31 March 23 £'000
Cash flows from operating activities			
Deficit for the financial year		(1,803)	(7,925)
Adjustments for:			
Depreciation of tangible assets		27	28
Increase in stocks		(78)	(90)
Decrease / (increase) in debtors		627	(1,266)
(Decrease) / increase in creditors		(1,101)	943
Net interest receivable		(266)	(181)
Net interest from pension scheme		(858)	748
Difference between net pension expenses and cash contribution		1,747	4,031
		(1,705)	(3,712)
Cash from operations			
Taxation paid	<u>13</u>	(33)	-
		(1,738)	(3,712)
Cash flows from investing activities			
Interest received	8	266	181
Purchases of tangible assets	14	-	-
		266	181
Net decrease in cash and cash equivalent			
Cash and cash equivalents at beginning of year		7,184	10,715
Cash and cash equivalents at end of year		5,712	7,184
Cash and cash equivalents comprise:			
Cash at bank and in hand		3,282	1,584
Short term investments		2,430	5,600
		5,712	7,184

The notes on page 23 to 34 form part of these financial statements.

Berneslai Homes Limited

Notes to the Accounts

1 Company Status and Parent Undertaking

Berneslai Homes Limited is a company 100% owned by Barnsley Metropolitan Borough Council (BMBC). The Company is limited by guarantee. The guarantors are listed in the Company's Register of Members. The liability in respect of the guarantee as set out in the memorandum, is limited to £1 per member of the Company.

2 Accounting Policies

Basis of accounting

The financial statements have been prepared under the historical cost convention and in accordance with FRS 102, the Financial Reporting Standard applicable in the United Kingdom and the Republic of Ireland and the Companies Act 2006.

The preparation of financial statements in compliance with FRS 102 requires the use of certain critical accounting estimates. It also requires management to exercise judgement in applying the company's accounting policies (see note 3). The following principal accounting policies have been applied:

Going Concern

The Company's management service and Construction Services PRIP contracts with BMBC are both for a period of 10 years ending 2030/31, thereby securing the Company's income streams for the foreseeable future. BMBC have issued a representation letter in respect of the service agreement.

The Management Fee and Construction Services budgets for 2024/2025 have been approved by the Board.

Directors have considered the operating surplus, cashflow and level of reserves plans which are in-line with expectations and are forecast to continue to be in-line for at least 12 months from the date of signing the Annual Report and Financial Statements. A sensitivity stress test has been carried out to assess the ability to continue operating in the event of a downturn in turnover highlighting any mitigating actions which management could take.

Based on the assessment undertaken, the Directors have a reasonable expectation that the Company has adequate resources to continue in operational existence for the foreseeable future, being a period of 12 months after the date on which the Annual Report and Financial Statements are signed. For this reason, it continues to adopt the going concern basis for the Financial Statements.

Tangible fixed assets and depreciation

Depreciation is provided on a straight-line basis on the cost of tangible fixed assets, to write them down to their estimated residual values over their expected useful lives.

The principal annual rates used are:

Leasehold improvements	Over the term of the lease
Fixtures and fittings	20-33%

Where there is evidence of impairment, fixed assets are written down to their recoverable amount.

Intangible assets and depreciation

Development costs for computer software are amortised over their estimated useful lives of 5 years.

Stocks

Stocks comprise costs incurred on Programme Maintenance Jobs, net of amounts transferred to cost of sales after deducting foreseeable losses and related payments on account.

Accounting Policies continued:

Stocks (continued)

Costs include all direct material and labour costs incurred in bringing a contract to its state of completion at the year-end including an appropriate proportion of indirect expenses. Provisions for estimated losses on contract are made in the period in which such losses are foreseen. Programme Maintenance Jobs balances do not include attributable profit.

The excess of payments received over amounts recorded as turnover is classified under creditors due within one year. Amounts recoverable on contracts, being the amount by which recorded turnover is in excess of payments on account is classified under debtors.

Other stocks are stated at the lower of cost and net realisable value, after making due allowance for obsolete and slow-moving items.

Deferred Taxation

Deferred tax balances are not recognised in respect of permanent differences except in respect of business combinations, when deferred tax is recognised on the differences between the fair values of assets acquired and the future tax deductions available for them and the differences between the fair values of liabilities acquired and the amount that will be assessed for tax.

Deferred income tax is determined using tax rates and laws that have been enacted or substantively enacted by the reporting date.

Deferred Income

Deferred Income is received for a specific activity which is to be delivered in the following financial year.

Pension Costs

The company participates in a funded defined benefit scheme, the South Yorkshire Local Government Pension Scheme (LGPS). Triennial actuarial valuations of the pension scheme are performed by an independent, professionally qualified actuary, using the projected unit method.

Pension scheme assets are measured using market values. Pension scheme liabilities are measured using a projected unit method and discounted at the current rate of return on a high quality corporate bond of equivalent term and currency to the liability.

The pension scheme surplus is recognised as the asset ceiling and presented on the face of the statement of financial position. The movement in the scheme is split between operating charges, financing items and, in the statement of comprehensive income, actuarial gains and losses in accordance with FRS 102.

Holiday Pay Accrual

A liability is recognised to the extent of any unused holiday pay entitlement which has accrued at the at the Statement of Financial Position date and carried forward to future periods. This is measured at the undiscounted salary cost of the future holiday entitlement so accrued at the Statement of Financial Position date.

Short Term Investment Policy

The company's treasury management strategy for 2023/24 is to use financial institutions with a minimum credit rating of A-. Money Market funds need a rating of "AAA".

Short term investments comprise money market funds and other short term deposit investments.

Accounting Policies continued:

Financial Instruments

The company only enters into basic financial instrument transactions that result in the recognition of financial assets and liabilities like trade and other accounts receivable and payable, loans from other third parties and loans to related parties.

For financial assets measured at cost less impairment, the impairment loss is measured as the difference between an asset's carrying amount and best estimate, which is an approximation of the amount that the company would receive for the asset if it were to be sold at the reporting date.

Financial assets and liabilities are offset, and the net amount reported in the Statement of Financial Position, when there is an enforceable right to set off the recognised amounts and there is an intention to settle on a net basis or to realise the asset and settle the liability simultaneously.

3 Judgements in applying accounting policies and key sources of estimated uncertainty

In preparing these financial statements, the directors have had to make the following judgements:

Pensions

The critical underlying assumptions in relation to the estimates of the pension defined benefit scheme obligation include standard rates of inflation, mortality, discount rate and anticipated future salary increases. Variations in these assumptions can significantly influence the value of the liability or asset recorded and annual defined benefit expense.

Stocks

Stock is assessed annually and an impairment charge made where it is considered that the net realisable value is less than the carrying value.

4 Turnover

Turnover represents amounts invoiced to Barnsley Metropolitan Borough Council (BMBC) for the provision of housing management and construction services excluding value added tax during the year.

The management fee is agreed annually and received on a monthly basis. Construction Services invoice monthly for works undertaken under the Property, Repair and Improvement Partnership (PRIP) contract.

5 Government Grants (Other Operating Income)

Government grants are recognised when it is reasonable to expect that the grants will be received and that all related conditions will be met.

Other operating income includes a financial contribution from BMBC for the implementation of a new IT repairs system.

Berneslai Homes Limited

6 Operating Deficit

This is stated after charging:

	Year ended 31 March 24 £'000	Year ended 31 March 23 £'000
Depreciation of tangible assets	27	28
Contribution to BMBC Housing Growth Programme	619	3,047
<i>Auditor's remuneration:</i>		
Fees payable to the company's auditor for the audit of the financial statements	37	29
Fees payable to the company's auditor for other services - services relating to tax	5	11
Inventory recognised as an expense	2,223	2,123
	<hr/>	<hr/>

7 Other Operating Income

Other operating income comprises of the following Government Grants received in 2023/24 and BMBC contribution to new IT Repairs System.

	Year ended 31 March 24 £'000	Year ended 31 March 23 £'000
Education and Skills Grant	1	18
European Social Fund (ESF) - Tenants First Project	165	181
Kickstart Scheme	-	54
Housing Support & Multiply Grants	32	81
BMBC Contribution	863	871
Community Renewal Fund	9	125
UK Prosperity Fund	-	29
Grants from Suppliers	2	3
	<hr/>	<hr/>
	1,072	1,362

8 Interest Receivable

	Year ended 31 March 24 £'000	Year ended 31 March 23 £'000
Cash deposits held with the Bank and Money Market Funds	266	181
	<hr/>	<hr/>
	266	181

Berneslai Homes Limited

9 Staff Costs

	Year ended 31 March 24 £'000	Year ended 31 March 23 £'000
Wages and salaries	18,253	16,900
Social security costs	1,842	1,748
Other pension costs	1,835	1,884
	<u>21,930</u>	<u>20,532</u>

Average number of employees during the year:

	Year ended 31 March 24 No.	Year ended 31 March 23 No.
Customer & Estate Services	157	140
Assets & Regeneration	58	54
Construction Services	263	252
Senior Management and Corporate Services	58	64
	<u>536</u>	<u>510</u>

10 Directors' Emoluments

	Year ended 31 March 24 £'000	Year ended 31 March 23 £'000
Directors' emoluments	46	44
Total non executive directors' expenses in respect of qualifying services	<u>-</u>	<u>-</u>

There were no executive directors.

Emoluments disclosed above include £7,215 (2023: £12,008) paid to the highest paid director.

The Company did not make any contributions under pension arrangements on behalf of any directors (2023: nil).

11 Executive Officers Emoluments

	Year ended 31 March 24 £'000	Year ended 31 March 23 £'000
Executive Officers' emoluments	<u>709</u>	<u>577</u>

The executive officers are considered to be key management personnel under FRS 102.

Berneslai Homes Limited

12 Pension Obligations

Local Government Pension Scheme

Berneslai Homes Limited is a scheduled employer of the South Yorkshire Local Government Pension Scheme (LGPS) a funded defined benefit pension scheme. The Company entered into the scheme upon TUPE transfer of its staff from the Council. Under the guidance issued by the ODPM, the pension liabilities accrued at the time of the TUPE transfer of staff will remain with the Council.

The LGPS is a funded defined benefit scheme, with the assets held in separate trustee administered funds. The total contribution made for the year ended 31 March 2024 was £2,988,837 (2023: £2,926,927) of which employers' contributions totalled £1,802,667 and employees' contributions totalled £1,186,170.

The disclosures required under FRS 102 have been calculated by a qualified independent actuary, Hymans Robertson LLP. The date of the last full actuarial valuation was 31 March 2022.

The actuaries estimate that the net pension asset as at 31 March 2024 is £28,285,000 with an asset ceiling of £Nil (31 March 2022: asset £18,925,000). It is Berneslai Homes' intention to continue to contribute towards the scheme at the recommended contribution rate in future years.

The financial assumptions used for the purpose of the FRS 102 calculation as at 31 March 2024 were as follows:

	At 31 March 2024	At 31 March 2023
Pension increase rate (CPI)	2.75%	2.95%
Salary increase rate	3.35%	3.55%
Discount rate	4.85%	4.75%

Mortality assumptions

Life expectancy is based on the Fund's VitaCurves with improvements in line with the CMI 2022 model, with a 25% weighting of 2022, a 0% weighting of 2021 (and 2020) data, standard smoothing (Sk7), initial adjustment of 0.25% and a long term rate of improvement of 1.5% p.a. for both males and females. Based on these assumptions, the average future life expectancies at age 65 for the Employer are:

	2024 No. of years	2023 No. of years
Current Pensioners:		
Males	20.6	20.5
Females	23.6	23.7
Future Pensioners:		
Males	21.4	21.5
Females	25.0	25.2

*Figures assume members aged 45 as at the last formal valuation date.

Berneslai Homes Limited

Local Government Pension Scheme continued:

Asset Ceiling calculation and Prior Year restatement

In both the current and prior year the company's actuary have calculated that the company have a net current pension asset of £28,285,000 (2023 - £18,925,000). In both years the company's actuary have calculated the asset ceiling which can be recognised within the financial statements. The actuaries default methodology for the preparation of the asset ceiling has changed since 2023 due to the movement in auditor and practitioner views and as such the company have re-calculated the asset ceiling as at 31 March 2023.

In both years the Asset restriction calculation is based on the present value of future service costs (A) less the present value of future service contributions (B). The key difference in methodology is that in the prior year the present value was incorrectly calculated over the future working lifetime of active scheme members. This year, as the scheme is still open to new members, this has been changed to reflect an indefinite life.

The asset ceiling at 31st March 2023 has been restated to remove the asset ceiling adjustment of £3,715,000 as this is no longer required.

This restatement had the effect of increasing the net pension asset recognised by £3,715,000 from £15,210,000 to £18,925,000. This also increased the total equity as at 31 March 2023 by the same amount from £23,477,000 to £27,192,000 and increased the actuarial gain recognised on the pension scheme from £45,705,000 to £49,420,000.

Amounts recognised in the statement of financial position:

	2024 £'000	2023 £'000
Present value of funded obligations	(130,022)	(128,467)
Present value of unfunded obligations	(471)	(486)
Fair value of plan assets	158,778	147,878
	<u>28,285</u>	<u>18,925</u>
Asset Ceiling Adjustment, PY as restated	(28,756)	
Unrecognised past service cost	-	-
(Deficit) / Asset	<u>(471)</u>	<u>18,925</u>
Related deferred tax asset	-	-
Net (Liability) / Asset as restated	<u><u>(471)</u></u>	<u><u>18,925</u></u>

Analysis of the amount charged to income and expenditure account:

	2024 £'000	2023 £'000
Total service cost	(3,589)	(5,916)
Net Interest	858	(748)
Total operating charge	<u><u>(2,731)</u></u>	<u><u>(6,664)</u></u>

£3,589k charged (2023: £5,916k charged) to the operating surplus and £858k debited (2023: £748k credited) to other finance income and costs.

Berneslai Homes Limited

Local Government Pension Scheme continued:

Amounts recognised in the statement of total recognised surpluses and deficits

	2024 £'000	2023 £'000
Actuarial (loss) / gain relating to pensions	(18,507)	49,420

The company expects to contribute £1,767k to its defined benefit pension scheme in 2024/2025.

Changes in present value of defined benefit obligation:

	2024 £'000	2023 £'000
Opening defined benefit obligation	18,925	(25,716)
Service cost	(3,589)	(5,916)
Net Interest	858	(748)
Actuarial (loss) / gain	(18,507)	49,420
Employer contributions	1,842	1,885
Closing defined benefit obligation	<u>(471)</u>	<u>18,925</u>

Major categories of plan assets as a percentage of total plan assets:

	2024	2023
Equities	69%	68%
Bonds	21%	23%
Property	9%	8%
Cash	1%	1%

Amounts for current and previous four periods are as follows:

	2024 £'000	2023 £'000	2022 £'000	2021 £'000	2020 £'000
Present value of defined benefit obligation	(130,493)	(128,953)	(177,810)	(178,562)	(148,289)
Fair value of scheme assets	158,778	147,878	152,094	138,936	116,188
Asset ceiling adjustment	(28,756)	-	-	-	-
(Deficit)/Surplus on scheme	(471)	18,925	(25,716)	(39,626)	(32,101)

Berneslai Homes Limited

13 Tax on ordinary activities

Berneslai Homes Limited has been granted non trading status by HM Revenue & Customs. The directors have prepared the accounts based on this assumption.

13(a) Analysis of charge in period

	Year ended 31 March 24 £'000	Year ended 31 March 23 £'000
Current Tax:		
UK corporation tax on deficit for period	73	33
Adjustments in respect of prior periods	-	(7)
Total current tax (note 13b)	<u>73</u>	<u>26</u>
Deferred Tax		
Origination & reversal of timing differences	-	-
Total deferred tax	-	-
Total tax on deficit on ordinary activities	<u>73</u>	<u>26</u>
Tax on ordinary activities continued:		

13(b) Factors affecting tax charge for period

The tax assessed is lower than the standard rate of corporation tax in the UK of 25% (2023: 19%). The differences are explained below:

	2024 £'000	2023 £'000
Deficit on ordinary activities before tax	<u>(1,730)</u>	<u>(7,899)</u>
Deficit on ordinary activities multiplied by the standard rate of corporation tax 25% (2023: 19%)	(433)	(1,501)
Effects of:		
Expenses not deductible for tax purposes	11,769	9,035
Deferred tax not recognised	(1)	(4)
Income not taxable	(11,269)	(7,503)
Adjustments in respect of prior periods	-	(7)
Fixed asset differences	7	5
Remeasurement of deferred tax for changes in tax rate	-	1
	<u>73</u>	<u>26</u>

Provision for Deferred Tax

There is a potential deferred tax asset of £1K (2023: £1K) which is not provided for in these accounts as the directors do not believe that it is likely to reverse in the foreseeable future.

Berneslai Homes Limited

14 Tangible Assets

	Leasehold Improvements £'000	Fixtures + Fittings £'000	Total £'000
Cost or valuation			
At 1 April 2023	719	193	912
Additions	-	-	-
At 31 March 2024	<u>719</u>	<u>193</u>	<u>912</u>
Depreciation			
At 1 April 2023	650	155	805
Charged in year	14	13	27
At 31 March 2024	<u>664</u>	<u>168</u>	<u>832</u>
Net book value			
At 31 March 2024	<u>55</u>	<u>25</u>	<u>80</u>
At 31 March 2023	<u>69</u>	<u>38</u>	<u>107</u>

15 Debtors: amounts falling due within one year

	As at 31 March 24 £'000	As at 31 March 23 £'000
Trade debtors	11	44
Less provision for bad debts	(1)	(7)
BMBC debtors	4,401	4,863
Other debtors	506	660
Prepayments & accrued income	31	15
	<u>4,948</u>	<u>5,575</u>

The BMBC debtors are interest free and repayable on demand.

16 Stock

	As at 31 March 24 £'000	As at 31 March 23 £'000
Raw materials	782	704
	<u>782</u>	<u>704</u>

17 Creditors: amounts falling due within one year

	As at 31 March 24 £'000	As at 31 March 23 £'000
Trade creditors	1,714	1,635
BMBC creditors	521	1,684
Corporation Tax	66	26
VAT	791	839
Other tax and social security	412	383
Other creditors	299	326
Accruals & deferred income	366	410
	<u>4,169</u>	<u>5,303</u>

The BMBC creditors are interest free and repayable on demand.

18 Financial instruments

	As at 31 March 24 £'000	As at 31 March 23 £'000
Financial assets		
Financial assets that are debt instruments measured at amortised cost	<u>10,263</u>	<u>12,262</u>
Financial liabilities		
Financial liabilities that are debt instruments measured at amortised cost	<u>2,900</u>	<u>4,055</u>

Financial assets measured at amortised cost comprise cash and debtors (excluding corporation tax and prepayments).

Financial liabilities measured at amortised cost comprise creditors (excluding corporation tax, VAT, social security and deferred income).

19 Financial commitments

Operating lease commitments

The total payments which the company is committed to make under operating leases are as follows:

	2024 £'000	2023 £'000
Equipment, leases expiring:		
within one year	311	311
one to five years	1,554	1,554
beyond five years	621	932
	<u>2,486</u>	<u>2,797</u>

20 Related party transactions

Adriana Rrustemi and Gez Morrall who have been board members for part of the year, are resident in a property owned and maintained by the parent undertaking, Barnsley Metropolitan Borough Council. The residents have a standard tenancy agreement, are required to fulfil the same obligations, and receive the same benefits as other tenants.

The Company leases its Head Office based at Gateway Plaza from its parent Company and pays a rental charge of £310,796 per annum.

21 Parent undertaking

The company is a wholly owned subsidiary of Barnsley Metropolitan Borough Council, which is the largest and smallest group for which consolidated accounts are prepared. In the opinion of the directors this is the company's ultimate parent company and ultimate controlling party. Consolidated accounts are available from Barnsley Metropolitan Borough Council's website.



Core Services Directorate
Finance Business Unit
Neil Copley – Director & s151 Officer

Chair of the Board
Berneslai Homes Ltd
Gateway Plaza
PO Bos 627
Barnsley
S70 9FZ

My Ref:
Your Ref:
Date: 17th July 2024
Enquiries to: Vanessa Hunter
E-Mail: vanessahunter@barnsley.gov.uk

Dear Sirs,

REPRESENTATION LETTER IN RESPECT OF BERNESLAI HOMES LIMITED

This representation letter is provided in connection with your audit of the financial statements of Berneslai Homes Limited for the year ended 31 March 2024 for the purpose of expressing an opinion as to whether the financial statements give a true and fair view of the state of affairs of the company as of 31 March 2024 and of its profit and cash flow for the period 1 April 2023 to 31 March 2024 in accordance with Companies Act 2006.

I confirm, to the best of my knowledge and belief by having made appropriate enquiries, the following representations:

Management fee

The management fee payable to Berneslai Homes Limited, in respect of services provided to Barnsley Metropolitan Council, amounts to £16,029,660 for the period 1 April 2023 to 31 March 2024.

Intercompany balances

All amounts due to and payable by Barnsley Metropolitan Council as of 31 March 2024 in respect of services exchanged between Berneslai Homes Limited and the Council have been identified and notified to Berneslai Homes Limited so that accounting entries in relation to these can be considered complete. The amounts owing to Berneslai Homes are £4.418 million and amount due are £0.593 million.

Pension liabilities – FRS102

Under FRS102 the company must account for the net surplus or deficit arising from its share of the pension assets and liabilities in respect of its employees who are members of the South Yorkshire Pension Fund. As at the 31 March 2024, there was a net deficit of £471,000 in respect of the company's pension liabilities. Where the company does not have sufficient reserves to offset this deficit, the parent organisation, Barnsley Metropolitan Council undertakes to provide continuing financial support to enable the financial statements of Berneslai Homes Limited to be prepared on a going concern basis.

Company Reserves

£8.9M of Berneslai Homes surplus has been approved by the Board to be earmarked to contribute to Housing Growth in the Company and in the Council. As at the end March 2024 the Council have advised of a drawdown of £8.308K to contribute to the Council's Housing Growth expenditure. The earmarked reserves balance is not contractually committed and is billed in arrears.

Going concern and service agreement

The Council agreed a new five plus five-year extension to the Service Agreement with Berneslai Homes Limited with a commence date of 1 April 2021. We confirm based upon the information available at the date of signing this letter we have no reason to believe the Council will terminate this agreement prior to September 2025.

Yours Faithfully,



Neil Copley
Director of Finance and s151 Officer



Berneslai Homes Limited

Audit Completion: Year ending 31 March 2024
Report to the Audit Committee

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Welcome

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We have pleasure in presenting our Audit Completion Report to the Audit and Risk Committee. This report is an integral part of our communication strategy with you, a strategy which is designed to ensure effective two-way communication throughout the audit process with those charged with governance.

It summarises the results of completing the planned audit approach for the Year ended 31 March 2024, specific audit findings and areas requiring further discussion and/or the attention of the Audit and Risk Committee. At the completion stage of the audit, it is essential that we engage with the Audit and Risk Committee on the results of audit work on key risk areas, including significant estimates and judgements made by Management, critical accounting policies, any significant deficiencies in internal controls, and the presentation and disclosure in the financial statements.

This report contains matters which should properly be considered by the Board as a whole. We expect that the Audit and Risk Committee will refer such matters to the Board, together with any recommendations, as it considers appropriate.

We would also like to take this opportunity to thank the Management and staff of the Company for the co-operation and assistance provided during the audit.

Signed by:

6C315CA33A8C4C6...
Matt Whitehouse

Audit Director

11 September 2024



Matt Whitehouse
Director

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Samuel Esene
Audit Manager

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Overview

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This summary provides an overview of the audit matters that we believe are important to the audit of the financial statements for the Company for the Year ended 31 March 2024.

It is also intended to promote effective communication and discussion and to ensure that the results of the audit appropriately incorporate input from those charged with governance.

Overview

Our audit work is substantially complete and subject to the successful resolution of outstanding matters upon signing the financial statements we anticipate issuing an unmodified audit opinion on the financial statements for the year in line with the agreed timetable.

There were no significant changes to the planned audit approach and no additional significant audit risks have been identified.

No restrictions were placed on our work.

Audit report

We anticipate issuing an unmodified audit opinion on the financial statements.

Independence

We confirm that the firm and its partners and staff involved in the audit remain independent of the Company in accordance with the FRC's Ethical Standard.



The numbers

Executive summary

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Final Materiality

Materiality was determined based on 2% of Gross income which is consistent with the basis used in previous years

The materiality and triviality levels, as communicated in our planning report, were re-assessed at the preliminary stages of our audit fieldwork based upon year end balances and there were no changes to the basis of calculation of final materiality or clearly trivial levels from that reported in our planning report.

Unadjusted audit differences

We have not identified any audit adjustments which would impact on the net assets reported by the company. As noted on page 9 if the company adjusted its pension scheme assets to reflect up-to-date valuations this would result in the total assets and asset ceiling adjustment being adjusted by £750k but this would have no overall impact on the results recorded within the financial statements.

Audit scope

Our approach was designed to ensure we obtained the required level of assurance in accordance with ISA (UK). This objective has been achieved.



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As identified in our audit planning report we assessed the following matters as being the most significant risks of material misstatement in the financial statements. These include those risks which had the greatest effect on the overall audit strategy; the allocation of resources in the audit and the directing of the efforts of the engagement team. Although revenue recognition remained a significant risk, we have tightened the specific risk to relate to journals to revenue which we comment on further on page 8

Significant Audit Risk	Significant Management Judgement	Use of Experts Required	Unadjusted error reported	Adjusted error reported	Significant control findings reported	Specific Letter of Representation Point	Work complete at time of drafting
Management override	Yes	No	No	No	No	No	Yes
Revenue recognition	No	No	No	No	No	No	Yes
Elevated Audit Risk	Significant Management Judgement	Use of Experts Required	Unadjusted error reported	Adjusted error reported	Significant control findings reported	Specific Letter of Representation Point	Work complete at time of drafting
Pension Liability valuation	Yes	Yes	No	No	No	Yes	Yes
Calculation of pension asset ceiling	Yes	Yes	No	No	No	Yes	Yes
Provisions for legal liability	Yes	No	No	No	No	Yes	Yes
Moderate Audit Risk	Significant Management Judgement	Use of Experts Required	Unadjusted error reported	Adjusted error reported	Significant control findings reported	Specific Letter of Representation Point	Work complete at time of drafting
Going Concern	Yes	No	No	No	No	Yes	Yes

Management Override

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Risk description

- ▶ Under International Standards on Auditing (UK) 240, there is a presumed significant risk of management override of the system of internal controls.
- ▶ The primary responsibility for the detection of fraud rests with management. Their role in the detection of fraud is an extension of their role in preventing fraudulent activity. They are responsible for establishing a sound system of internal control designed to support the achievement of departmental policies, aims and objectives and to manage the risks facing the organization; this includes the risk of fraud.
- ▶ Our understanding is that the most likely areas where management override could take place are the posting of journals and in the judgements involved in accounting estimates within the financial statements.

Details

- ▶ We obtained a complete list of journals and, using information gathered during the audit and our understanding of the entity, we target tested those journals and adjustments that we considered may be inappropriate or unusual.
- ▶ We also reviewed journals and transactions outside what is considered the normal course of business.

- ▶ Key characteristics of the journal entries which we reviewed included journals posted without description, consideration of Benfords Law, review of postings with key words such as fraud or error and journals posted to revenue nominal accounts. We also reviewed board minutes and made enquiries of management to establish if there had been any significant transactions that appeared to have been outside the normal course of business.
- ▶ We reviewed accounting estimates, including those used in the assessment of going concern, fixed asset depreciation and judgement on bad debt recoverability.

Results

- ▶ Our work in this area is now complete and we have no issues which we need to bring to your attention

● Significant risk
Moderate risk
● Fraud risk
● Related controls identified to mitigate risk
● Significant Management estimates & judgements
Controls testing approach
● Data analytics testing approach
● Substantive testing approach



Revenue Recognition

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Risk description

- ▶ Under International Standard on Auditing 240 it is “The Auditor’s responsibility to consider fraud in an audit of financial statements”. There is a presumption that income recognition presents a fraud risk. We have identified the risk of material misstatement to be around the posting of fraudulent journals to the financial statements.

Details

- ▶ To address the significant risk, we have used our journal software to identify postings to revenue which were unusual or not inline with our expectations. When any such postings were identified we tested all such transactions to ensure that these were appropriate. No issues were identified.

Other revenue testing

- ▶ As part of our audit work, we have gained an understanding of the Company’s significant income streams (construction services and management fee) and observed the operation of relevant financial controls to prevent the loss of income and ensure that income is recorded in the correct period.
- ▶ We also made enquiries of management as to whether they are aware of any cases of fraud (including income related fraud) occurring during the year. We have not been made aware of any significant frauds that occurred during the year.
- ▶ The management fee has been agreed to a signed confirmation letter from BMBC and agreed to sales invoices and cash receipt. In

addition, all 12 monthly construction services invoices were obtained and confirmed as being appropriately recognized.

- ▶ We also separately considered revenue recognized around the year end to ensure that this had been correctly included in the appropriate period. No evidence of any misstatement has been identified.
- ▶ The revenue recognition policy for Berneslai Homes was reviewed to ensure it was in line with relevant accounting standards.

Conclusion

We are satisfied from our testing that appropriate accounting policies are being adhered to, cut off has been applied appropriately, and revenue is not materially misstated in the financial statements.

● Significant risk
Moderate risk
● Fraud risk
● Related controls identified to mitigate risk
Significant Management estimates & judgements
Controls testing approach
Data analytics testing approach
● Substantive testing approach



Pension liability and asset ceiling

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Risk description

- ▶ Berneslai Homes is a member of the South Yorkshire Local Government Pension Scheme (SYPF), a multi-employer defined benefit scheme.
- ▶ The valuation of the defined benefit pension scheme requires the use of several actuarial assumptions. There is a risk that incorrect actuarial assumptions may be used and that the SYPF scheme may not be appropriately accounted for and disclosed.

Details

As at 31 March 2024 the fair value of the pension asset as per the scheme actuary was £28.3m. This is made up of total assets of £159m and liabilities of £131m.

The accounting rules on the recognition of a pension surplus are complex and require detailed consideration and have become increasingly in focus in recent years due to a number of large surpluses which have arisen due to the changes in the underlying economic environment in the year.

FRS102 states that *If the present value of the defined benefit obligation at the reporting date is less than the fair value of plan assets at that date, the plan has a surplus. An entity shall recognise a plan surplus as a defined benefit plan asset only to the extent that it is able to recover the surplus either through reduced contributions in the future or through refunds from the plan.*

As such the company are required to consider to what extent the above pension surplus can be recovered. FRS102 contains very little detailed guidance so in such circumstances we consult IFRS in particular IFRIC 14. This limits the measurement of a net defined benefit asset to the lower of the surplus in the defined benefit plan and the asset ceiling. The asset ceiling is then defined as “the present value of any economic benefits available in the form of refunds from the plan or reductions in future contributions to the plan.

In the prior year we requested your actuary to calculate the value of the asset ceiling which was calculated at £15.2m and this was recognised within the financial statements. Over the last year the methodology on these calculations has been refined with the calculation now being calculated as the present value of future service costs less the present value of future contributions over an indefinite life span

The key difference between this methodology and that used in the prior year is that in the PY the asset was calculated using the PV over the future working lifetime of active scheme members. This year, as the scheme is still open to new members, this has been changed to reflect an indefinite life.

This new calculation basis has the following effects:

- ▶ As at 31 March 2024 - The asset ceiling is £Nil and so the pension asset has been completely restricted/de-recognised. There is an unfunded pension obligation of £471k indicated in the actuarial statement so the overall pension liability recognised this year is a liability of £471k
- ▶ In the PY, the asset ceiling would now be more than the net surplus. As such the previously recognised asset ceiling adjustment of £3.7m has been reversed and the prior year comparatives have been restated to correct this
- ▶ Our review of the year end liability and transactions for the year did not highlight any issues. The assumptions used for the actuarial calculations are consistent to those utilised by similar schemes. These are commented on further on page 10. In forming our conclusions, we engaged our own independent actuaries (Broadstone) to assess the reasonableness of the assumptions applied in calculating the scheme liability.
- ▶ We have worked with SYPF to obtain assurance over the company’s share of the scheme’s assets. This included reviewing the AAF controls reports for key custodian and investment managers and obtaining copies of the valuation statements directly to verify the valuation used in the calculation of your pension assets.
- ▶ In discussions with SYPF, In line with other pension schemes, it was noted that for some investments, the year end valuation was not used within the asset calculation with the latest available valuation being either 31 December 2023 or 30 September 2023. In these cases, the pension scheme have worked with their auditors to identify what the effect would be to update the valuations to the year- end valuation. This has been calculated as an increase in value of 0.48% of these assets or £750k. As the asset value has been restricted anyway via the asset ceiling this would have no impact on the total pension liability recognised but if corrected would lead to the total assets and asset ceiling adjustment being adjusted by this amount.

Discussion and conclusion

- ▶ We are satisfied that the treatment of the pension asset is in accordance with FRS 102, and that the accounting entries in respect of the movement in the scheme assets and liabilities during the year were made correctly.

Pension scheme financial and demographic assumptions

Risk 3 - Continued

Assumptions as reported at 31 March 2024

Financial Assumptions	Typical Minimum	Maximum	Most common	Impact on liability
Discount rate	4.83%	4.94%	4.86%	A higher discount rate would decrease the liability
		LGPS: 4.85%		
CPI inflation	2.56%	2.83%	2.76%	A higher CPI inflation rate would increase the liability
		LGPS: 2.75%		

The key estimates which drive the pension liability are discount rate and CPI inflation. Both of these are within our expectations and do not show any evidence of material misstatement. The salary increase rate has been set at 3.35%, this is employee specific so difficult to benchmark but should set at a rate at least equal to CPI to ensure that expected salaries are in line with CPI as otherwise this can lead to staff retention issues.

Assumptions as reported at 31 March 2023

Financial Assumptions	Typical Minimum	Maximum	Most common	Impact on liability
Discount rate	4.5%	5.0%	4.73%	A higher discount rate would decrease the liability
		LGPS: 4.75%		
CPI inflation	2.1%	3.1%	2.77%	A higher CPI inflation rate would increase the liability
		LGPS: 2.95%		

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Going Concern

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Risk description

- ▶ The directors are required to state whether they consider it appropriate to adopt the going concern basis of accounting in preparing the financial statements and identify any material uncertainties to the Company’s ability to continue to do so over a period of at least twelve months from the date of approval of the financial statements.
- ▶ In order to provide the above disclosure, management have prepared a FY24 budget forecast and provided information on the 10-year contract extension with BMBC regarding the continuation of the repairs contract, which funds the company’s construction services operations and the management fee.

Discussion

- ▶ The increasing inflation, significant higher cost bases, shortage of materials and labour continues to impact companies’ financial statements to varying degrees. For Berneslai Homes, the two main income streams are the management services fee from Barnsley Metropolitan Borough Council (BMBC), and income from Construction Services invoiced to BMBC for works undertaken under the Property, Repairs and Improvement Partnership (PRIP) contract. Both income streams have historically been relatively stable, and whilst we note that there are still a number of years under contract for both streams thereby providing some certainty around future income streams, BMBC do though have the right to end these after 5 years. the continuing impact of the above-mentioned economic situation on BMBC may result in downward pressure on future revenues for Berneslai Homes.

- ▶ Management believe that the company is a viable going concern and that there is no material uncertainty in this regard. The Company’s Construction Services PRIP contract with BMBC covers the period from 2020/21 to 2029/30, and the Company also have a management service agreement with the Council from 1 April 2021. The management service contract is for a 10-year period from 2021/22 to 2030/31, thereby securing the Company’s income streams for the foreseeable future.
- ▶ Together with cash and short-term cash equivalents amounting to £5.7m as at 31 March 2024 and overall net asset position as at year end, the directors are therefore satisfied that the Company is a viable going concern for at least the next 12 months from the date of approval of these financial statements, which have thus been prepared on a going concern basis.

Conclusion

- ▶ We concur with management’s assessment that the entity is going concern. There are no further significant points for discussion with or reporting to the committee.

Significant risk
● Moderate risk
Fraud risk
● Related controls identified to mitigate risk
● Significant Management estimates & judgements
Controls testing approach
Data analytics testing approach
Substantive testing approach



Other audit matters

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Nature of Other Matter	Comment
<p>Provision for legal liability</p>	<p>We are aware of ongoing personal damages claim in which Berneslai Homes have been listed as the second defendant. As noted in our planning report there is therefore a risk that as the outcome of this claim is uncertain and a provision could be required in the financial statements to account for any liability arising from this claim.</p> <p>After discussion with Berneslai Homes Limited management and BMBC, it can be seen that there is currently no provision within the financial statements against this case. Following the hearing of the case at the end of September, we understand that the case will not be concluded until October after the date of signing the financial statements.</p> <p>As such, we have assessed the need for any provision being required in the financial statements at this stage to ensure that any provision is appropriate and materially accurate. We further consulted with BMBC and also reviewed the summary of the court proceedings and Barrister view on the court proceedings to date.</p> <p>FRS102 states that an entity should recognise a provision only when there is a constructive or legal obligation which is probable and the amount of the obligation can be estimated reliably. In this instance we understand that the legal advice is that at this stage that a liability is not probable nor can the obligation be estimated reliably. As such we agree that no provision should be made within the financial statements</p> <p>We also considered the requirement to include a contingent liability disclosure within the financial statements. We have concluded that the liability (if any) would be immaterial to the financial statements and therefore there is no requirement to include such a liability within the financial statements.</p>
<p>Designation of resources to BMBC</p>	<p>It has been agreed between Berneslai Homes and its parent BMBC that allocated resources of the former are to be allocated to assist with strategically aligned activities of the council. An amount of £8.3m has been advised to be drawn by the council as expenditure in the year as part of a total of £8.9m being allocated going forward. The £8.3m drawdown is in the years up to 23/24 and was not all paid during the year.</p> <p>The company have previously obtained relevant legal advice from Trowers and Hamlins, which outlines the relevant criteria required in order for these amounts to be recorded as payments/expenditure through the income statement (rather than as a distribution through equity). This advice ultimately concluded that in order for these amounts to be classified as expenditure, and not as a distribution, they must show how the project is 'strategically aligned' to the objectives of Berneslai Homes, as defined in the Company's Memorandum.</p> <p>We examined this matter in depth in our prior year audit testing, and as there have been no changes in the circumstances, we are comfortable over the decision made to record the payments as expenditure in the income statement.</p> <p>We have obtained clarification from BMBC, in their notification of continued support letter provided to the Company, that the allocated amount going forward has not been committed and is at the discretion of the Company's directors.</p> <p>Based on the information outlined above, we concur with the treatment adopted.</p>

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Fraud

Whilst it is the directors have ultimate responsibility for the prevention and detection of fraud, we are required to obtain reasonable assurance that the financial statements are free from material misstatement, including those arising as a result of fraud. Our audit procedures did not highlight any instances of fraud. We will also seek confirmation from you whether you are aware of any known, suspected or alleged frauds, in the letter of representation.

Laws and regulations

Some of the key regulations are employment and health and safety regulations, as well as the Companies Act and Data Protection Legislation. We have discussed compliance with management and noted that, with the exception of an incident with the death of a tenant which took place in previous years as noted on page 11 all relevant laws and regulations have been complied with in the year.

Related parties

Whilst you are responsible for the completeness of the disclosure of related party transactions in the financial statements, we are also required to consider related party transactions in the context of fraud as they may present greater risk for management override or concealment of fraud.

We did not identify any significant matters in connection with related parties.

Directors are requested to complete certificates of confirmation of related party transactions in preparation for the audit. We have completed a review of the Directors and their other interests and have not identified any additional related party transactions that require disclosure. Given the stable nature of the organisation and the high degree of oversight by management, we consider that the likelihood of omitting disclosures is low risk.

We have reviewed the Directors' disclosures and confirmed that the financial statements have been updated where relevant.

Contingencies

We request input from the Audit & Risk Committee on any recent claims against the Company. We are not aware of any such claims which would have a material impact on the financial statements.

Any other matters

We will report to you on any other matters relevant to the overseeing of the financial reporting process. Where applicable this includes why we consider a significant accounting practice that is acceptable under the financial reporting framework not to be the most appropriate.

Control environment: Significant deficiencies

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We are required to report to you, in writing, significant deficiencies in internal control that we have identified during the audit. These matters are limited to those which we have concluded are of sufficient importance to merit being reported to the Audit and Risk Committee.

As the purpose of the audit is for us to express an opinion on the Company's financial statements, you will appreciate that our audit cannot necessarily be expected to disclose all matters that may be of interest to you and, as a result, the matters reported may not be the only ones which exist.

As part of our work, we considered internal control relevant to the preparation of the financial statements such that we were able to design appropriate audit procedures. This work was not for the purpose of expressing an opinion on the effectiveness of internal control.

No control deficiencies were noted as a result of our work for the year. An update on control observation raised in prior year is included below.

Area	Observation & implication	Recommendation made in the prior year	Management response
Journals	<p>Although transactions are reviewed both individually and at month end, there is no record of review of all journals data.</p> <p>In addition, document dates can be manually entered. The management must take care when entering dates as transposition errors can occur.</p> <p>It also makes it difficult for management to track the actual dates of postings given that individuals can manipulate journals that are posted at the weekend or outside of normal working hours.</p>	Management should consider whether a process could be implemented where all posted journal and reviewed and evidence of this review is maintained.	Risk is limited as SAP roles to input journals are restricted and a period on SAP is automatically closed at the last working day of the month therefore no prior periods can be amended. The exception to this is year-end where period 13 is used to finalise the year-end figures which is monitored by the Finance Manager and closed once all year end journals are entered. We are agile working therefore postings outside "normal" working hours and weekends are not unusual to our working practices.

Independence

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We confirm that the firm, and the engagement team conducting the audit comply with relevant ethical requirements including the FRC's Ethical Standard and are independent of the Company.

We also confirm that we have obtained confirmation of independence from external audit experts involved in the audit comply with relevant ethical requirements including the FRC's Ethical Standard and are independent of the Company

We have not identified any other relationships or threats that may reasonably be thought to bear on our objectivity and independence.

Should you have any comments or queries regarding any independence matters we would welcome their discussion in more detail.

Fees summary for year ended 31 March 2024	£'000
Audit fee for period ending 31 March 2024	37,000
Non-audit services (see summary below)	4,672
Total fees	41,672
Non-audit services	
Corporation tax compliance	3,150
iXBRL tagging services	1,522
Total non-audit fees	4,672



Additional matters we are required to report

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	Issue	Comments
1	Significant difficulties encountered during the audit.	No exceptions to note.
2	Written representations which we seek.	We enclose a copy of our draft representation letter.
3	Any fraud or suspected fraud issues.	No exceptions to note.
4	Any suspected non-compliance with laws or regulations.	No exceptions to note.
5	Significant matters in connection with related parties.	No exceptions to note.

Outstanding matters

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We have substantially completed our audit work in respect of the financial statements for the year ended 31 March 2024

The following matters are outstanding at the date of this report and we expect to be concluded on the day of signature of the financial statements.

1. Completion of final subsequent events review
2. Receipt of signed letter of representation





LETTER OF REPRESENTATION

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BDO LLP
Eden Building
Irwell Street
Salford
Manchester
M3 5EN

Dear Sirs,

Financial Statements Berneslai Homes Limited for the year ended 31 March 2024

We confirm that the following representations given to you in connection with your audit of the company's financial statements for the year ended 31 March 2024 are made to the best of our knowledge and belief, and after having made appropriate enquiries of other directors and officials of the company.

We have fulfilled our responsibilities as directors for the preparation and presentation of the financial statements as set out in the terms of the audit engagement letter, and in particular that the financial statements give a true and fair view of the financial position of the company as at 31 March 2024 and of the results of the company's operations and cash flows for the year then ended in accordance with the applicable financial reporting framework and for making accurate representations to you.

We have provided you with unrestricted access to persons within the entity from whom you determined it necessary to obtain audit evidence. In addition, all the accounting records of the company have been made available to you for the purpose of your audit as agreed in the terms of the audit engagement and all the transactions undertaken by the company have been properly recorded in the accounting records and reflected in the financial statements. All other records and related information, including minutes of all management and shareholders' meetings have been made available to you.

Going concern

We have made an assessment of the company's ability to continue as a going concern for a period ended being at least twelve months from the date on which the financial statements were approved for release. The board reviewed and approved the associated forecasts and financial statements disclosures.

As a result of our assessment, we consider that the company is able to continue to operate as a going concern and that it is appropriate to prepare the financial statements on a going concern basis.

We have evaluated the suitability and feasibility of our future plans as disclosed in the financial statements, and we confirm that nothing comes to our attention which may hinder the suitability or feasibility of our future plans.

In making our assessment we did not consider there to be any material uncertainty relating to events or conditions that individually or collectively may cast significant doubt on company's ability to continue as a going concern.

Laws and regulations

In relation to those laws and regulations which provide the legal framework within which our business is conducted, and which are central to our ability to conduct our business, we have disclosed to you all instances of possible non-compliance of which we are aware and all actual or contingent consequences arising from such instances of non-compliance.



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Post balance sheet events

There have been no events since the balance sheet date which either require changes to be made to the figures included in the financial statements or to be disclosed by way of a note. Should any material events of this type occur, we will advise you accordingly.

Fraud and error

We are responsible for adopting sound accounting policies, designing, implementing and maintaining internal control, to, among other things, help assure the preparation of the financial statements in conformity with generally accepted accounting principles and preventing and detecting fraud and error.

We have considered the risk that the financial statements may be materially misstated due to fraud and have identified no risks.

We have disclosed to you all instances of fraud or suspected fraud that we have knowledge of, involving:

- management;
- employees who have significant roles in internal control; or
- others where the fraud could have a material effect on the financial statements.

We have disclosed to you all allegations of fraud or suspected fraud affecting the financial statements that have been communicated by employees, former employees, analysts, regulators or any other party.

Misstatements

We attach a schedule showing uncorrected misstatements that you identified, which we acknowledge that you request we correct. Where appropriate we have explained our reasons for not correcting such misstatements below.

In our opinion, the effects of not correcting such identified misstatements are, both individually and in the aggregate, immaterial to the financial statements as a whole.

Related party transactions

We have disclosed to you the identity of all related parties and all the related party relationships and transactions of which we are aware. We have appropriately accounted for and disclosed such relationships and transactions in accordance with the requirements of the applicable accounting framework.

To the best of our knowledge there are not any undisclosed side agreements in any of the related party transactions of the entity.

Other than as disclosed in note 20 to the financial statements, there were no loans, transactions or arrangements between the company and the company's directors or their connected persons at any time in the year which were required to be disclosed.

The disclosures in the financial statements concerning the controlling and ultimate controlling party of the company are accurate.

Carrying value and classification of assets and liabilities

We have no plans or intentions that may materially affect the carrying value or classification of assets or liabilities reflected in the financial statements.



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Accounting estimates

We confirm that the methods, significant assumptions and the data used in making the accounting estimates and the related disclosures are appropriate to achieve recognition, measurement or disclosure that is in accordance with the applicable financial reporting framework.

In relation the following specific accounting estimates namely estimates that from part of the derivation of the defined benefit pension liability we confirm;

- that the significant judgments made in making the accounting estimates have taken into account all relevant information of which we are aware.
- that we have considered the consistency and appropriateness in the selection or application of the methods while preparing estimates.
- we have used the appropriate assumptions and data, to the best of our knowledge in making the accounting estimates.
- that the assumptions appropriately reflect our intent and ability to carry out specific courses of action on behalf of the entity, when relevant to the accounting estimates and disclosures.
- that disclosures related to accounting estimates, including disclosures describing estimation uncertainty, are complete and are reasonable in the context of the applicable financial reporting framework.
- that appropriate specialized skills or expertise has been applied in making the accounting estimates.
- that no subsequent event requires adjustment to the accounting estimates and related disclosures included in the financial statements.

Litigation and claims

We have disclosed to you all known actual or possible litigation and claims whose effects should be considered when preparing the financial statements and these have been accounted for and disclosed in accordance with the requirements of accounting standards.

We have disclosed to you all known contingencies and guarantees whose effect should be considered when preparing the financial statements and these have been disclosed and accounted for and disclosed in accordance with the requirements of accounting standards.

Other

We confirm that the valuation of the pension asset and liability is calculated with reference to market levels and the most relevant demographic and financial assumptions as of 31 March 2024.



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We have restated the financial statements to correct a material misstatement in the prior period financial statements as disclosed in Note 12 to the financial statements which affects the comparative figures as agreed with you.

Confirmation

We have informed you of all the documents that we expected to issue that may comprise other information. The financial statements and any other information obtained by you prior to the date of the auditor's report are consistent with one another, and the other information does not contain any material misstatements.

We confirm that the financial statements are free of material misstatements, including omissions.

We acknowledge our legal responsibilities regarding disclosure of information to you as auditors and confirm that so far as we are aware, there is no relevant audit information needed by you in connection with preparing your audit report of which you are unaware. Each director has taken all the steps that they ought to have taken as a director in order to make themselves aware of any relevant audit information and to establish that you are aware of that information.

Yours faithfully

(Signed on behalf of the board of directors)

Date:

The matters raised in our report prepared in connection with the audit are those we believe should be brought to your attention. They do not purport to be a complete record of all matters arising. This report is prepared solely for the use of the company and may not be quoted nor copied without our prior written consent. No responsibility to any third party is accepted.

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Matt Whitehouse

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[m: +44\(0\)7870 409086](tel:+44(0)7870409086)



APPENDIX D



Creating great homes
and communities with
the people of Barnsley.

www.berneslaihomes.co.uk

Chief Executive, Amanda Garrard,
Berneslai Homes, P.O.Box 627, Barnsley S70 9FZ.

BDO LLP
Eden Building
Irwell Street
Salford
Manchester
M3 5EN

Dear Madam/Sirs

Financial Statements Berneslai Homes Limited for the year ended 31 March 2024

We confirm that the following representations given to you in connection with your audit of the company's financial statements for the year ended 31 March 2024 are made to the best of our knowledge and belief, and after having made appropriate enquiries of other directors and officials of the company.

We have fulfilled our responsibilities as directors for the preparation and presentation of the financial statements as set out in the terms of the audit engagement letter, and in particular that the financial statements give a true and fair view of the financial position of the company as at 31 March 2024 and of the results of the company's operations and cash flows for the year then ended in accordance with the applicable financial reporting framework and for making accurate representations to you.

We have provided you with unrestricted access to persons within the entity from whom you determined it necessary to obtain audit evidence. In addition, all the accounting records of the company have been made available to you for the purpose of your audit as agreed in the terms of the audit engagement and all the transactions undertaken by the company have been properly recorded in the accounting records and reflected in the financial statements. All other records and related information, including minutes of all management and shareholders' meetings have been made available to you.

Going concern

We have made an assessment of the company's ability to continue as a going concern for a period ended being at least twelve months from the date on which the financial statements were approved for release). The board reviewed and approved the associated forecasts and financial statements disclosures.

As a result of our assessment, we consider that the company is able to continue to operate as a going concern and that it is appropriate to prepare the financial statements on a going concern basis.

We have evaluated the suitability and feasibility of our future plans as disclosed in the financial statements, and we confirm that nothing comes to our attention which may hinder the suitability or feasibility of our future plans.



Berneslai Homes Limited is a company controlled by Barnsley Metropolitan Borough Council. A company limited by guarantee, registered in England and Wales, number 4548803. **Registered Office:** Gateway Plaza, off Sackville Street, Barnsley S70 2DJ.

For details on how your information is used, how we maintain the security of this and your rights to access the information we hold about you, please refer to www.berneslaihomes.co.uk/information-and-privacy.

In making our assessment we did not consider there to be any material uncertainty relating to events or conditions that individually or collectively may cast significant doubt on company's ability to continue as a going concern.

Laws and regulations

In relation to those laws and regulations which provide the legal framework within which our business is conducted, and which are central to our ability to conduct our business, we have disclosed to you all instances of possible non-compliance of which we are aware and all actual or contingent consequences arising from such instances of non-compliance.

Post balance sheet events

There have been no events since the balance sheet date which either require changes to be made to the figures included in the financial statements or to be disclosed by way of a note. Should any material events of this type occur, we will advise you accordingly.

Fraud and error

We are responsible for adopting sound accounting policies, designing, implementing and maintaining internal control, to, among other things, help assure the preparation of the financial statements in conformity with generally accepted accounting principles and preventing and detecting fraud and error.

We have considered the risk that the financial statements may be materially misstated due to fraud and have identified no risks.

We have disclosed to you all instances of fraud or suspected fraud that we have knowledge of, involving:

- management;
- employees who have significant roles in internal control; or
- others where the fraud could have a material effect on the financial statements.

We have disclosed to you all allegations of fraud or suspected fraud affecting the financial statements that have been communicated by employees, former employees, analysts, regulators or any other party.

Misstatements

We attach a schedule showing uncorrected misstatements that you identified, which we acknowledge that you request we correct. Where appropriate we have explained our reasons for not correcting such misstatements below.

In our opinion, the effects of not correcting such identified misstatements are, both individually and in the aggregate, immaterial to the financial statements as a whole.

Related party transactions

We have disclosed to you the identity of all related parties and all the related party relationships and transactions of which we are aware. We have appropriately accounted for and disclosed such relationships and transactions in accordance with the requirements of the applicable accounting framework.

To the best of our knowledge there are not any undisclosed side agreements in any of the related party transactions of the entity.

Other than as disclosed in note 20 to the financial statements, there were no loans, transactions or arrangements between the company and the company's directors or their connected persons at any time in the year which were required to be disclosed.

The disclosures in the financial statements concerning the controlling and ultimate controlling party of the company are accurate.

Carrying value and classification of assets and liabilities

We have no plans or intentions that may materially affect the carrying value or classification of assets or liabilities reflected in the financial statements.

Accounting estimates

We confirm that the methods, significant assumptions and the data used in making the accounting estimates and the related disclosures are appropriate to achieve recognition, measurement or disclosure that is in accordance with the applicable financial reporting framework.

In relation the following specific accounting estimates namely estimates that from part of the derivation of the defined benefit pension liability we confirm:

- that the significant judgments made in making the accounting estimates have taken into account all relevant information of which we are aware.
- that we have considered the consistency and appropriateness in the selection or application of the methods while preparing estimates.
- we have used the appropriate assumptions and data, to the best of our knowledge in making the accounting estimates.
- that the assumptions appropriately reflect our intent and ability to carry out specific courses of action on behalf of the entity, when relevant to the accounting estimates and disclosures.
- that disclosures related to accounting estimates, including disclosures describing estimation uncertainty, are complete and are reasonable in the context of the applicable financial reporting framework.
- that appropriate specialized skills or expertise has been applied in making the accounting estimates.
- that no subsequent event requires adjustment to the accounting estimates and related disclosures included in the financial statements.

Litigation and claims

We have disclosed to you all known actual or possible litigation and claims whose effects should be considered when preparing the financial statements and these have been accounted for and disclosed in accordance with the requirements of accounting standards.

We have disclosed to you all known contingencies and guarantees whose effect should be considered when preparing the financial statements and these have been disclosed and accounted for and disclosed in accordance with the requirements of accounting standards.

Other

We confirm that the valuation of the pension asset and liability is calculated with reference to market levels and the most relevant demographic and financial assumptions as of 31 March 2024.

We have restated the financial statements to correct a material misstatement in the prior period financial statements as disclosed in Note 12 to the financial statements which affects the comparative figures as agreed with you.

Confirmation

We confirm that the above representations are made on the basis of enquiries of management and staff with relevant knowledge and experience (and, where appropriate, of inspection of supporting documentation) sufficient to satisfy ourselves that we can properly make each of the above representations to you.

Other Information

We have informed you of all the documents that we expected to issue that may comprise other information. The financial statements and any other information obtained by you prior to the date of the auditor's report are consistent with one another, and the other information does not contain any material misstatements.

We confirm that the financial statements are free of material misstatements, including omissions.

We acknowledge our legal responsibilities regarding disclosure of information to you as auditors and confirm that so far as we are aware, there is no relevant audit information needed by you in connection with preparing your audit report of which you are unaware. Each director has taken all the steps that they ought to have taken as a director in order to make themselves aware of any relevant audit information and to establish that you are aware of that information.

Yours faithfully

(Signed on behalf of the board of directors)

Date:

Summary of uncorrected misstatement



Creating great homes and communities
with the people of Barnsley

Report Title	Compliance Policy amendments <i>following internal & external audit recommendations</i>	Confidential	No
Report Author	Arturo Gulla Executive Director of Property Services	Report Status	For Approval
Report To	Board 26th September 2024	Officer Contact Details	Kerry Hamilton kerryhamilton@barneslaihomes.co.uk

1. Executive Summary

The purpose of this report is to provide the Board with an update on both the following amended and new Compliance Policies:

- Fire Safety Policy
- Building Safety Policy
- Fire and Building Safety Management Plan
- Lift Safety Policy

Fire & Building Safety

Pennington Choices were commissioned to assist with developing and implementing the required building safety cases for our three in-scope high rise buildings. The process enabled both Pennington Choices and Barneslai Homes to identify areas of improvement within policies and procedures through:

- Consolidating our Fire Safety Policy and Fire Risk Assessment (FRA) Policy and supporting procedures into one Policy and Management plan to provide clarity around strategic and operational delivery.
- A new Building Safety Policy to be implemented to evidence culture and best practise in line with the Building Safety Act 2022.

	<p><u>Lift Safety</u></p> <p>An audit carried out by the MBC Corporate assurance team in April 2024 identified the following amendments:</p> <ul style="list-style-type: none"> • Roles and responsibilities needed to be updated to reflect the correct contract management which has recently shifted from Barnsley Property Services to Berneslai Homes.
<p>2. Recommendation/s</p>	<p>It is recommended that the Board note, comment on and approve the following amended and new Compliance Policies:</p> <ul style="list-style-type: none"> • Fire Safety Policy • Building Safety Policy • Fire and Building Safety Management Plan • Lift Safety Policy <p><i>Each policy needs to be signed by the Chair of the Board and a Board member.</i></p>

3. Background

3.1 In order to comply with legislation, best practice and health and safety guidance it is imperative that Berneslai Homes continues to review property compliance policies, ensure they are kept up to date and where required new policies implemented. Board will be aware that the Compliance Policies were previously approved in May 2020 and reviewed in April 2021 following an internal audit by the BMBC corporate assurance team.

3.2 Furthermore, the latest audit completed by the BMBC corporate assurance team was on Lift Safety in April 2024. Subsequently, the ***Lift Safety Policy document have been reviewed and updated.***

3.3 Berneslai Homes also worked with Pennington Choices to create building safety cases for our 3 in scope high rise buildings throughout the 2023-24 financial year and a desktop audit was carried out by them again in March 2024 which recommended that policies, procedures and process maps be reviewed and updated, alongside creating a new Building Safety Policy to address the findings identified during both reviews.

A new Building Safety Policy has been developed.

The Fire Safety Policy, FRA Policy & Fire Safety Management Plan have been consolidated.

4. **Key Amendments to Compliance Policies**

4.1 Building Safety Policy – Working with Pennington Choices Consultancy to create our Building Safety cases and the implementation of the Building Safety Act 2022 it was recommended that Berneslai Homes needed to evidence culture and best practise within Building Safety.

The review date of the policy is every two years or each time there is a change to operations or working environments.

4.2 Fire Safety Policy – Working with Pennington Choices Consultancy to create our Building Safety cases it was recommended that we consolidate the Fire Safety Policy, Fire Risk Assessment Policy and supporting procedures to provide clarity around strategic and operational delivery. A Fire Safety Policy has been developed to include elements from the previous policies whilst ensuring all new applicable legislation and regulatory requirements are met. The elements covered in the new policy are:

- Policy Aim
- Scope/ Introduction
- Roles and responsibilities
- Legal and Statutory Requirements
- Fire Safety Management Plan
- Data
- Fire Risk Management
- Fire Door Inspections
- Inspections, testing, Maintenance, and servicing
- Monitoring and Assurance
- Competence
- Communication
- Non-Compliance/ Escalation Process

The review date of the policy is every two years or each time there is a change to operations or working environments.

4.3 Fire and Building Management Plan – Working with Pennington Choices Consultancy to create our Building Safety cases it was recommended we review our procedures to provide clarity around strategic and operational delivery and consolidate into a management plan. The management plan includes all standard operating procedures for both Fire and Building Safety. The review date of the plan is every two years or each time there is a change to operations or working environments.

4.4 Lift Safety Policy – Following an internal audit by the BMBC corporate assurance team in April 2024, changes were made to the terminology regarding roles and responsibilities with regards to contract management of lifts following recent changes moving this from Barnsley Property Services back to Berneslai Homes. The next review date of the Policy is in June 2026.

5. Customer Voice/Impact

The Fire and Building Safety Policies and Management plan have been to both the Building Safety Resident Engagement Group, and the Building Safety Project board which has a strong tenant representation.

6. Risk and Risk Appetite

7.

Operational/Strategic Risk Type	Name	Risk Appetite
Strategic	Failure to meet increasing and changing regulatory requirements	Averse
Strategic	The health and safety of tenants and staff	Averse

8. Strategic Alignment

The report aligns with Berneslai Homes Strategic priorities:

- Hearing Customers
- Keeping tenants Safe

The report supports the Barnsley 2030 strategic priorities:

- Healthy Barnsley
- Learning Barnsley
- Growing Barnsley
- Sustainable Barnsley

9. Data Privacy

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

10. Consumer Regulatory Standards

This falls within the remit of to the Consumer Safety and Quality Standard as it monitors our ability to provide our tenants with quality, safe accommodation.

11. Other Statutory/Regulatory Compliance

Provides assurance for the following legislation

- Building Safety Act 2022
- Fire Safety Act 2021
- Fire Safety Regulations
- LOLER and PUWER Regulations

12. Financial

Annual compliance budgets include Fire Risk Assessment £30,000. Fire Safety Budget spend for 23/24 was £2,117,125.44. The budget for 24/25 is £2,164,961 and Lift maintenance service and repairs £159,772.

13. Human Resources and Equality. Diversity and Inclusion

N/A

14. Sustainability Implications

N/A

15. Associated Background Papers

N/A

16. Appendices

Appendix A - Fire Safety Policy
Appendix B – Building Safety Policy
Appendix C – Fire and Building Safety Management Plan
Appendix D – Lift Safety Policy

17. Glossary

FRA – Fire Risk Assessment
BMBC – Barnsley Metropolitan Borough Council
NEC – IT System
C365 – IT System

BERNESLAI HOMES POLICIES & PLANS



berneslai
homes

Fire Safety Policy

Document Control

Title	<i>Fire Safety Policy</i>
Responsible Officer	<i>Daniel Crossley Head of Repair, Maintenance and Building Safety</i>
Author	<i>Kerry Hamilton Fire and Asbestos Compliance Manager</i>
Subject	<i>Fire Safety</i>
Information Asset Owner	<i>Daniel Crossley Head of Repair, Maintenance and Building Safety</i>
Approved by	<i>Executive Management Team</i>
Approved date	<i>September 2024</i>
Review date	<i>September 2026</i>
Review responsibility	<i>Fire and Asbestos Compliance Manager</i>
Applicable to	<i>All teams within the Berneslai Homes</i>
DPIA Completion Date	<i>N/A</i>
EIA Completion Date	<i>N/A</i>
Regulatory Framework	<i>The Regulatory Reform (Fire Safety) Order 2005 (FSO) and Fire Safety Act 2021</i>
Legislative Duties	<i>The Regulatory Reform (Fire Safety) Order 2005 (FSO) is the main piece of legislation governing fire safety in buildings in England and Wales.</i>

Revision History

Date	Version	Author	Comments
<i>June 24</i>	<i>0.1</i>	<i>Kerry Hamilton Fire and Asbestos Compliance Manager</i>	<i>Draft Version</i>
	<i>1.0</i>		<i>1.0 Date that the document was approved</i>

Consultation and Distribution

Type	Details
Consultation	<i>Building Safety Team Tenant Panel Board</i>
Distribution	<i>Operational staff involved in the process</i>

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1. Policy Aim

To manage fire safety, both in our premise and during work activities to ensure the safety of everyone who we have a duty of care to under the Regulatory Reform (Fire Safety Order) 2005 (RRFSO) and all other relevant legislation and guidance.

2. Introduction

Berneslai Homes (BH) provides housing services across Barnsley. BH manage a diverse portfolio of around 18,000 properties on behalf of Barnsley Metropolitan Borough Council (BMBC).

The purpose of this policy is to set out how BH will ensure all reasonable measures are taken to protect the health and safety of tenants, residents, staff, visitors, contractors and members of the public from fire in premises for which BH have responsibility.

The key objective of this policy is to describe how BH will manage fire risk as far as is reasonably practicable. This includes:

- the identification of BH specific responsibilities for each of its assets.
- the creation of a Fire Safety Management Plan (FSMP) and associated employee training to provide guidance on the implementation of the commitments contained in this policy.
- the creation of a building safety policy to provide responsibilities for the management of higher risk buildings.
- the key activities (for example, risk assessment, testing, servicing) that we undertake.
- Personal centred risk assessments will be conducted by competent persons, reviewed annually.
- maintaining competent employees and contractors.
- communication internally and with residents and other stakeholders; and
- how BH and BMBC Board, as duty holder, will delegate responsibility for the implementation of policy, monitor its effectiveness and receive assurance of compliance.

3. Scope

This policy is relevant to all BH employees, tenants, residents, contractors and other persons or other stakeholders who may work in, occupy, visit, or use BH managed premises, or who may be affected by activities, services or works conducted on behalf of BH.

The policy should be used by all to ensure they understand the obligations placed upon BH to maintain a safe environment for residents and employees, within the home of each resident, and within all communal areas of buildings and other properties we own and/or manage. Adherence to this policy is mandatory.

4. Legal and Statutory Requirements

The application of this policy will ensure compliance with the regulatory framework and consumer standards (Home Standard) for social housing in England, which was introduced by the Homes and Communities Agency in April 2012 and is now applied by the Regulator of Social Housing (RSH).

However, the principal legislation applicable to this policy is the Regulatory Reform (Fire Safety) Order 2005, Fire Safety Act 2021 and Fire Safety (England) Regulations 2022. These place a duty on the Responsible Person to take general fire precautions to ensure, as far as is reasonably practicable, the safety of the people on their premises and in the immediate vicinity.

The Regulatory Reform (Fire Safety) Order 2005, Fire Safety Act 2021 and Fire Safety (England) Regulations 2022 apply to all in scope premises in England, including the common parts of blocks of flats and houses in multiple occupation (HMOs), as well as any buildings containing two or more sets of domestic premises. They do not apply to private homes in other tenures, such as individual houses or individual flats in a block.

Our primary objective is to ensure that residents, contractors, employees, and visitors remain safe in our premises (both domestic and non-domestic). Failure to properly discharge our legal responsibilities may also result in

- prosecution under the Regulatory Fire Safety Order 2005, Health and Safety at Work Act 1974 or Corporate Manslaughter and Corporate Homicide Act 2007.
- regulatory intervention by the RSH or Care Quality Commission (CQC).
- reputational damage, and
- loss of confidence by stakeholders in the organisation.

This policy also operates within the context of the following legislation:

- Building Safety Act 2022 apply to the management of High-Rise Buildings
- Housing Act 2004

- Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1999
- Management of Houses in Multiple Occupation (England) Regulations 2006
- Licensing and Management of Houses in Multiple Occupation and Other Houses (Miscellaneous Provisions) (England) Regulations 2006
- Gas Safety (Installation and Use) Regulations 1998
- The Furniture and Furnishings (Fire Safety) Regulations 1988
- The Health and Safety (Safety Signs and Signals) Regulations 1996
- The Building Regulations 2010: Approved Document B Fire Safety
- Electrical Equipment (Safety) Regulations 2016
- Construction (Design and Management) Regulations 2015
- Data Protection Act 2018
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
- Homes (Fitness for Human Habitation) Act 2018

5. Roles and Responsibilities

Detailed roles and responsibilities will be documented within the FSMP and associated operational guidance. The overarching roles and responsibilities are as follows:

The **Executive Management Team (EMT)** has overall responsibility for approving the policy, delegating responsibility for its implementation, monitoring its effectiveness at high level and receiving assurance of compliance. The **EMT** will also ensure that there is a system in place that provides adequate protection from detrimental treatment or victimisation for anyone making disclosures that they genuinely believe to be necessary in the interests of fire safety.

The **Audit and Risk Committee and BMBC** will be responsible for ensuring that the EMT receives the assurance it requires.

The **Chief Executive Officer (CEO)** will be responsible for the implementation of the policy and will allocate responsibilities within the Executive team and ensure that there is adequate management, monitoring, and visibility of performance.

The **Executive Director of Property Services** will take overall responsibility for the delivery of the policy commitments described in the data, key activities to manage risk and communications sections of this policy ensuring all performance are aligned to the risk and that areas of non-performance are recorded, reported, and escalated where required. All potential / material non-compliance will be reported to the CEO/ EMT irrespective of whether this relates to a Key Performance Indicator (KPI).

The **Head of Repair, Maintenance and Building Safety** will take overall responsibility for planning and implementing the assurance activities described in this policy and for the effective upward reporting of performance.

The **Fire and Asbestos Compliance Manager** will lead on delivering the requirements of the policy ensuring the organisation meets all its obligations.

All **Heads of Services** will take responsibility for ensuring that employees and contractors they employ have the skills, knowledge, and expertise necessary to deliver the commitments outlined in this policy. Head of services will identify Competent Person(s) (internal or external) suitable for the delivery of specific tasks.

Competent Person(s) will have a responsibility to identify any concerns about their own competency for the task that they are being asked to undertake and recommend additional competency is procured where required.

6. Fire Safety Management Plan (FSMP)

We will maintain a FSMP and associated operational guidance which will:

- Provide additional guidance on how the commitments outlined within this policy will be implemented.
- Provide clear lines of responsibility for the management of fire risk.
- Set out key operational processes.
- Ensure that a clear and consistent process is in place to obtain access to properties where this is required. This will include proactive assessment of available data for relevant information about the resident, to help gain access (disability, vulnerability, local connections and so on). Tenancy enforcement action will be used where required.
- Maintain a process for dealing with unsafe situations or incident.

All employees who have roles identified in the FSMP will receive associated training appropriate to their role.

7. Data

We acknowledge that to meet our obligations we must maintain a robust approach to identifying the assets and components for which we have responsibility. We will:

- Maintain a core up-to-date master database of all buildings that will indicate where we have a responsibility to provide fire risk assessments (FRA). We will also set out which properties require fire safety servicing and maintenance regimes (for example fire alarms, emergency lighting, sprinklers, and smoke/ heat detection).

- We will operate a robust process to manage all changes to stock, including property acquisitions and disposals, to ensure that properties are not omitted from fire safety programmes and the programme remains up to date.
- Where a requirement for an FRA exists, hold full electronic copies of the current and previous FRAs along with key reportable and auditable information from the same, including but not limited to the unique property reference (UPRN), property designation, construction type, building management, shared responsibilities, risk profile, evacuation strategy, date of last risk assessment, review frequency and date of next risk assessment.
- Where fire safety equipment exists, hold reportable and auditable information including but not limited to UPRN; type of equipment, manufacturers' requirements, and instructions (where available), associated testing / servicing frequencies, last date completed and next date due. Records of each activity / equipment type will be held in accordance with our Records Retention Schedule. These will generally be held electronically but there may be instances where a hard copy is kept on site and, in this instance, additional controls will be in place as detailed in the Fire Safety Management Plan (FSMP).
- Maintain current and auditable records of remedial works arising from the FRAs or other fire safety related inspection or testing. The records will include address and risk profile of the property, detail of the work item required,
- priority and target completion date, person responsible, completion date and associated sign off, and evidence of completion.
- Where we have no responsibility for a fire safety activity described in this policy, but have one or more residents living within a block where one may be required, we will write to the responsible person on an annual basis asking for written confirmation that:
 - they are fully aware of all relevant legislation and their obligations.
 - all relevant activity, including but not limited risk assessment, inspection, testing, remedial works, and maintenance, has been undertaken by a person competent to do so and is not overdue.
 - they are in full compliance with all relevant legislation; and
 - we have been informed of any material issues relating to resident health and safety.
- Where we do not receive an adequate response, we will take reasonable steps to follow this up. Further details will be contained within the FSMP. Records will be kept for the current and previous years.
- Maintain an electronic record of prescribed information for every in-scope higher risk building over 18m high which will be detailed in the Building Safety Policy.
- Maintain records of all fire safety related training undertaken by staff.

- Ensure robust processes and controls (detailed within the FSMP) are in place to provide and maintain appropriate levels of security for all fire safety related data.

8. Fire Risk Management

We will undertake suitable and sufficient FRAs in accordance with the Regulatory Reform (Fire Safety) Order 2005 and record the significant findings. We will undertake recommended remedial work within the timescales set by the Competent Person who completed the FRA.

The basic FRA will be a Type 1 which will be escalated to a Type 2, 3 or 4 based on the recommendations of the Fire Risk Assessor. For a full definition of 'Type 1 to 4' refer to the Government Environment Housing, Planning and Waste (EHPW) Fire Safety in Purpose Built Blocks of Flats guide.

We will undertake new FRAs in line with the recommendations in the FRA. FRAs will be renewed on or before the date recommended by the FRA programme completed by the Competent Person. These timescales are set by the risk factors of the building.

We will review FRAs, no matter what the risk category, following any of the events below:

- a fire, near miss or threat of arson.
- the introduction of new work practices.
- works affecting the means of escape or alarm systems.
- structural or material changes to the building or its use, and
- changes in legislation (or significant changes to guidance).

We will comply fully with Article 22 of the RRFSO and ensure that where we are considered jointly responsible for a property or common area, we will share our FRAs with other relevant parties and co-operate with them, so far as is practicable to ensure the safety of relevant persons without compromising both parties' obligations under the lease in place for the premises.

FRA Recommendations and Actions

We will ensure there is a robust process in place for the management and monitoring of all recommendations and actions arising from FRAs and further investigations.

All remedial actions arising from the FRA or further investigations will have clear

completion targets agreed by the Competent Person undertaking the FRA. Any proposed changes to the agreed completion targets will be documented, agreed by Berneslai Homes Competent Person, and reported to the EMT for agreement. The decision will be recorded and reported within the KPIs to ensure clear visibility.

All fire safety remedial work should be conducted in accordance with the relevant British Standard, approved code of practice or associated good practice guidance. Any contractors undertaking specialist fire safety remedial works should be third party accredited where appropriate.

The fire risk assessment will be monitored in accordance the timescales set within the FRA from completion until remedial works have been completed.

In Planned works following FRAs and further investigations may be monitored as distinct projects outside of general remedial actions, and where appropriate, shall be subject to third-party audits.

All in planned works actions will be undertaken in accordance with the CDM regulations and Building Safety Gateways.

Evacuation

We will ensure each building has an evacuation strategy stated clearly within the FRA. The evacuation strategy will be agreed with the competent person undertaking the FRA, however as general guide:

- We operation a 'stay put' procedure this will depend on the construction type, fire systems and risk rating of the building. The stay put policy may change based on instructions of the fire and recuse service during an emergency.
- Currently we have one converted accommodation within our housing stock where we carried an FRA to review the evacuation procedure and any other factors to be considered due to the conversion.
- Any shops and community premises must evacuate in the event of fire or once the fire alarm sounds.
- Personal centred risk assessments will be carried out to determine what excavation needs are required on all residents which request one or it has been identify by either a member of staff or the fire and rescue services, they will be reviewed annually and made available to the fire and rescue service in the event of evacuation further detailed within the FSMP.

Further investigations

We will undertake further investigations where these are required due to particular concerns related to fire safety within a property. This may include, but is not limited to, investigations into external wall systems, balconies, compartmentation, and fire doors. These investigations will typically be recommended by the FRA, the Fire and Rescue

Service or initiated where we are not satisfied there are appropriate assurances around the design, installation or maintenance of a property or component.

Resident commissioned work

We will maintain a consent process for any resident commissioned works. In buildings that are subject to an FRA, the proposed work will be evaluated by a Competent Person to consider if there is a foreseeable impact in relation to fire safety. Approval will not be unreasonably withheld although consent may be refused, or conditions imposed where appropriate.

Where unauthorised work with the potential to impact fire safety is discovered, we will take the appropriate action to remove or remedy. The cost of doing so may be recovered from the resident.

9. Fire Door Inspections

We will undertake audits/ inspections of communal fire doors, and flat entrance doors, where the Fire Safety Act 2021 and Building Safety Act 2022 require us to do so.

10. Inspections, testing, maintenance, and servicing

We will establish, manage, and monitor programmes to deliver inspection, testing, maintenance and servicing of all fire safety assets within our properties in accordance with all relevant standards and manufacturer's recommendations. This will include completion of all essential remedial works identified during these activities.

11. Monitoring and Assurance

Monitoring

The following Performance Indicators (PIs) and KPIs will be reported to the EMT, Barnsley council, Audit and Risk at the frequencies which will be outlined in our Service agreement:

- buildings with a valid FRA renewed within its due date, as a percentage of total buildings requiring an FRA.

- remedial actions that are overdue, as a percentage of total outstanding remedial actions.
- buildings with no outstanding and overdue remedial actions, as a percentage of total buildings subject to an FRA.
- buildings with fire safety systems / equipment present where all systems / equipment has been tested / maintained in accordance with this policy, as a percentage of total buildings with fire safety systems / equipment.
- number of notices received by the Fire and Rescue Service in the reporting period.
- number of notices from the Fire and Rescue Service that are overdue, as a percentage of total outstanding notices; and
- number of safety occurrences, including any reported fires and fire safety related occurrence reporting (for example to the Health and Safety Executive or Regulator for Social Housing or the Building Safety Regulator) during the reporting period.
- Where relevant information is available, we will benchmark our performance against other organisations to ensure the highest standards of service delivery.

Assurance

The following assurance activity will be undertaken:

- Internal checking, independent of the Operational teams, to provide additional assurance around the accuracy of data and reporting.
- Internal audit to provide independent assurance on the operation and effectiveness of controls. Frequency agreed as part of the Internal Audit Programme and reported to the EMT.

12. Competence

It is not possible to briefly define competence requirements for all roles and activities outlined in this policy. In many areas, competence will be assessed based on skills, knowledge, and experience, as opposed to a single qualification or standard. As defined above in section 4.1, Heads of service will evaluate competence within their areas of responsibility and Competent Person(s) are required to highlight the limits of their competence.

Specific areas of competence relating to risk assessment, servicing and maintenance activity are listed within the FSMP, along with a procedure outlining the reasonable steps

we will take to ensure the competence of those carrying out work who are not under our direct control.

13. Communication

We will encourage fire safety by the following actions:

- provide a copy of an FRA or evidence of fire equipment servicing to a relevant resident within 15 days when reasonably requested to do so.
- inform residents of the importance of fire safety on a regular basis, through the provision of information through our website, newsletters and leaflets and information at sign-up.
- maintain a clear approach to gaining access to conduct surveys and undertake works and be clear that enforcement action may be taken when it is necessary to do so.
- communicate with residents through appropriate 'Fire Action' signage.
- maintain a clear complaints process and monitor and record complaints that indicate a risk to a fire safety; and
- communicate with leaseholders and shared owners annually to remind them of the importance of undertaking periodic electrical and gas safety checks.
- we will communicate with employees through induction training, fire drills, appropriate signage and the Employee Hub.
- engage in a regime of regular and proactive communication with the Fire and Rescue Service, to ensure good lines of communication and operational familiarity.
- we will with engage with BH resident groups to ensure all resident feel included and safe.
- Tenant Satisfaction Measures (TSMs) are a set of consumer standards set by the Regulator of Social Housing (RSH). They provide RSH with an overview of how social housing providers are performing and allow residents to hold landlords to account. The Fire Safety checks will be monitored within our Building Safety Scorecard and C365 compliance systems

14. Non-Compliance/ Escalation Process

Our definition of non-compliance is: any incident which has the potential to result in a potential breach of legislation or regulatory standard, or which causes a risk to health or safety. All non-compliance issues will be reported and escalated as soon as possible, and no later than 24 hours after the incident occurred or becoming aware of it.

Any non-compliance issue identified at an operational level will be formally reported to the Fire and Asbestos Compliance Manager (or nominated deputy) in the first instance, who will agree an appropriate course of corrective action with the Head of Repair, Maintenance and Building Safety who in turn will report details of the same to the EMT.

In cases of serious non-compliance, EMT and Barnsley Council will consider whether it is necessary to disclose the issue to the Regulator of Social Housing as required by the regulatory framework, or any other relevant organisation such as the Health and Safety Executive.

15. Reasonable Adjustments

We will support the needs of our diverse resident by making reasonable adjustments to building safety processes, which could be a physical change or change in work practices to avoid any disadvantage to a resident in accessing this policy. Examples of reasonable adjustments include:

- We will provide information in appropriate alternative formats (e.g. large print, coloured paper, Braille etc)
- We will communicate through a representative.
- We will allow more time than we usually for someone to provide information we need (where it is lawful to do so).
- We will provide additional support such as sign language interpreter or translator
- We will use plain language or Easy Read services
- We will meet resident in person in suitable location that meets their needs
- We will support comfort breaks or rest breaks during meetings
- Responding to complaints in a shorter timescale

This policy can be requested upon request and we can do the following

- Change colours, contrast levels and font size.
- Access the policy from smart phone, tablet, laptop or PC

16. Equality, Diversity and Inclusion

We will ensure equal and fair access to our services; we will do this by taking into consideration the individual needs of our tenants, their family or other persons living with them. We will ensure that individual needs are considered throughout the fire safety process and make reasonable adjustments where necessary. We will treat people fairly and with dignity and respect.

We monitor fire safety to ensure we have complied with our Equality, Diversity, and Inclusion Strategy 2022-25.

All staff are trained in Equality, Diversity, and Inclusion to embed understanding about where we may need to adapt normal policies, procedures, and ways of working to accommodate resident's individual needs. This is mandatory training which is monitored by our Organisational Development Team.

Our Equality, Diversity and Inclusion Strategy meets our duties under the Equality Act 2010 (the Act) is about the following:

Equality - Of access to opportunities.

Diversity – Recognise and celebrate differences.

Inclusion – Belonging and acceptance, feeling valued for who you are.

17. Related Documents

This section sets out several links to government and industry guidance, legislation and a number of related policies and procedures. Building Safety Act guidance and supporting sites:

The Building Safety Act: - GOV.UK

www.gov.uk

Building safety leaseholder protections: guidance for leaseholders - GOV.UK

www.gov.uk

Remediation of non-ACM buildings - GOV.UK

www.gov.uk

Developer remediation contract - GOV.UK

www.gov.uk

Fire safety and high-rise residential buildings (from 1 August 2021) - GOV.UK

www.gov.uk

Building Safety Regulator - Building safety - HSE Architects Registration Board - GOV.UK

www.gov.uk

Construction Products Regulation in Great Britain - GOV.UK

www.gov.uk

NHOS - The New Homes Ombudsman Service Fire Safety Act 2021 - GOV.UK

www.gov.uk

Fire Safety (England) Regulations 2022 - GOV.UK

www.gov.uk

Responsible Person and Duty Holder: roles and fire safety responsibilities - GOV.UK

www.gov.uk

Tenant Satisfaction Measures - Summary of RSH requirements (accessible) - GOV.UK

www.gov.uk

Legislation:

Building Safety Act 2022 (legislation.gov.uk)

Building Act 1984 (legislation.gov.uk)

The Higher-Risk Buildings (Descriptions and Supplementary Provisions) Regulations 2023 (legislation.gov.uk)

Defective Premises Act 1972 (legislation.gov.uk)

The Regulatory Reform (Fire Safety) Order 2005 (legislation.gov.uk)

Fire Safety Act 2021 (legislation.gov.uk)

The Fire Safety (England) Regulations 2022 (legislation.gov.uk) Related NHG Policy

Related Berneslai Homes Policies and Procedures:

Building Safety Policy

Fire and Building Safety Management Plan

Asbestos Policy

Asbestos Management Plan

Adaptation Policy

Compliant Policy

Damp, Mould and Disrepair Policy

Repair and Maintenance Policy

BERNESLAI HOMES POLICIES & PLANS



berneslai
homes

Building Safety Policy

Document Control

Title	<i>Building Safety Policy</i>
Responsible Officer	<i>Daniel Crossley Head of Repair, Maintenance and Building Safety</i>
Author	<i>Kerry Hamilton Fire and Asbestos Compliance Manager</i>
Subject	<i>Building Safety within our higher risk buildings</i>
Information Asset Owner	<i>Daniel Crossley Head of Repair, Maintenance and Building Safety</i>
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EIA Completion Date	N/A
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Legislative Duties	<i>The Building Safety Act 2022, The Regulatory Reform (Fire Safety) Order 2005 (FSO) and the Fire Safety Act 2021</i>

Revision History

Date	Version	Author	Comments
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	1.0		<i>1.0 Date that the document was approved</i>

Consultation and Distribution

Type	Details
Consultation	<i>Building Safety Team Resident Engagement Panel Building Safety Project Board</i>
Distribution	<i>Operational staff involved in the process</i>

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1. Policy Aim

The policy is to ensure we have the necessary measures and controls in place to comply with the Building Safety Act 2022

2. Introduction

Berneslai Homes (BH) provides housing services across Barnsley. BH manage higher risk building on behalf of Barnsley Metropolitan Borough Council (BMBC) of which three building are over 18 meters and there are 11 independent living schemes.

The purpose of this policy is to set out how BH will ensure all reasonable measures are taken for all High-Rise Residential Buildings (HRRB's) that fall under the scope of the Building Safety Act 2022 to:

- Prevent the spread of fire
- Protect against the risk of structural collapse of the building; and
- Ensure we engage with our customers when building/ refurbishing / maintaining buildings under the Act.

The key objective of this policy is to describe how BH will manage building safety risk as far as is reasonably practicable. This includes:

- Registration of the three High rise buildings.
- Building Safety Cases and Reports for all higher risk buildings.
- Gateways 1, 2 & 3 will be followed in line with the effective obligations.
- The principle of 'The Golden Thread' will be followed, supported by appropriate systems and processes.
- An effective Resident Engagement Strategy to ensure communication internally and with residents and other stakeholders.
- Any 'Mandatory Occurrences*' are reported to the Building Safety Regulatory (BSR) as defined in the building Safety Act 2023 Part 4 Higher risk buildings Section 87.
- The identification of BH and BMBC specific responsibilities under the principle accountable person and accountable person and how the implementation of policy, monitor its effectiveness and receive assurance of compliance.
- Working in accordance with the Fire Safety Policy and Fire Safety Management Plan (FSMP).
- Maintaining competent employees and contractors.

3. Purpose and Scope

This policy sets out our approach to ensuring our buildings are safe and meet regulatory requirements set out in the Building Safety Act 2022 (referred to as ‘the Act’) and its related secondary legislation. The Act received Royal Assent and became law on 28 April 2022 with secondary legislation coming into force over a two-year transitional period (see Appendix A).

This policy outlines how we:

- Follow new design and construction standards
- Meet our commitment to keep residents safe
- Engage with residents and share building safety information with them
- Ensure qualifying leaseholders are protected from building safety defect costs
- Hold those responsible for building safety defects to account
- Work with regulators and provide them the information they need

The Act introduces several reforms to ensure homes across England are safer. It specifically sets out requirements related to the design, construction, and management of ‘higher risk buildings’, which are defined as residential buildings at least 18 metres or seven storeys high and containing two or more residential units.

The reforms and requirements will be managed through the creation of three new regulatory bodies:

- the Building Safety Regulator
- the National Regulator of Construction Products
- the New Homes Ombudsman

The requirements of the Act broadly introduce several key principles, and two main areas of reform:

Design and construction: Reforms providing new guidance and standards for the design and construction industry by way of amendments to the Building Act 1984 and the introduction of the Building Safety Regulator.

Occupation: Reforms providing new guidance and standards for the housing industry during a building’s occupation overseen by the Building Safety Regulator. These will ensure building safety standards and resident engagement in blocks classified as ‘higher risk buildings’ are being met.

4. Definitions

The Act:

The Building Safety Act 2022, which became law in April 2022. The Act was developed following Dame Judith Hackitt's independent review of building regulations and fire safety, commissioned after the Grenfell Tower tragedy in 2017.

It introduces wide scale reforms to support building safety across the industry through design, construction, and management of residential blocks classed as higher risk buildings.

Accountable person (AP) or Principal accountable person (PAP):

If a building has more than one accountable person, the accountable person who owns the building, or is legally responsible for the structure and exterior of the building will be the principal accountable person. The PAP's key duty is to prevent and reduce the severity of building safety incidents relating to fire or structural failure in such buildings. An accountable person (AP) is either a person or organisation that owns or is responsible for repairing any of the common parts of the building, or a person or organisation required under the terms of a lease, or by an enactment, to repair or maintain any part of the common parts

Building assessment certificate:

The key document required by the principal accountable person (PAP) when a higher risk building (HRB) is occupied. After an HRB has been registered with the Building Safety Regulator, the regulator will request the PAP to submit several prescribed documents. These will include a safety case report, an HRB-specific, resident engagement strategy, a mandatory occurrence reporting strategy for reporting significant risks to the regulator, and a signed agreement between the PAP and any other relevant accountable persons in the building that appropriate processes for the identification, management and resolution of building safety risks are in place. Once the regulator is satisfied, they will provide a building assessment certificate to the PAP which will need to be displayed in the building and renewed every five years.

Building Safety Case (BSC):

The body of evidence to demonstrate that fire and structural risks within a higher risk building are being identified, escalated, and resolved, or managed and monitored adequately on an ongoing basis. Management and review of a building's safety case is formally overseen by an appointed building safety manager (BSM) on behalf of the principal accountable person. A summary of the BSC in the form of a safety case report will be submitted to the Building Safety Regulator under specific conditions.

Building Safety Fund:

A government-led fund that aims to protect leaseholders from the cost of addressing fire-safety risks caused by unsafe non-ACM cladding systems on high-rise residential buildings. The fund is supported by the building safety levy.

Building Safety Levy:

A levy put in place by government on developers of higher risk buildings in England designed to raise revenue for the replacement of defective cladding, in addition to remediating any other historical building safety defects.

Building Safety Manager (BSM):

Building safety managers are not a specific requirement of the Act, but they are an important introduction to support the requirements of the principal accountable person, the development of building safety cases and the introduction of specific engagement strategies for individual higher risk buildings. The role is designed to support the identification and management of building safety risks and to provide oversight of relevant processes involved in the management of higher risk buildings across the business.

Building Safety Regulator (BSR):

The regulatory arm of the Health and Safety Executive (HSE) for building safety across design, construction and occupation introduced in the Building Safety Act 2022. The Building Safety Regulator will monitor industry performance to inform priorities, set direction, facilitate improvement in competence of both industry and the building control profession, and influence their operational standards. The Act provides regulators with stronger enforcement powers and has increased the penalty for a breach of building regulations under section 35 of the Building Act 1984 to a maximum penalty of an unlimited fine and/or two years in prison. We will ensure all requirements set out under the Act are met and that we respond to requests from the Building Safety Regulator when required.

Duty Holders:

An appointed person responsible to maintain standards and quality that is conducive to good health and safety and quality of work in relation to a higher risk building.

Fire Safety Act:

The Fire Safety Act 2021 clarifies the scope of building safety measures set out in the Fire Safety Order 2005. It highlights how the order applies to the structure, external walls (including cladding and balconies), and individual flat entrance doors of multi-occupied residential buildings. The requirements of the Building Safety Act 2022 are in addition to those of the Fire Safety Act 2021 and subsequent Fire Safety (England)

Regulation 2022. An example of an area which has a level of crossover between the Fire Safety Act and Building Safety Act is the roles of the 'responsible person' and 'duty holders', which broadly correlate to the principal accountable person and relevant accountable person.

Gateways:

A set of three submission and approval gateways overseen by the new Building Safety Regulator required for the design and construction of higher risk buildings. Gateway 1 (planning approval) came into force on 1 August 2021, with both gateway 2 (handover from planning to construction) and gateway 3 (completion of construction) came into force in October 2023.

The Golden Thread:

A principle for storing, managing, and sharing building information and documents over a building's lifecycle, from design and construction through to occupation and disposal. The Golden Thread ties directly into the body of evidence needed to create and maintain building safety cases

Higher Risk Building (HRB):

Defined in the Act as a residential building that is at least 18 metres or seven storeys high and contains two or more residential units. Secondary legislation further defining such buildings came into force on 6 April 2023. All HRBs will need to be registered with the Building Safety Regulator (BSR) by the principal accountable person, have a dedicated engagement strategy and building safety case, and adhere to the principles of the Golden Thread.

Regularisation:

Building work regularisation refers to the process of certifying building works that have been conducted without building regulation approval. The process enables the submission of a retrospective application relating to previously unauthorised works through the submission and review of prescribed documents. The government intends to apply the current regularisation procedure to higher risk buildings, with the Building Safety Regulator as the building control authority, rather than the local authority.

5. Key Principles

Several key principles of the Act apply across both design and construction, and occupation:

Higher Risk Buildings (HRBs)

Where applicable under the requirements of the Act, we are taking reasonable measures to ensure that relevant duty holders of our HRBs in England will:

- conform to duty holder requirements and competencies through design, construction, and occupation
- conform to construction product requirements through construction, refurbishment, and remediation
- conform to mandatory occurrence reporting requirements through construction and occupation
- conform to construction control plan and change control requirements through construction, refurbishment, and remediation
- conform to Golden Thread requirements for managing and sharing building information through design, construction, and occupation.
- conform to the gateway submission and approval process through design and construction
- have a valid completion certificate or partial completion certificate before handover into occupation
- have an identified principal accountable person at handover and through occupation • register HRBs with the Building Safety Regulator before occupation
- have a valid building assessment certificate clearly displayed in the relevant HRB through occupation, updating them every five years
- have a dedicated engagement strategy through occupation
- have a dedicated building safety case through occupation
- submit safety case reports to the Building Safety Regulator when required through occupation

Approved Construction Products

We will put in place appropriate governance to ensure our contractors use approved products as set out by the National Regulator of Construction Products. This regulator has been set up to provide information and oversight of product standards applied through design, construction, refurbishment, and remediation.

The Golden Thread

We are undertaking reasonable measures to implement the requirements and principles of the Golden Thread for storing, managing, and sharing building information and

documents over a higher risk building's lifecycle. The Golden Thread will apply from design and construction, through to occupation and disposal. It constitutes a 'single source of truth' for a higher risk building's safety information, and ties directly into requirements for the creation and management of building safety cases.

Mandatory Occurrence Reporting

We have a mandatory occurrence reporting procedure and process in place to inform the Building Safety Regulator of 'safety occurrences' related to fire and structural safety issues in our higher risk buildings. The reporting criteria and process for mandatory occurrence reporting will be set out in further guidance from the regulator. Mandatory occurrence reporting will be supported with the development of a building safety management policy.

Holding Developers to Account

The Act includes a new section 2A to the Defective Premises Act which updates the period under which defect claims to developers can be made. The change extends the usual limitation period (the time a valid claim can be made) from six years to 15 years for claims that accrue after the Act took effect (28 April 2022), and 30 years retrospectively for claims that accrued before. The change, combined with the government's requirement for large scale developers to sign a developer remediation contract, which forces developers responsible for defects to agree to fix them or face significant consequences, means we have a greater ability to hold developers to account. This will support our process for the remediation of building safety defects as well as leaseholder protections (see section 5.9).

Enforcement

We will act swiftly in response to enforcement measures imposed by the Building Safety Regulator through design, construction, and occupation: Design and Construction: The following enforcement changes apply to the design and construction of all buildings, including higher risk buildings:

- An increased penalty for a breach of building regulations to a maximum penalty of an unlimited fine and/or two years in prison.
- Expansion of section 35 of the Building Act 1984 so that it applies not only to breach of provisions of building regulations, but also to breach of individual requirements imposed under building regulations.
- Amendments to section 36 of the Building Act 1984 to extend the time limit to take action to correct non-compliant work under this section to 10 years and for the Building Safety Regulator as a building control authority to have powers under this section.
- The Building Safety Regulator and local authorities can issue compliance and stop notices against non-compliant work. Failure to comply with either notice will be a criminal offence, with a maximum penalty of up to two years in prison and an unlimited fine.

The methods of enforcement will be set out in our internal development toolkit subject to the transitional timeline (see Appendix A).

Occupation

- The following enforcement changes apply to occupied higher-risk buildings (HRBs):
- The Building Safety Regulator will be able to issue compliance notices against an HRB's principal accountable person or any relevant accountable person
- Notices will require identified issues to be rectified within a set date
- Where non-compliance has or will lead to imminent danger to people in and around the building, the Building Safety Regulator can issue them with an 'urgent action notice'
- Failure to comply with notices, without reasonable excuse, will carry a maximum penalty of an unlimited fine and/or two years in prison.

The methods of enforcement will be set out in our internal building safety toolkit subject to the transitional timeline (see Appendix A).

Appeals

Where disputes arise over decisions relating to higher risk buildings, the first stage is informal discussion and mediation between the parties. Following that, in most cases, there is an internal review and appeals process provided by the Building Safety Regulator. If this cannot resolve matters, specified regulatory decisions are appealable to the First tier Tribunal. The methods of appeals will be set out in our internal building safety toolkit subject to the transitional timeline (see Appendix A):

6. Design and Construction

Areas developed to meet the requirements of the Act through design and construction are subject to the transitional timeline (see appendix A) including:

Duty holders

We will take reasonable measures to ensure that updates relating to the role and competency of duty holders through design and construction introduced in the Act are met. The key duty holders through design and construction set out in the Act are modelled on the duty holder roles under the Construction Design and Management regulations 2015

(CDM). CDM and Building Safety Act duty holders are independent and may be assigned to different individuals or organisations. The key duty holders through design and construction set out in the Act are,

- the client
- the principal designer
- Designers
- the principal contractor
- Contractors

The main changes introduced in the Act relate to the role of the principal designer, principal contractor, and requirements for the client to ensure the competence of relevant duty holders. Requirements for relevant duty holders to meet the provision of prescribed documents required for each gateway submission will be put in place.

Building Safety Levy

We will take reasonable measures to meet requirements for the building safety levy and provision of associated costs.

Gateways

We will take reasonable measures to ensure we meet requirements for the 'submission and approval' gateway regime related to the design and construction of higher risk buildings subject to the transition timeline (see Appendix A). The gateways process is overseen by the Building Safety Regulator with additional requirements for the submission of prescribed documents at each stage.

Gateway 1 (planning approval) came into force on 1 August 2021 and follows the pre-existing planning approval process. The Building Safety Regulator acts as an additional consultee through gateway 1.

Gateways 2 (handover from planning to construction) and gateway 3 (completion of construction) came into force in 1st October 2023.

The Building Safety Regulator acts as the building control authority through these gateways. When a higher risk building has successfully passed through gateway 3 approval, a valid completion certificate (or partial completion certificate in the event of phased occupation) is issued by the Building Safety Regulator, and the building is ready for handover review, registration and occupation. An expected 12-week determination period for review and issuing of completion certificates and partial completion certificates is expected for gateway 3.

Change Control

We will take reasonable measures for control planning and change control to be managed and communicated with the Building Safety Regulator throughout the gateways process, subject to the transition timeline. Any changes to the design and construction of a higher risk building must be recorded by the relevant duty holders and provided for review. Requirements for 'permission' to be provided before significant changes are made must be acquired. This will apply to higher risk buildings both through design and construction as well as through refurbishments (see section 5.10).

Handover Review

As part of our Building Safety Act policy and process review, a cross-business review of the handover process will be undertaken to assess the impact and challenges raised by the reforms within the Act.

7. Occupation

To ensure residents living in higher risk buildings feel safe in their homes, our Fire and Asbestos Compliance Manager and building safety team will introduce various rolls and processes, each with different responsibilities for safety. We will take reasonable measures for collaboration and clear communication with our residents, as well as between compliance officers, neighbourhood officers, other members of both Barnsley Metropolitan Borough Council, Berneslai Homes, third-party building management organisations and stakeholders such as fire and rescue services.

The Principal Accountable Person (PAP) and Accountable Person (AP)

Principal Accountable Person Barnsley Metropolitan Borough Council (BMBC) - If a building has more than one Accountable Person, the Accountable Person responsible for the structure and exterior of the building will be the Principal Accountable Person.

As well as their duties as an Accountable Person, Principal Accountable Persons must:

- Register existing buildings with the Building Safety Regulator
- Prepare a safety case report for each building.
- Provide the safety case report to the Building Safety Regulator on request.
- Apply for a building assessment certificate and provide completed building safety cases for each in scope building between March 2024 and March 2029 as requested by the Building Safety Regulator.
- Review and challenge the performance of fire and building safety as necessary on a risk-based approach.

The definition of an Accountable Person is:

Accountable Person (Berneslai Homes & Barnsley Metropolitan Borough Council BMBC) – An organisation who owns or has responsibility for the building. It may also be an organisation who is responsible for maintaining the common parts of a building, for example corridors or lobbies.

The Accountable Person will have a duty to take all reasonable steps to:

- Prevent a building safety risk happening, with building safety risk defined as 'spread of fire and/or structural failure'; and
- Reduce the seriousness of an incident if one happens.

Monitor progress against programmes, overall performance, scrutinise strategic direction and offer constructive challenge to ensure Berneslai Homes' homes are safe and comply fully with the Building Safety Act

Building Safety Manager (Fire and Asbestos Compliance Manager)

The fire and asbestos compliance manager is Berneslai Homes's name for the building safety manager who role fulfils an assurance function, satisfying the Building Safety Regulator that a higher risk building's existing safety management system is effective via a series of audits, checks and reviews. This will be supported through:

- the development of a safety dashboard for specific higher risk buildings
- the review and oversight of building risks in a building safety case
- submission of safety case reports to the Building Safety Regulator when required
- acting as consultee at all gateways through design and construction
- engagement with residents and other stakeholders (such as contractors, managing agents and fire and rescue services) to develop a building-specific engagement strategy

Building Safety Case (BSC)

Management of building safety cases are formally overseen by the Fire and Asbestos compliance Manager on behalf of the Barnsley Metropolitan Borough Council (BMBC) principal accountable person. The building safety case is one of the many elements to be managed within the principles of the Golden Thread and will rely on it to remain up-to-date and effective. A detailed summary of the building safety case in the form of a safety case report will be submitted to the Building Safety Regulator under specific conditions or on request. Safety case reports could potentially also be used when sharing information between the principal accountable person and relevant accountable persons, or third-party stakeholders such as fire and rescue services as part of information sharing requirements and requests.

Building safety cases and safety case reports will be supported with the development of a fire and building safety management plan and related procedures.

Competence Review

In line with requirements to evidence competence within the building safety case, we will undertake a process to review roles, responsibilities, and competencies across the business by liaising with relevant teams such as human resources and Barnsley Metropolitan Borough Council (BMBC) procurement team to create a competency matrix.

Registration

The 3 higher risk buildings were registered on 18th September 2023 by Fire Safety and Asbestos Manager on behalf of Barnsley Metropolitan Borough Council (BMBC). An

ongoing registration process in place for new buildings will pass through the design and construction gateways.

Certification

All registered higher risk buildings will have a valid building assessment certificate provided after review by the Building Safety Regulator that will be clearly displayed in the building and will provide the principal accountable person's details, the current building assessment certificate and copies of any compliance notices relating to the building which are still in force. If the Building Safety Regulator has put a special measures order in force for the building at any point, the building assessment certificate will be removed.

Resident's Voice

Residents should be and feel safe in their homes. We will take reasonable measures to inform residents about building safety, ensure they are engaged in discussions about how to keep their building safe (including their own responsibilities) and are empowered to challenge unsafe or unreasonable decisions. Under the Resident Voice sections of the Act, the principal accountable person is required to:

- provide residents with relevant building safety information
- establish a resident engagement strategy specific to each higher risk building
- establish and operate a system for the investigation of relevant complaints and building safety related questions.
- employ contravention notices in the event of residents falling short of meeting their safety obligations Further guidance on Resident Voice requirements will be set out in secondary legislation.

Resident Engagement Strategy

We have an established Resident Engagement Safety Panel with specific engagement strategies for all three of our higher risk buildings. These include how we communicate and share information with residents and identify their needs regarding building safety. This is a key pillar of Resident Voice requirements and sets out our responsibilities as landlord, as well as providing residents with clear guidance on their responsibilities to ensure their building is kept safe. The development of engagement strategies include engagement with other potential stakeholders connected to the building such the resident engagement panel and building safety project board. We will also be working alongside fire and rescue services, contractors, utility services, local authorities, and other relevant accountable persons connected with the building, such as managing agents and commercial property owner to share best practice.

The engagement strategy forms part of the prescribed submission documents required when requesting building assessment certificates. Tenant satisfaction measures released by the Regulator of Social Housing have been included into the three strategies. Each engagement strategy has been tailored to the needs of an individual higher risk building and its residents. Engagement strategies is supported with by fire and building safety management plan and related procedures.

Leaseholder Protections

Leaseholder protections have been introduced in the Act to ensure qualifying leaseholders are protected from remediation costs associated with building safety defects for relevant buildings (multi-occupancy buildings which are at least 11 meters in height or five storeys and above). Where we undertake building safety defect remediation on relevant buildings, the following limitations on costs passed on to leaseholders are applied (subject to any additional limitations set out in individual leases):

- limitations have been placed on the permitted maximum cost that can be charged to relevant leaseholders for defects, based on their lease value and location
- leaseholders are protected outright from paying any costs associated with the remediation of external cladding defects
- defect remediation costs must first be applied to those responsible for the defects, such as the developer or client who instructed the building works
- any remediation funding costs covered by the building safety fund must also be deducted from costs before they are passed on to leaseholders.

Leaseholder protections are further supported through secondary legislation in The Building Safety (Leaseholder Protections) (England) Regulations 2022, relating to the leaseholder deed of certificates and landlord certificates. Leaseholder protections will be supported with the development of a leaseholder charging policy and related procedures.

Refurbishments

Principles set out in the Act relating to refurbishment works within higher risk buildings will be met. A stricter regime for major works including remediation and refurbishments has been put in place to ensure risks posed by changes to the

Remediation

The key roles of the principal accountable person and accountable person is to prevent and reduce the severity of building safety incidents relating to fire or structural failure in higher risk buildings. This is actively managed by our Fire and Asbestos Compliance Manager and our building safety team through an ongoing programme to identify and remediate building safety defects. This is included in the Fire and Building Safety Management Plan

8. How we deal with complaints about higher risk building

Following the introduction of the Building Safety Act 2022, residents in high-rise buildings residents can complain to the accountable persons and the principal accountable person about the building risks for example:

- their communications to residents
- responses to raised concerns
- how they manage building safety risks

You can also raise concerns about building safety risks, which are structural safety issues and spread of fire issues. For example:

- flammable cladding on the outside of a building
- fire doors or smoke extraction which are not working or missing that may increase the risk of fire spread
- failure of the building's structure, such as parts of the building collapsing, cracks, or parts of the building falling off

the above complaint will be dealt in line with this procedure and refer to the Fire and Asbestos Compliance Manager who will raised with the accountable persons and principal person in the Building Safety Project Board, if the resident is not satisfied with our procedure, they can refer a complaint to the Building Safety Regulator.

The above forms part of our Berneslai Homes Complaints Policy.

9. Monitoring and Review

This policy will be reviewed every two years unless there are significant changes to legislation or regulation or where there are changes to best practice identified. If this occurs, an immediate review will be initiated.

Tenant Satisfaction Measures (TSMs) are a set of consumer standards set by the Regulator of Social Housing (RSH). They provide RSH with an overview of how social housing providers are performing and allow residents to hold landlords to account. The Fire Safety, Gas, Asbestos and Lift checks will be monitored within our Building Safety Scorecard and C365 compliance systems

9. Our approach

While no assessments were undertaken through the development of the policy, in writing this policy we have considered the needs of equality, diversity and inclusion. These are relevant to this policy under the higher risk building engagement strategy and building safety cases when identifying residents with mobility or awareness difficulties that may impact their ability to self-evacuate. This also applies to how we share and protect that

information internally and with relevant external bodies such as fire and rescue services. As part of the development of this policy we have undertaken an internal consultation to gather feedback from key stakeholders across the business.

10. Reasonable Adjustments

We will support the needs of our diverse resident by making reasonable adjustments to building safety processes, which could be a physical change or change in work practices to avoid any disadvantage to a resident in accessing this policy. Examples of reasonable adjustments include:

- We will provide information in appropriate alternative formats (e.g. large print, coloured paper, Braille etc)
- We will communicate through a representative.
- We will allow more time than we usually for someone to provide information we need (where it is lawful to do so).
- We will provide additional support such as sign language interpreter or translator
- We will use plain language or Easy Read services
- We will meet resident in person in suitable location that meets their needs
- We will support comfort breaks or rest breaks during meetings
- Responding to complaints in a shorter timescale

This policy can be requested upon request and we can do the following

- Change colours, contrast levels and font size.
- Access the policy from smart phone, tablet, laptop or PC

11. Equality, Diversity and Inclusion

We will ensure equal and fair access to our services; we will do this by taking into consideration the individual needs of our tenants, their family or other persons living with them. We will ensure that individual needs are considered throughout the fire safety process and make reasonable adjustments where necessary. We will treat people fairly and with dignity and respect.

We monitor fire safety to ensure we have complied with our Equality, Diversity, and Inclusion Strategy 2022-25.

All staff are trained in Equality, Diversity, and Inclusion to embed understanding about where we may need to adapt normal policies, procedures, and ways of working to accommodate resident's individual needs. This is mandatory training which is monitored by our Organisational Development Team.

Our Equality, Diversity and Inclusion Strategy meets our duties under the Equality Act 2010 (the Act) is about the following:

Equality - Of access to opportunities.

Diversity – Recognise and celebrate differences.

Inclusion – Belonging and acceptance, feeling valued for who you are.

12. Related Documents

This section sets out several links to government and industry guidance, legislation and a number of related policies and procedures. Building Safety Act guidance and supporting sites:

The Building Safety Act: - GOV.UK

www.gov.uk

Building safety leaseholder protections: guidance for leaseholders - GOV.UK

www.gov.uk

Remediation of non-ACM buildings - GOV.UK

www.gov.uk

Developer remediation contract - GOV.UK

www.gov.uk

Fire safety and high-rise residential buildings (from 1 August 2021) - GOV.UK

www.gov.uk

Building Safety Regulator - Building safety - HSE Architects Registration Board - GOV.UK

www.gov.uk

Construction Products Regulation in Great Britain - GOV.UK

www.gov.uk

NHOS - The New Homes Ombudsman Service Fire Safety Act 2021 - GOV.UK

www.gov.uk

Fire Safety (England) Regulations 2022 - GOV.UK

www.gov.uk

Responsible Person and Duty Holder: roles and fire safety responsibilities - GOV.UK

www.gov.uk

Tenant Satisfaction Measures - Summary of RSH requirements (accessible) - GOV.UK

www.gov.uk

Legislation:

Building Safety Act 2022 (legislation.gov.uk)

Building Act 1984 (legislation.gov.uk)

The Higher-Risk Buildings (Descriptions and Supplementary Provisions) Regulations 2023 (legislation.gov.uk)

The Town and Country Planning (Development Management Procedure and Section 62A Applications) (England) (Amendment) Order 2021 (legislation.gov.uk)

Defective Premises Act 1972 (legislation.gov.uk)

The Regulatory Reform (Fire Safety) Order 2005 (legislation.gov.uk)

Fire Safety Act 2021 (legislation.gov.uk)

The Fire Safety (England) Regulations 2022 (legislation.gov.uk) Related NHG Policy

Related Berneslai Homes Policies and Procedures

Fire Safety Policy

Fire and Building Safety Management Plan

Asbestos Policy

Asbestos Management Plan

Adaptation Policy

Compliant Policy

Damp, Mould and Disrepair Policy

Repair and Maintenance Policy

BERNESLAI HOMES POLICIES & PLANS



berneslai
homes

**Fire and Building Safety
Management Plan**

Document Control

Title	<i>Fire and Building Safety Management Plan</i>
Responsible Officer	<i>Daniel Crossley Head of Repair, Maintenance and Building Safety</i>
Author	<i>Andy Greenside Fire Safety Officer</i>
Subject	<i>Fire Safety</i>
Information Asset Owner	<i>Daniel Crossley Head of Repair, Maintenance and Building Safety</i>
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DPIA Completion Date	<i>N/A</i>
EIA Completion Date	<i>N/A</i>
Regulatory Framework	<i>The Regulatory Reform (Fire Safety) Order 2005 (FSO) and Fire Safety Act 2021</i>
Legislative Duties	<i>The Regulatory Reform (Fire Safety) Order 2005 (FSO) is the main piece of legislation governing fire safety in buildings in England and Wales.</i>

Revision History

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	<i>1.0</i>		<i>1.0 Date that the document was approved</i>

Consultation and Distribution

Type	Details
Consultation	<i>Building Safety Team Tenant Panel Board</i>
Distribution	<i>Operational staff involved in the process</i>

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1. Introduction

This Fire and Building Safety Management Plan outlines and explains how Berneslai Homes (BH) will meet its legal and moral obligations around fire safety, and more specifically expands and supports the commitments made in the Fire Safety Policy.

The Fire and Building Safety Management Plan will be available to all employees and held centrally on the SharePoint site. Where applicable Contractors will be provided with a copy of the Fire Safety Management Plan to ensure clarity on how services must be delivered.

2. Scope

This Fire and Building Safety Management Plan applies to **all** properties managed by BH that fall within the scope of the:

- Regulatory Reform (Fire Safety) Order 2005
- Fire Safety Act 2021
- Fire Safety (England) Regulations 2022
- Building Safety Act 2022

BH recognises that through the Building Safety Act 2022 buildings 7 storeys and above or 18 metres and above are classed as “higher risk” buildings. For these buildings different approaches and mitigation measures will be required in comparison with those that are classed as lower risk. Albion House, Britannia House, and Buckley House fall into the “higher risk” criteria.

However, BH has expanded on these criteria to include other buildings where, through a fire risk assessment, it has been identified that the building and / or tenants and lease holders within them require specific support.

For clarity, any references in this document to higher risk residential buildings relate specifically to the following:

a. High Rise

- Albion House
- Britannia House
- Buckley House

b. Independent Living

- Pendon House
- Churchfields Flats
- King Street Flats
- Hudson Haven
- Saville Court

- Church Street Close
- Woodhall Flats
- Shipcroft Close
- Glebe Court
- Willowcroft
- Heather Court

The Fire and Building Safety Management Plan includes but is not limited to guidance on the delivery of BH's Fire Safety policy commitments in the following areas:

- Fire Risk Assessments. (FRAs)
- Actions arising from the FRAs.
- Safe management of the buildings in relation to fire safety.
- The inspection, testing, maintenance, and servicing of active and passive fire safety systems inclusive of communal fire doors and flat entrance fire doors.

It covers the following properties:

- All residential purpose-built blocks of flats i.e. high rise, Independent Living, three and two storey blocks.
- All non-residential properties i.e. Office accommodation, community centres, Tara offices, HMO offices, shops (void), independent boiler rooms and independent laundries.

3. Roles and Responsibilities

This section will primarily address those parts of BH with employees who undertake, instruct or manage work on the fabric of buildings or who manage and administer fire safety information.

BH's overarching legal responsibilities in relation to fire safety are fully set out in the Company's Legal Register and Fire Safety Policy.

In summary the key obligation is to comply with the:

- Regulatory Reform (Fire Safety) Order 2005.
- Fire Safety Act 2021.
- Fire Safety (England) Regulations 2022.
- Building Safety Act 2022.

The following teams and/or defined roles are deemed as requiring specific consideration as they have employees that are most likely to have a responsibility for, come across or have to consider fire safety through the course of their works within BH.

Role	Responsibilities
Executive Management Team (EMT)	<ul style="list-style-type: none"> ○ They are the responsible legal entity and must oversee the discharge of the required standards. ○ They act as Duty Holders and are accountable for ensuring the implementation of this Fire Safety Management Plan (FSMP) and the associated Fire Safety Policy. ○ The EMT will receive assurance through regular performance reports that the management plan and policy are being implemented and that the regulations are being fully followed. ○ Responsible for ensuring that any necessary remedial action, arising from the performance reports is undertaken to comply with the policy and ensure that a regulatory Landlord compliance position is maintained. ○ Ensure the safety of employees, tenants, residents, visitors, contractors, and members of the public from fire in premises for which BH have a responsibility for. ○ Ensure that appropriate governance arrangements are in place to keep internal stakeholders and other interested Third Parties informed of the regulatory Landlord Compliance position.
Audit and Risk Committee and BMBC	<ul style="list-style-type: none"> ○ Ensure that the EMT receives the assurance it requires through regular performance reports.
Chief Executive Officer (CEO)	<ul style="list-style-type: none"> ○ Is the “Responsible Person” with regards to fire safety under the Regulatory Reform (Fire Safety Order) 2005. ○ Has the overall responsibility for the monitoring of the consistent implementation of the Management Plan and Policy. ○ Through the implementation of the Management Plan and Policy to effectively comply with the regulatory standards. ○ Delegate and allocate responsibilities within the Executive team ensuring that there is adequate management, monitoring, and visibility of performance. ○ If the regulatory standards are not maintained to report any breach in standards to the Regulator of social housing.
Executive Director of Property Services	<ul style="list-style-type: none"> ○ Has the overall responsibility for the delivery of the Management Plan and Policy commitments. ○ Ensure the key activities to manage risk and communications sections of the management plan and policy performance are aligned to the risk and that all areas of non-performance are reported and escalated where required to the CEO and EMT. ○ In compliance with the Building Safety Act 2022 ensure a Mandatory Occurrence Report is completed and submitted to the Building Safety

	<p>Regulator for any structural safety or fire safety related event that poses a significant risk to life in the higher risk buildings. This also includes a full investigation of the incident within a 10-day timescale of the event occurring.</p>
<p>Head of Repair, Maintenance and Building Safety</p>	<ul style="list-style-type: none"> ○ Agree and set budgets that are sufficient to meet the compliance requirements. ○ They shall appoint / nominate sufficient resources to fulfil the Responsible Person(s) roles for all fire safety matters and use this management plan to define their duties. ○ Delegate proper authority for in-house delivery or procurement to meet the requirements. ○ Seek assurance that the regulations are being adhered to and regularly review internal service provider and / or external contractor operational practices and performance. ○ Ensure that the conditions of all contracts are being fulfilled either by internal service provider/s and / or external contractors. ○ Provide performance to Audit and Risk Committee.
<p>Fire and Asbestos Compliance Manager</p>	<ul style="list-style-type: none"> ○ Will manage the operational delivery of this management plan and policy and ensure compliance with the regulations. ○ Manage the Budgets to meet compliance requirements. ○ Will produce, review, and update the policy at the proper review dates. ○ Will supply an effective Performance Management Framework that will strengthen risk control and supply greater levels of assurance. ○ Will implement data governance protocols. ○ Will manage the availability of correct stock data and landlord compliance data sub-sets against which to prepare work programmes and contract. ○ Will communicate with relevant staff, stakeholders, and customers to explain the importance of landlord compliance and the need to achieve access to complete safety checks and works. ○ Will oversee the preparation of the KPIs/ Management Performance Indicators (MPIs) and Operational Performance Indicators (OPIs) reporting suite. ○ Will aid the implementation of this management plan and policy through monitoring implementation. ○ Will receive audit feedback and act upon the finding. ○ Will oversee the programme of policy and strategic review.

	<ul style="list-style-type: none"> ○ Will manage the strategic implementation of this Management plan and Policy and ensure compliance with all regulators. ○ Inform the Head of Repairs, Maintenance and Building Safety of any performance issues. ○ Receive feedback from third party external validation consultants and communicate with contract managers, and contractors (internal and / or external) to address any delivery short ○ Ensure ongoing compliance with all relevant fire safety legislations. ○ Always keep under review the effective management of fire safety across Berneslai Homes with the aim of promoting fire safety. ○ Ensure that the Fire Safety Policy is effectively communicated to all employees in the business. ○ Ensure a fire safety review of new acquisitions / new ventures is carried out. ○ Ensure that the Fire Safety Programme is resourced. ○ Implement the independent review of Building Regulations (Fire Safety) Recommendations. ○ The Terms of Reference of the Building Safety Project Board.
Fire Safety Officer	<ul style="list-style-type: none"> ○ Reporting to the Fire and Asbestos Compliance Manager the Fire Safety Officer will act as the Authorised Person for the fire safety management at Berneslai Homes. ○ Manage the needs, development, and objectives of a small team delegating work at an appropriate level. ○ Manage the operational delivery of the Fire Risk Assessment programme and reviews within the boundaries of the Regulatory Reform (Fire Safety) Order 2005. ○ Implementation of remedial works arising from the FRAs and reviews. ○ Managing and monitoring all cyclical maintenance programmes of the fire safety engineering equipment i.e. fire alarms, emergency lighting, sprinkler systems, fire extinguishers, dry risers etc. ○ Support, guide, and advice internal and external stakeholders/contractors regarding the operational delivery of the Management Plan. ○ Carry out visits and internal audits to ensure fire risk assessments fire safety measures and standards of fire safety prevention are being maintained in accordance with the Management Plan and Policy. ○ Maintain a close working relationship with internal and external stakeholders such as BMBC, Strategic Housing, Insurance Officers, South Yorkshire Fire and Rescue Services etc.

	<ul style="list-style-type: none"> ○ Hold regular meetings with the Fire Safety Group and Fire Safety Risk Assessment providers. ○ Update systems with the correct fire safety data compiling and maintaining accurate fire safety records producing monthly updates for the Fire and Asbestos Compliance Manager. ○ Ensure that any type of fire in our occupied and managed properties is investigated, recorded with any proposals to reduce a reoccurrence. ○ Liaising with customers with regards to fire safety including attendance at tenant and leaseholder engagement meetings.
<p>Fire Safety team</p>	<ul style="list-style-type: none"> ○ Reporting to the Fire Safety Officer the fire safety team will be the eyes and ears on the ground supporting the Fire Officer in ensuring that the requirements of the Management Plan and Policy are being implemented and adhered too. ○ Carry out regular scheduled visits for all our properties that fall within the scope of the Regulatory Reform (Fire Safety) order to carry out fire door inspections/checks of both flat entrance fire doors, all communal fire doors recording the results, reporting back any identified defects or issues. ○ Carry out regular scheduled visits for all our properties that fall within the scope of the Regulatory Reform (Fire Safety) order to close any action points identified within the Fire Risk Assessments that fall within the Fire Safety team's remit as allocated by the Fire Safety Officer. ○ Carry out weekly fire safety inspections of the three High-Rise properties that fall within the remit of the Building Safety Act 2022. Completing the Fire Safety Inspection check list, reporting back any identified fire safety issues. ○ Carry out weekly, monthly checks and testing of the properties fire safety engineering solutions ensuring the checks and tests are correctly recorded, reporting back any identified defects or issues. ○ Responsible for carrying out home visits to vulnerable adults in the purpose-built blocks of flats, undertaking Person Centred Fire Risk Assessments within their homes and periodically reviewing the PCFRA. ○ Maintain an accurate record of completed PCFRA completed uploading the reports onto the data base. ○ Actively promote fire safety to our tenants and residents in our managed properties, giving advice and guidance proportionate to the risk as advised and supported by the Fire Safety Officer. ○ Build relationships with internal and external stakeholders to ensure good working

	relationships and sharing of best practices including engagement with fire risk assessors and fire safety inspectors from SYF&RS as directed by the Fire Safety Officer.
Competent Persons a. Fire Risk Assessment (FRA) providers. b. Internal partners completing repairs and remedial works. c. External contractors carrying out maintenance on cyclical fire safety engineering equipment.	<ul style="list-style-type: none"> ○ Must ensure that the Fire Risk Assessment is conducted in line with the requirements of the Regulatory Reform (Fire Safety) Order 2005. ○ Must ensure that all information recorded on the FRA report is accurate, detailed and any actions/recommendations are proportionate to the fire risk. ○ Supply the correct, complete information and where required correct certification for any remedial works carried out as a result of the FRA. ○ Ensure that all maintenance contractors are suitably qualified to carry out the works with accurate Risk Assessments and Method Statements (RAMS) in place. ○ Maintain the fire safety engineering equipment in line with the British Standards and guidance relating to the specific equipment. ○ Provide all maintenance certification and documents regarding works completed on the fire safety engineering equipment.
Customers	<ul style="list-style-type: none"> ○ Agreeing too and keeping appointments to allow access to properties for fire safety remedial works or maintenance works. ○ Take note of and adhere to the fire safety advice, guidance and follow the correct fire safety procedures and evacuation procedures for their premises/dwellings. ○ Do not carry out any internal or external alterations without going through the correct permissions process first and obtaining written confirmation the alterations can go ahead. ○ Liaising with BH employees with regards to any poor service given by contractors, contractors failure to attend, poor repairs and remedial works etc. ○ Respond to customer satisfaction surveys.

Under the Health and Safety at Work Act 1974 it is the duty of all employees while at work to take reasonable care for the health and safety of themselves and other persons who may be affected by their acts or omissions at work. This also incorporates fire safety.

All staff have a responsibility to act responsibly and report any unsafe practices.

4. Data

Understanding and clearly recording our statutory and legal obligations in relation to fire safety is a key part of effectively managing and checking these requirements. More importantly it summarises the mechanisms we have in place to meet these requirements.

4.1 Fire Risk Assessments (FRA)

We will keep and maintain a core up to date master data base of all buildings where we have a responsibility to carry out and provide a Fire Risk Assessment. Where a requirement for an FRA exists, hold full electronic copies of the current and previous FRAs along with key reportable and auditable information from the same, including but not limited to the unique property reference number (UPRN), property designation, construction type, building management, shared responsibilities, risk profile, evacuation strategy, date of last risk assessment, review frequency and date of next risk assessment.

Maintain current and auditable records of remedial works arising from actions raised in the FRAs or other fire safety related inspection or testing. The records will include address and risk profile of the property, detail of the work item required, priority and target completion date, person responsible, completion date and associated sign off, and evidence of completion.

4.2 Fire Safety Engineering Equipment

We will keep and maintain a core up to date master data base of all buildings where we have cyclical fire safety engineering equipment installed that will require testing, maintaining and servicing e.g. fire alarm systems, emergency lighting, sprinklers systems/water mist systems, dry risers, fire extinguishers, fire doors etc.

Where fire safety equipment exists, hold reportable and auditable information including but not limited to UPRN; type of equipment, manufacturers' requirements, and instructions (where available), associated testing / servicing frequencies, last date completed and next date due. Records of each activity / equipment type will be held in accordance with our Records Retention Schedule.

4.3 High Rise Buildings 7 Storeys and Above or 18 Metres in Height and Above

We will keep and maintain an electronic record of prescribed information for the three in-scope higher risk buildings that fall within the Building Safety Act 2022 of which Building Safety cases have been produced and submitted to the Building Safety Regulator. This will also include any Mandatory Occurrence Report that has been completed and submitted to the Building Safety Regulator for any structural safety or fire safety related event that has posed a significant risk to life inclusive of the full investigation report of the incident.

4.4 Fire Risk Appraisal External Walls (FRAEW)

We will keep and maintain a core up to date master data base of any premises where a Fire Risk Appraisal External Wall assessment has been carried out as guided by PAS 9980:2022 and details of any required remedial works completed.

4.5 Fire Incidents

We will keep and maintain an electronic record of any fire incidents that have occurred throughout our managed estate. The information will include the type of premises, cause of fire, estimated repair costs and any injuries to staff, tenants or contractors.

4.6 Person Centred Fire Risk Assessments (PCRFA)

We will keep and maintain a core up to date master data of the details and reports for all Person-Centred Fire Risk Assessments that have been completed and regularly reviewed for vulnerable adults in the purpose-built blocks of flats that we manage.

4.7 Stored Oxygen and Use of Oxygen Cylinders

Where we are made aware of a tenant/leaseholder being medically prescribed oxygen for the use in their homes, we will keep and maintain a core up to date master data of the details.

4.8 Staff Fire Safety Training

We will keep and maintain an electronic record of all related fire safety training completed by staff on induction and annually.

5. Delivery of the Fire and Building Safety Management Plan

5.1 Access

Our customers must provide reasonable access to our appointed contractors to undertake fire safety inspections, maintenance and checks in accordance with their lease agreements. A clear and consistent approach will be taken including:

- Front-line engagement and enforcement will be in place to obtain access to the properties that we manage to undertake fire safety inspections, maintenance, and checks, which shall include legal action when needed.
- We will proactively assess available data for relevant information about the customer to help gain access to the premises i.e. disability, vulnerability, mental health issues, local connections etc.

5.2 The Fire Risk Assessment (FRA)

- For all properties that come under the Regulatory Reform (Fire Safety) Order we will undertake suitable and sufficient FRAs and record the significant findings.
- The FRAs will be undertaken by contractors considered competent and qualified in accordance with the Management Plan such as BAFE SP205 – 1 Life Safety Fire Risk Assessment (British Approvals for Fire Equipment) or the internal Fire Safety team. The reports shall follow the PAS 79 methodology and/or BS 9792 Fire Risk Assessment – Housing – Code of Practice which is due to be released later in 2024.
- A Type 1 FRA will be the initial assessment. This is a non – destructive/intrusive inspection of all the internal communal areas of the premises including plant rooms, service risers, above suspended ceilings, taking into consideration the fire safety

management of the premises, means of escape, means of raising the alarm, emergency lighting, sources of ignition, housekeeping, fire safety engineering equipment/solutions, maintenance/testing, fire doors, a sample of flat doors and a sample of roof void checks where applicable. Externally the means of escape to the fire assembly point, a visual inspection of the external facades/elevations construction materials and walk out balconies where applicable.

- Unless there is reason to expect serious deficiencies in structural fire protection such as inadequate fire compartmentation, poor fire stopping a Type 1 FRA will normally be suitable and sufficient for our purpose-built blocks of flats and other related premises we manage. Where the fire risk assessor undertaking the assessment has any concerns, they may recommend other types of FRAs such as a Type 2,3 or 4 or that a suitable fire compartment survey or fire door survey is carried out by a competent qualified passive fire protection specialist. This recommendation will carry a timeframe in accordance with the risk and will be scrutinised by the BH Fire Safety Officer. It should not be a generic recommendation in all the FRAs completed for our properties. The FRAs should be based on the identification of issues that justify reason for doubt.
- Where a visual inspection of the external facades/elevations construction materials and walk out balconies identifies any issues or recommends a PAS 9980 Fire Risk Appraisal External Wall survey (FRAEW). This will be scrutinised and challenged where appropriate by the BH Fire Safety Officer based on the fact that this requirement would normally refer to buildings 11 metres and above where 25% or more of the external facades/elevations have some form of cladding system on them that may promote the external spread of fire and the Higher Risk high rise buildings that fall within the remit of the Building Safety Act 2022. The exception would be where a building below 11 metres poses a serious risk to life due to the construction materials used on the external façade/elevations of the premises.
- The FRA will show the current and recommended evacuation strategy for the building whether it is “Stay Put” or “Simultaneous”.
- The FRAs will have a Risk Level rating against each of our applicable properties which will determine when a new FRA is required i.e. annually, every two years or every three years.

Fire Risk Assessment Frequency

Risk Level	Type of Building	Frequency Requirement for Completing a New FRA	Responsibility for Completing a New FRA
High	High Rise Residential	Annual	External Fire Risk Assessors
	Independent Living schemes	Annual	External Fire Risk Assessors
	Office accommodation three storeys and above	Annual	External Fire Risk Assessors

Medium	Small blocks of flats of three storeys	Once every 2 years	External Fire Risk Assessors
	Offices, 1 to 2 storeys (Tara Offices, HMO Offices)	Once every 2 years	External Fire Risk Assessors
	Community Centres	Once every 2 years	External Fire Risk Assessors
	Independent Boiler Houses	Once every 2 years	External Fire Risk Assessors
	Independent Laundries	Once every 2 years	External Fire Risk Assessors
Low	Small blocks of flats of two storeys	Once every 3 years	External Fire Risk Assessors
	Any converted two storey domestic dwelling being used for multi-occupancy e.g. 18 Pickhills Avenue, Goldthorpe	Once every 3 years	External Fire Risk Assessors

The FRA is a living document that requires to remain valid at all material times. We will carry out a new FRA irrelevant of the risk category following any of the events below:

- A fire or serious near miss.
- The introduction of new work practices.
- Any works affecting the means of escape or fire alarm systems.
- Structural or material changes to the building or its use.
- A meaningful change in legislation or significant changes to guidance.

If there is reason to suspect that the FRA may no longer be valid, this will prompt a new Fire Risk Assessment. This decision will be made by the BH Fire Safety Officer.

Outside the circumstances outlined above, new FRAs will be completed on or before the date recommended by the competent fire risk assessor undertaking the previous FRA.

5.3 Actions Arising from the Fire Risk Assessment Reports

All actions arising from the FRAs will be reviewed and scrutinised by the BH Fire Safety Officer who will categorise them into the following areas:

- a. Management actions.
- b. Business partner remedial works.
- c. Planned programme of works.

NB – the BH Fire Safety Officer on reviewing and scrutinising the FRA actions may decide that the action is unrealistic, unreasonable, and not proportionate to the fire risk. Where this is the case the BH Fire Safety Officer will close down the action and record on the FRA tracker or the C365 system the reason and justification for closing down the action.

Management Actions – these are actions that will be remediated and completed at local management level by the:

- Fire safety team.
- Scheme Managers.
- Neighbourhood Officers.

Business Partner Remedial Works – these are actions that will require a works order to be raised for our business partners to remediate and complete:

- Barnsley Property Services.
- Construction Services.
- Wates.

Planned Programme of Works – these are actions that will take longer to remediate and complete due to the extent of the work required. They will form part of a planned programme of works that will take a number of years to complete.

The BH Fire Safety Officer when reviewing and scrutinising the FRA actions will categorise them then allocate those actions that can be completed at local management level or by our business partners ensuring that they are completed within the timescales shown below:

Fire Risk Assessment Actions Timescales for Completion

PRIORITY	Urgent	Same Day or within 24 hours
	High	3 months
	Medium	6 months
	Low	12 months
	Recommendation	Unlimited

Where appropriate, it is sensible and safe to do so timescales may be amended, for example to fit in with pre-existing plans and programmes of work, specifically BHS (Barnsley Homes Standard) Works.

To comply with Article 22 of the RRFSO, where we share responsibility for an area of a property or common areas we will co-operate, communicate and co-ordinate our fire safety responsibilities with other responsible persons for the property. This will include the sharing of information, and any significant findings identified in the FRA we have carried out, what we are doing to remove or mitigate the risks so far as is reasonably practicable to ensure the safety of relevant persons without compromising other parties' obligations under the lease in place for the premises.

Copies of the FRAs will be held centrally on a SharePoint site and/or the C365 system. Copies of the FRAs will also be held in the Premises Information Boxes for those schemes that have them, all community centres, and offices. All other FRAs will be available upon request.

5.4 Additional Fire Safety Inspections and Checks

In addition to the formal FRA process BH will carry out additional fire safety inspections and checks as outlined below:

- Blocks of two and three storeys – monthly fire safety inspection and checks carried out by the Neighbourhood Officers.
- Independent Living Schemes – monthly fire safety inspections and checks carried out by the Fire Safety team/Scheme Managers.
- High Rise Schemes – weekly fire safety inspections and checks carried out by the fire safety team.
- Community Centres and Offices – monthly fire safety inspections and checks carried out by the Fire Safety team/Scheme Managers. (Where applicable)

Storage of and equipment left or being charged in communal areas, means of escape communal corridors, or means of escape staircases by tenants or leaseholders can be a source of ignition, support combustion and potentially block escape routes in the event of an emergency. Tenants and leaseholders are not allowed to store anything within communal areas or charge any electrical equipment within the communal areas:

- Where we find that tenants and leaseholder are storing equipment in the communal areas, we will advise them that the items require to be removed. Failure to remove the items within the given timescale, we will remove them to a safe area until collected.
- Mobility scooters, e-bikes, e-scooters, bicycles, and motor bikes must not be stored or left within the communal areas or charged within the communal areas.
- In blocks of flats where designated fire compartmented charging rooms are provided, mobility scooters, e-bikes and e-scooters must be charged within these rooms.
- In blocks of flats where designated fire compartmented charging rooms have not been provided, mobility scooters, e-bikes and e-scooters must be kept within the individual tenant's/leaseholder's flat when not being used.
- Under no circumstances should flammable materials, aerosols, cleaning substances etc. be stored in any communal areas other than designated storerooms or COSHH cabinets.

NB – where a fire safety concern has been raised by the Neighbourhood Officer teams, Scheme Managers, tenants, or leaseholders or our business partners. The fire safety team working with all parties concerned will investigate, support, guide and advise on what may be required to resolve or remediate the concerns.

5.5 Fire Incidents and Investigations

All reported fire incidents no matter how minor will be investigated. The initial investigation will be carried out by one of the BH Maintenance Surveyors who will produce a report for the Executive Management team and Senior Management with the following information:

- Name of the tenant/s, address of the property and type of property.

- Details of the incident and whether the fire and rescue services were in attendance.
- Details of any injuries sustained by the tenant/s.
- Estimated cost of any required remedial works.

The Fire Safety Officer will review the contents of the fire investigation report. Where there has been a very serious fire that requires a more in-depth fire investigation, this will be carried out by the Fire Safety Officer. **In addition, the Fire Safety Officer will:**

- Request a copy of the Fire Incident report from South Yorkshire Fire and Rescue Service.
- Where a fire incident has occurred in a building that falls within the Regulatory Reform (Fire Safety) Order 2005, review the current Fire Risk Assessment.
- Advise all parties concerned on what requires to be carried out to ensure there is not a recurrence of the issue in the building of concern or any other properties where a similar issue could occur.
- Where a serious fire has occurred in a building that falls within Regulatory Reform (Fire Safety) Order 2005, arrange for a new Fire Risk Assessment to be carried.
- Ensure copies of any Fire Investigation reports are stored in the SharePoint file “Property Fires” and that the “Record of Fire Incident tracker” is updated with all details of the incidents.

5.6 Failure of fire safety engineering equipment and identified building defects

In any circumstances where a failure of the fire safety engineering equipment or identified building defects poses a life safety risk to tenants in the higher risk premises i.e. the three high rise and eleven independent living schemes BH will take the necessary steps to ensure the safety of our customers.

The necessary steps taken will include:

- Consulting with our appointed fire safety engineers and specialist consultants to understand whether temporary mitigation measures are required while the relevant remediation works are put in place.
- Arrange for a “Waking Watch” to be put in place to carry out continuous fire safety patrols and checks of the premises and assist in the evacuation of the premises in the event of an emergency especially those tenants identified as being vulnerable.
- If required as a temporary measure change the “Stay Put” strategy to a simultaneous evacuation strategy ensuring that the appointed waking watch have the manpower on site at all times to support this.
- Review the vulnerability of the tenants especially those tenants that already have a person-centred fire risk assessment in place due to their vulnerability.
- Continually review the temporary measures put in place until such time that all remedial works are completed, and the building is back to normal.

Where a “Waking Watch” is put in place they will come under the direction of the Fire Safety Officer who will be responsible for putting in place their roles, responsibilities and reporting procedures.

5.7 Fire Safety Audits

South Yorkshire Fire and Rescue Services are the enforcing fire authority for all BH premises that fall within the:

- Regulatory Reform (Fire Safety) 2005
- Fire Safety Act 2021
- Fire Safety (England) Regulations 2022

Depending on the height and risk rating of the building SYF&RS may carry out a Fire Safety Audit every 1 to 5 years to ensure that BH is complying with the above legislation and that the building being audited is safe to be occupied.

5.8 Enforcement Action

Following a Fire Safety Audit or inspection by SYF&RS, they may take action to rectify any failings in the fire safety arrangements and fire safety management of the premises:

- **Informal Notice** – a written or verbal explanation to the “Responsible Person” of what needs to be carried out to comply with Fire Safety legislation. An Informal Notice carries no statutory force but may result in formal action being considered if the agreed improvements do not take place within a reasonable amount of time. If this is the case SYF&RS may then issue an Enforcement Notice.
- **Enforcement Notice** – if SYF&RS is of the opinion that the “Responsible Person” has seriously failed to comply with the requirements of Fire Safety legislation they can serve on the “Responsible Person” an Enforcement Notice which will have specific timescales for the completion of the required works and a date where a reinspection will take place.
- **Prohibition Notice** – if SYF&RS is of the opinion that the use of the premises or part use of the premises poses a serious risk of injury or death they can serve on the “Responsible Person” a Prohibition Notice restricting the use of the premises or part of the premises until such time that it is made appropriately safe.
- **Alterations Notice** – if SYF&RS is of the opinion that any specified changes to a premises would constitute a serious risk to relevant persons in respect to harm and injury caused by fire in the premises, they can serve on the “Responsible Person” an Alterations Notice stopping any specified changes until such time that SYF&RS are satisfied with improvement on the specified changes.

Failure to comply with the requirements of the Fire Safety legislation, an Enforcement, Prohibition or Alterations Notice, obstructing a Fire Officer, falsifying records or falsifying information is an offence that can lead to prosecution. The level of penalty imposed by the courts of law can range from £5000 to an unlimited fine and/or two years imprisonment.

NB – where we receive notification from SYF&RS of their intention to carry out a Fire Safety Audit of any of our premises the Fire Safety team will support, guide and advise on what is required and meet with the fire safety inspector on site. The BH Fire Safety Officer will take the lead regarding any type of enforcement notice issued by SYF&RS.

5.9 Building Safety Cases

In compliance with the Building Safety Act 2022, Building Safety Cases have been produced and submitted to the Building Safety Regulator for the three High Rise premises Albion House, Buckley House, and Britannia House.

In the longer-term future amendments to the Building Safety Act may be extended to include more premises below seven storeys or below 18 metres that may be classed as higher-risk buildings such as the independent living schemes.

We are fully aware of our responsibility under the Building Safety Act 2022 to complete a Mandatory Occurrence Report and submit it to the Building Safety Regulator for any structural safety or fire safety related event that poses a significant risk to life in the higher risk buildings. This also includes a full investigation of the incident within a 10-day timescale of the event occurring.

6. Responding to Changes in Fire Safety Legislation and Fire Safety Regulations

The Fire Safety Officer working with the Fire and Asbestos Compliance Manager will proactively monitor and check for any updates to or changes to fire safety regulatory and legislative requirements. Through consultation with the Head of Repairs, Maintenance and Building Safety we will ensure that we effectively prepare for the changes and the impact it may have on our tenants, leaseholders, and the building stock that we manage.

Any changes, what we are doing about it, how the changes will be implemented, who and what it will affect will be communicated to all relevant employees, business partners, external contractors, external consultants, and our customers. (dependent upon the nature and implications of the changes)

All employees and our business partners have a responsibility to remain alert for any notifications in changes, share knowledge and good practice across all the business teams. This includes the dissemination of information from statutory regulators, institutions, South Yorkshire Fire and Rescue Service, media articles from fire safety contractors, professional bodies, and other trade media.

7. Fire Evacuation Strategies

We will ensure that each building has an evacuation strategy, and it is set out and clearly stated within the premises FRA. The evacuation strategy will be agreed with the competent person undertaking the FRA, however as a general principle:

7.1 Residential Accommodation with Communal Areas – purpose-built blocks of flat schemes with communal areas will primarily have a “Stay Put” strategy:

- If a tenant in an individual flat has a fire, they should evacuate their flat and the premises immediately, go to the fire assembly point and remain there until told that it is safe to return to the premises by the attending fire and rescue service.
- All other tenants are safe to remain in their flats until instructed to evacuate by the fire and rescue service.

- Any tenant within the communal areas when the communal fire alarm activates will be expected to evacuate the premises immediately, go to the fire assembly point and remain there until told that it is safe to return to the premises by the attending fire and rescue service.
- The “Stay Put” strategy may change based on the instruction of the fire and rescue service in the event of an emergency incident.

We cannot enforce the “Stay Put” strategy but strongly advise tenants and leaseholders that they adhere to it for their own safety unless they are instructed to evacuate by the attending fire and rescue service. A full evacuation in the early stages of a fire incident would impede the fire and rescue service carrying out their investigation and firefighting operations.

Fire statistics show that the majority of fires in purpose - built blocks of flats are confined to the flat or communal area such as plant rooms where the fire originated from, quickly brought under control and extinguished by the attending fire and rescue service.

We will continue to monitor the “Stay Put” strategy for those premises where it is in place any decision to change the strategy will be made by the BH Fire Safety Officer in agreement with the BH Fire and Asbestos Compliance Manager with written justification for the change in strategy.

7.2 Offices and Community Centres – these premises will have a “Simultaneous Evacuation” strategy i.e. on discovering a fire and activating the fire alarm or the fire alarm sounding everyone will evacuate the premises immediately. No one should re-enter the building until all clear has been given by the attending fire and rescue services or those in charge of the incident if it is a false fire alarm activation.

7.3 Personal Emergency Evacuation Plan (PEEP) – in non-residential premises such as offices and community centres it is the responsibility of individual colleagues to inform their line manager of any physical or sensory impairment they may have, including any temporary impairment which may impede their safe evacuation of the premises in the event of an emergency evacuation. It is the responsibility of their Line Manager to ensure that a Personal Emergency Evacuation Plan is put in place and regularly reviewed.

Any visitor attending meetings has a responsibility to inform their host of any physical or sensory impairment they may have, including any temporary impairment which may impede their safe evacuation of the premises in the event of an emergency evacuation. It is the responsibility of the host to ensure that temporary measures are put in place for the safe evacuation of their visitor. Prior to the meeting commencing the host should ask those attending the meeting if anyone requires additional assistance to evacuate the premises in the event of an emergency.

Any visitor attending a meeting or event in a community centre has a responsibility to inform their host or those organising the event of any physical or sensory impairment they may have, including any temporary impairment which may impede their safe evacuation of the premises in the event of an emergency evacuation. It is the responsibility of the host or those organising the event to ensure that temporary measures are put in place for the safe evacuation of their visitor. Prior to the meeting or event commencing the host or those organising the event should ask those attending the meeting or event if anyone requires additional assistance to evacuate the premises in the event of an emergency. Refer to Berneslai Homes Community Centre – General Emergency Evacuation Plan.

7.4 Person - Centred Fire Risk Assessment (PCFRA) - in residential purpose-built blocks of flats that are not permanently manned it is difficult and not always possible to implement an individual Personal Emergency Evacuation Plan (PEEP), however Person-Centred Fire Risk Assessments will be carried out for those vulnerable tenants and leaseholders requiring one. Where a vulnerable tenant or leaseholder is identified as requiring a PCFRA this will be carried out by a member of the Fire Safety team. A documented record of the PCFRA will be completed with any recommendations that can be implemented recorded and carried out. A copy of the PCFRA will be held centrally on SharePoint and a copy given to the tenant or leaseholder. In higher risk buildings where a Premises Information Box (PIB) has been provided a list of flat numbers where a tenant or leaseholder has a PCFRA will be provided to inform the fire and rescue service in the event of an emergency.

7.5 Premises Information Box (PIB)

All higher risk residential buildings have a personal information box (PIB). The PIB is located in the communal area where the fire alarm indicator control panel is located and easily accessible by the fire and rescue service in the event of an emergency. The Fire Safety team are responsible for ensuring that all PIBs are kept up to date. The content of the PIB will be bespoke to each building, but will include:

- Floor plans, including details / locations of all relevant firefighting equipment.
- The most up-to-date Fire Risk Assessment for the premises.
- Flat numbers of tenants and leaseholders with specific vulnerabilities that may affect their escape in the event of an emergency where a Person-Centred Fire Risk Assessment has been completed.
- Keys to specific/ relevant equipment.

The contents of PIBs will be regularly reviewed by the Fire Safety team and will continue to meet all requirements as set out in current legislation.

8. Fire Safety Training

8.1 Staff

All new employees will complete the online fire safety training as part of their induction training for the company. All employees will complete the online fire safety training annually. Records of the fire safety training will be held centrally. **The fire safety training includes but is not limited to:**

- What to do if you discover a fire and how to raise the fire alarm.
- What to do if you hear the fire alarm.
- How the evacuation of the premises should be carried out.
- What not to do in the event of a fire emergency.
- The duties of those employees with additional tasks in the event of an emergency such as Fire Wardens.
- What to do when in the fire assembly point.
- Types and use of fire extinguishers.
- General fire safety procedures.

In addition to the above all the offices where employees work will have Fire Action notices informing every one of the fire evacuation procedures prominently displayed, normally above or adjacent to the manual fire alarm call points.

Through our strong relationship with South Yorkshire Fire and Rescue Service we will work with them as our partner to enable them to deliver fire safety training to our front-line colleagues and business partners who have direct contact with our tenants and leaseholders.

The training is aimed at improving how South Yorkshire Fire & Rescue Service and BH work together to effectively identify and reduce hazards for people most at risk, (Our customers) with the following objectives:

- Recognise the most **common causes** of fires in the home.
- Identify some **visible warning signs** that may increase the likelihood of a fire.
- Identify people at **increased risk** of having a fire.
- Understand how to **make a referral** to SYF&RS.
- Be aware of what SYF&RS **can and can't do** when visiting people in the community.

8.2 In Residential Premises

Purpose built blocks of flats – any new tenants and leaseholders occupying a flat will receive a fire safety briefing from a member of the fire safety team which will include the “Stay Put” strategy. Fire Safety leaflets containing general fire safety information in the home will also be available for tenants and leaseholders with regular reminders on fire safety and the stay put strategy.

Fire Action notices informing every one of the fire evacuation procedures will be prominently displayed throughout the communal areas.

Other residential premises i.e. terraced houses, bungalows etc. – any new tenants will receive a Fire Safety leaflet containing general fire safety information in the home.

NB – All tenants and leaseholders are responsible for fire safety within their individual homes, including ensuring their escape routes from the property are accessible and available at all times. Regular testing of their smoke detection/fire alarms.

9. Inspections, Testing, Maintenance and Servicing

We will ensure that the inspection, testing, maintenance, and servicing of all the fire safety engineering assets within our tenanted properties is carried out in accordance with the relevant British Standards as required by Fire Safety legislation. This will also include completion of all essential remedial works identified and required during these activities.

9.1 Fire safety engineering solutions

We will ensure that those appointed to carry out the inspections, testing, maintenance and servicing are competent and qualified to do so:

- **Communal fire alarm systems** – tested weekly from a different manual fire alarm call point in rotation. Maintained and serviced annually. (normally 50% every 6 months for larger systems) In accordance with BS 5839 – Fire detection and fire

alarm systems for buildings Part 1: Code of practice for design, installation, commissioning and maintenance of systems in non-domestic premises.

- **Domestic fire alarm systems** – tested monthly. Maintained and serviced annually. In accordance with BS 5839 – Fire detection and fire alarm systems for buildings Part 6: Code of practice for design, installation, commissioning and maintenance of fire detection and fire alarm systems in domestic premises.
- **Emergency lighting systems** – tested monthly. Maintained and serviced annually in accordance with BS 5266 Part 1- Code of practice for emergency lighting of premises and BSEN 5017/BS 5266 Part 8 – Code of practice for emergency lighting systems.
- **Dry riser systems** – six monthly visual inspections. Maintained, serviced and pressure tested annually in accordance with BS 9990 – Code of practice for non – automatic fire-fighting systems.
- **Automatic domestic sprinkler suppression systems** – tested and maintained annually in accordance with BS 9251 – Code of practice for sprinkler systems for residential and domestic occupancies.
- **Fire extinguishers** – monthly visual inspections. Maintained and serviced annually in accordance with BS 5306 Part 3 – Code of practice for commissioning and maintenance of portable fire extinguishers.
- **Automatic opening vents (AOVs)** – weekly visual inspections for operation during the weekly fire alarm test. Monthly manual operation. Maintained and serviced annually in accordance with BS 7346 – Components for smoke control systems Part 8 – Code of practice for planning, design, installation. Commissioning and maintenance.

In addition to the above we will also carry out the following required inspection, testing, maintenance, and servicing in premises which will further contribute to reducing the fire risk:

- An annual Landlords Gas Safety check in accordance with the Gas Safety (Installation and Use) Regulations.
- A five yearly Domestic Electrical Condition Report (EICR) in all tenanted premises in accordance with the IET Wiring Regulations BS7671.
- A five yearly Electrical Condition Report (EICR) in all communal areas of purpose-built blocks of flats, offices, community centres etc. in accordance with the IET Wiring Regulations BS7671.
- Regular inspection and testing of portable electrical appliances and equipment that has been provided by and kept by us (Berneslai Homes) in line with the Portable Appliance Testing Procedures and Guidance provided by the Health and Safety Executive Guidance Note on PAT testing.

9.2 Fire Doors

We will ensure that all flat entrance fire doors and all communal fire doors are subject to an inspection programme where applicable under the Fire Safety Act 2021, Fire Safety (England) Regulations 2022 and Building Safety Act 2022. Any recommended remedial works required following the inspection and checks is carried out to full completion by a competent and qualified fire door specialist:

- Flat fire doors are inspected every 12 months.
- Communal area fire doors (staircase fire doors, cross corridor doors, plant room fire doors, service riser fire doors, storeroom fire doors etc.) will be inspected every 3 months for the three high rise schemes and annually for all other blocks of flats.

All fire doors throughout the property estate will be QR coded, and records of all the fire door inspections and checks held centrally on Compliance 365. The fire door inspections and checks are carried out by the BH fire safety team staff who are competent and qualified fire door inspectors.

9.3 Furniture and Furnishings

In all the properties we manage where we provide furniture and furnishings inclusive of the communal areas in purpose-built blocks of flats, the furniture and furnishings will be fire retardant in compliance with the Furniture and Furnishing (Fire Safety) Regulations 1988 (as amended).

10. Competency of Appointed Contractors and Employees

We have a responsibility to ensure that both directly employed employees, and appointed contractors are appropriately skilled, qualified and are competent to undertake the relevant services. The following controls will run to ensure competence can be proven:

10.1 Competency of Fire Risk Assessment Consultants

- We will ensure that any external fire risk assessment consultants undertaking fire risk assessments on our premises are competent and accredited to do so.
- External fire risk assessment consultants should be able to demonstrate competency individually by having a recognised Fire Risk Assessment qualification have Graduate Membership of the Institute of Fire Engineers (GIFireE) and or Membership of the Institute of Fire Safety Managers (MIFSM).
- Preferably but not a requisite requirement external fire risk assessment consultants should individually be registered on a recognised national scheme such as the Institution of Fire Engineers Register of Fire Risk Assessors, or the Institute of Fire Safety Managers Register of Fire Risk Assessors or similar national schemes.
- Any company providing their fire risk assessment services should be assessed and registered under BAFE SP205–1 Life Safety Fire Risk Assessment Scheme. External fire risk assessment providers (whether individuals or companies) should be able to prove a reasonable experience of undertaking fire risk assessments for

the type of premises that we manage and come within the scope of the Regulatory Reform (Fire Safety) Order.

- When appointing an external fire risk assessment company and their individual fire risk assessment consultants we will refer to the document “A Guide to Choosing a Competent Fire Risk Assessor” compiled by the Fire Risk Assessment Competency Council.

10.2 Competency of Maintenance Contractors

- All contractors appointed by us will be assessed as being appropriately competent to undertake the work for which they are being considered to do. Contractors where possible should be third party accredited to a nationally recognised scheme, such as BAFE SP2023-1(relevant part) for fire alarm contractors, BAFE SP101 for firefighting equipment and so on.
- We will ensure that our requirements and conditions are imposed on all external contractors. This will be work specific but should ensure that contractors do not place our customers, themselves, or other relevant persons at greater risk from their acts or omissions.
- In addition, we will ensure satisfactory control over all works carried out by both external and inhouse contractors. This will involve the confirmation of competent contractors, controlling and checking safe work practices and procedures.
- Control over works and contractors within our higher fire safety risk buildings is particularly important and we will consider a hierarchy of measures to manage such situations:
 - Through the regular review of contractor competencies including the qualifications and training of individual operatives.
 - Using signage within higher fire risk buildings prohibiting contractor actions without notification to the relevant Scheme Manager or Fire and Asbestos Compliance Manager or the Fire Safety Officer.
 - By post-inspection of any completed works; and
 - Through regular review of the fire risk assessment of the building.
- It is the responsibility of the contractor to carry out a risk assessment and produce a method statement for the works (RAMS) before carrying out any works. The RAMS may:
 - Demonstrate that no further action needs to be taken before the works can go ahead.
 - Demonstrate that the works can go ahead but methods need to be adjusted to account for fire safety issues that have been highlighted.
 - Require the contractor not to continue with the works until they have looked at the fire risk assessment and fire strategy for the building; and
 - Require the contractor to request a survey or some form of testing to be undertaken and completed.

- Within the RAMS the contractors must make note of any fire compartment walls or ceilings that are likely to be breached. How the breaches are going to be correctly fire stopped and sealed. What certified materials will be used and produce the relevant certification confirming that the penetrations have been correctly sealed, fire stopped to the exact fire rating of the fire compartment.
- Where contractors are undertaking any works that will penetrate the fire compartmentation, and we are aware of the works. The contractor will require to seek our approval for the works prior to commencing, we will also carry out a post works inspection of the completed works and all the relevant certification for the works.
- All contractor competencies should be subject to regular reviews (at least annually) or when there is a change of contract or contractor.

10.3 Competency of Employees

- We will keep a record of the skills and training to ensure that all employees involved in the processes and procedures included in this Fire Safety Management Plan have the correct and suitable training.
- A detailed competency framework should be in place to provide assurance that all internal employees are appropriately trained and skilled including being subject to regular appraisals and one to one meetings with their direct line management.

11. Reactive Repairs, Refurbishment Programmes, Planned Programme of Works and Major Renovation Projects

11.1 Reactive Repairs

- Our business partners or appointed contractors, sub-contractors carrying out reactive repairs must take into account and be conscious of fire safety and the impact the work they are doing may have on fire safety in the premises they are working in.
- The adequacy of any proposed temporary repairs that may have an impact on the fire safety of the premises, or in the case of our purpose-built blocks of flats fire strategy and evacuation strategy must be discussed and agreed with the BH Fire Safety Officer before the temporary works are carried out.
- A suitable Risk Assessment and Method statement (RAMS) should be completed to ensure continuity of fire safety, particularly any work relating to fire safety systems, works that may temporarily impede a means of escape route or when hot works are being undertaken.

11.2 Refurbishment Programmes and Planned Programme of Works

- Where required, we will ensure that all relevant Building Control requirements for fire safety is followed. We will ensure that Building Regulations approval and completion certificates are obtained and that the premises are assessed for fire safety prior to the

area of the works being handed back to BH and occupation. Where applicable ensuring a suitable and sufficient Fire Risk Assessment is carried out.

- Before beginning any planned programme of works or refurbishment works, a risk assessment must be undertaken. The risk assessment will consider the scope of works being carried out within the premises taking into account the available fire safety information i.e. current fire strategy plans, current fire risk assessment, remedial actions from the FRA, all fire safety engineering solutions installed within the premises, any previous remedial works carried out in the premises etc. The primary purpose of the risk assessment will be to assess if there is a foreseeable risk relating to the impact on fire safety and if the current proposals manage that risk. The risk assessment will form part of the Construction Design Management (CDM) if applicable to the proposed works and the Risk Assessment Method Statements (RAMS) for the proposed works.

- Where the risk assessment shows that the work being carried out by the contractor has a foreseeable risk of an impact on existing fire safety measures in the building, we will ensure that a suitable volume of post-project fire safety checks proportionate to the risk will be completed by the BH fire safety team working independently to the contractor. These checks will provide confirmation that all the existing fire safety measures are still in place and fully functional.

- It is not unusual for fire compartmentation and fire stopping to be disturbed or breached during refurbishment works or planned programme of works. The post project fire safety checks will include visual inspections of vulnerable locations such as roof voids, service risers, plant rooms above suspended ceilings etc.

- The BH Fire Safety Officer will make the necessary arrangements for a suitable and sufficient Fire Risk Assessment to be completed if the building falls within the scope of the Regulatory Reform (Fire Safety) Order.

11.3 Major Renovation Projects

For major renovation projects, the following principles should be applied:

- The design responsibility should be developed as early as is practical and should target early consideration of Building Regulations requirements that must result in full sign off of the fire safety strategy and fire safety engineering solutions before any work commences.

- Early involvement of Competent Persons and all parties concerned to ensure the design and again in particular everything relating to fire safety is well considered and co-ordinated.

- Early involvement of South Yorkshire Fire and Rescue Service and Building Control should be instrumental.

- Care will be needed to ensure that the Design team has the skills, knowledge, and experience to deliver the works.

- An evaluation of the potential conflict in the design and procurement strategies and the risk associated with the appointed contractor being incentivised to deliver the lowest cost solution to meet their employers' requirements.

- Regular inspections by a competent person during the phases of the major renovation project should be completed and used to provide regular assurance.
- Agreed mandatory activities prior to handover to include involvement of the BH Fire Safety Officer and/or fire safety team, involvement of South Yorkshire Fire and Rescue Service if applicable. At this stage the BH Fire Safety Officer will make the necessary arrangements for a suitable and sufficient Fire Risk Assessment to be completed if the building falls within the scope of the Regulatory Reform (Fire Safety) Order.

12. Managing Tenants and Leaseholders Influences on Fire Safety

12.1 Internal and External Alterations

Customers must not carry out any internal or external alterations without going through the correct permissions process first and obtaining written confirmation that the alterations can go ahead.

Where written permission has been given to carry out any alterations, the works must be carried out by qualified and competent contractors. Where the works include alterations to electrical circuits or gas supply, pipework, and equipment a copy of the final certification for the works must be provided to BH for their internal records.

Where we find that alterations have been carried out without going through the correct process and receiving written permission. Customers will be advised to use qualified and competent contractors to return the premises to its original state and provide copies of any final certification for the works to BH for their internal records. **Where the customer refuses to carry out the works we will go through the legal process of appointing our own qualified and competent contractors to carry out the works and charge back the cost to the customer.**

12.2 Security Gates and Grilles

Customers must not at any time fit metal security gates or grilles in their homes where it will impede their means of escape and safety in the event of a fire incident. This also includes permanently securing of window openings e.g. screwing the window openings to the window frames.

Where we find that customers have fitted metal gates and grilles in their homes or permanently secured window openings, customers will be advised to remove the metal gates and grilles including the removal of any permanent security measures to the window openings as an immediate priority. **Where the customer refuses to carry out the works we will carry out the works as a priority and charge back the cost to the customer.**

12.3 Multi Fuel Stoves, Log Burning Stoves and Bio Ethanol Fires

The installation and use of multi fuel stoves, log burning stoves and bio ethanol fires is not permitted in those premises managed by BH. Bio ethanol fuel is extremely flammable with most accidents occurring when topping up the fuel and the fuel spitting on to clothes or catching other flammable objects in the room where the bio ethanol fireplace is located.

Where we find that customers have installed and are using multi fuel stoves, log burning stoves or bio ethanol fires, customers will be advised to stop using them with immediate effect. Customers will then be given a timescale to arrange for a qualified and competent contractor to remove the stoves/fires. **Where the customer fails to comply with the removal timescale or refuses to carry out the works, we will appoint our own qualified and competent contractors to carry out the works and charge back the cost to the customer.**

12.4 Installing/Erecting of External Sheds and Greenhouses

Where written permission has been given for a customer to install/erect an external shed or greenhouse the following points must be adhered to:

- The shed/greenhouse must be built to a professional standard with the total floor area being no greater than 1.8 metres by 2.4 metres. (6 feet by 8 feet)
- The shed/greenhouse must be 2 metres (6 feet 6 inch) from the building external elevation/façade and 0.9 metres (3 feet) away from any boundary line.
- Any electrical installation within the shed/greenhouse must be carried out by a qualified electrician and a copy of the installation certification passed onto BH for our records.
- Multi fuel stoves, log burning stoves or bio ethanol fires must not be installed or used within the shed/greenhouse.

Where we find that customers have installed/erected an external shed/greenhouse without going through the correct process and receiving written permission. We will assess the situation against the criteria above. If the assessment of the installation/erection of the external shed/greenhouse complies with the criteria above the customer will be advised to apply for permission to retain the shed/greenhouse. If the assessment of the installation/erection of the external shed/greenhouse does not comply with the criteria above the customer will be given a timescale to dismantle the shed/greenhouse and remove all materials from the premises grounds. **Where the customer fails to comply with the removal timescale or refuses to carry out the works, we will appoint our own contractors to carry out the works and charge back the cost to the customer.**

12.5 Purpose Built Blocks of Flats External Balcony Areas

In those purpose-built blocks of flats where individual flats have external balconies, customers must not store any form of combustible materials on the balcony. Any furniture on the balcony must be kept to the minimum and be fire retardant in compliance with the Furniture and Furnishing (Fire Safety) Regulations 1988 (as amended). **External heaters or any form of heating and BBQ equipment must not be used on the external balcony.**

Where we find that customers are not complying with our fire safety requirements for external balcony areas, customers will be advised to remove the items that are a fire risk with immediate effect. **Where the customer refuses to carry out the works we will carry out the works as a priority and charge back the cost to the customer.**

12.6 BBQ Equipment

Where our customers have suitable external spaces i.e. gardens it is acceptable that BBQs will be used when the weather is suitable for the occasion. **The following points should be followed for the safe use of BBQ equipment:**

- Always adhere to the manufacturers or retailer's instructions for using the equipment especially gas fired BBQ equipment and small one-use disposable BBQs.
- Always keep the BBQ in good working order, never use it if it is not safe to do so.
- Always use the BBQ on a flat surface, away from trees, shrubs or washing lines where clothes may have been hung out to dry.
- Ensure the BBQ is a safe distance from the building when being used, at least 2 metres or more if possible.
- Do not use petroleum spirit to assist with igniting the BBQ, use the manufacturers recommend firelighters.
- When the BBQ is lit and being used, keep children and pets well away from it.
- Never leave the BBQ unattended when lit and being used.
- Always have a bucket of water or sand available in the event of an emergency.
- When finished using the BBQ dampen the ash with water to ensure it is fully burnt out/extinguished before removing the ash remnants and storing the BBQ away.
- **Never dispose of hot ash into a dustbin or refuse area.**
- If using a gas fired BBQ when finished, disconnect the gas bottle before storing away, ensure that the gas bottle is stored in a cool ventilated area away from direct sunlight and sources of heat.

NB – If using a gas fired BBQ check it for leaks and cracks to the cylinder and pipework if it is damaged do not use it. If it is suspected that the cylinder is leaking, remove it to a well-ventilated area away from any sources of ignition and heat, contact the manufacturers or retail supplier immediately for advice and guidance.

12.7 Stored Oxygen and Use of Oxygen Cylinders

Oxygen can be a serious fire hazard, and adequate precautions require to be taken when oxygen is being used in the home. Customers must only use oxygen cylinders and equipment that have been medically prescribed for them, customers should also notify BH that they have been medically prescribed oxygen so that a record can be retained and if required South Yorkshire Fire and Rescue Services notified. In the higher risk purpose-built blocks of flats where a Premises Information Box (PIB) is installed details of the flat number where a tenant/leaseholder is an oxygen user will be kept for South Yorkshire Fire and Rescue Services in the event of an emergency.

The following general precautions should be taken when using medically prescribe oxygen in the home:

- Keep the oxygen cylinders at least 2 metres away from flames or any source of heat.
- Do not use flammable liquids, such as paint thinners or aerosols near oxygen.
- Do not use petroleum-based products (such as Vaseline or Vicks) or other emollients near oxygen.
- Do not allow anyone in the room to smoke when oxygen is being used inclusive of electronic cigarettes.
- Ensure that the smoke detection/fire alarms in the home are functioning correctly.
- Plug the cylinder directly into the electrical mains, do not use an extension lead.
- Always turn off the oxygen equipment when not in use.
- Oxygen cylinders have an expiry date, check the date on the cylinder regularly to ensure it is not out of date.
- If the date on the cylinder has expired, stop using the cylinder and contact the medical supplier of the cylinder.

Always store oxygen cylinders:

- Securely to prevent the cylinder from falling.
- Away from areas that would block or impede the fire exit escape routes from the home.
- In areas that can be well ventilated.
- Away from heat and light sources.
- In an area that is not used to store any other flammable materials such as aerosols, cleaning materials etc.
- Away from combustible materials such as paper, cardboard, curtains and do not cover the oxygen cylinder with clothing.

NB - Once oxygen has been medically prescribed the organisation supplying the oxygen equipment are responsible for the annual maintenance of the oxygen equipment. This includes the upkeep, reporting and replacement of faulty equipment.

12.8 Safe Use of Emollients

Medical skin creams, ointments, lotions, gels, sprays, bath oils or soap substitutes are important forms of medication in managing and controlling different types of skin conditions such as eczema, psoriasis and ichthyosis. However, emollients can transfer from the skin onto clothing, bedding and bandages. In the presence of an ignition source, fabric with dried emollient on it can catch fire much more quickly and burn hotter than clean fabrics. **This can cause serious burns and in severe cases be fatal.** Implementing the following points will help reduce the risk:

- Do not smoke, cook or go near to any naked flames or sources of heat whilst wearing clothing or dressings that have been in contact with emollient treated skin. If this is not possible take steps to reduce the risk. Remove long sleeved or loose clothing before cooking. Put a thick uncontaminated shirt, overall or apron over the clothes.
- Change and wash contaminated clothes frequently at the highest temperature recommended by the washing machine manufacturer. This will reduce the build-up of emollient on them but does not remove it completely and the risk may still remain.
- Take care the emollient doesn't dry onto cushions, soft furnishings, and bedding. If it does, use uncontaminated throws/covers on the soft furnishings and wash the bedding frequently as guided in the bullet point above.
- Our customers should be advised to ensure family, relatives and where applicable carers are aware of the treatment, they are using so that they can assist them to stay safe when using emollients in their homes.

12.9 Mobility Scooters, E-bikes and E-scooters

Mobility scooters, e-bikes and e-scooters like numerous other electrical items are powered by lithium batteries. When used and charged correctly in accordance with the manufacturer's instructions and guidance they are not dangerous. Customers for the safety of themselves and neighbouring customers who may be affected by the use and charging of the equipment should only purchase mobility scooters, e-bikes, e-scooters, batteries, and chargers from a reputable company/supplier and always adhere to the manufacturer's instructions and guidance for using the equipment including the maintenance/service requirements. Customers should also check the equipment is marked with a CE or UKCA mark to ensure the equipment complies with UK product safety standards.

In purpose-built blocks of flats the following points should be adhered to:

- Mobility scooters, e-bikes and e-scooters must not be stored or left within the communal areas or charged within the communal areas.
- In blocks of flats where designated fire compartmented charging rooms are provided, mobility scooters, e-bikes and e-scooters must be charged within these rooms.
- In blocks of flats where designated fire compartmented charging rooms have not been provided, mobility scooters, e-bikes and e-scooters must be kept within the individual tenant's/leaseholder's flat when not being used. It is also good practice to disconnect the battery from the scooter.

Safely charging mobility scooters, e-bikes and e-scooters in the home

Statistics indicate that most fires relating to mobility scooters, e-bikes and e-scooters occur at home and during the period when the battery for the equipment is being charged. **There are a number of points that can be implemented to reduce the risk of fire when charging the equipment in the home:**

- Do not charge them in bedrooms or where escape routes can be blocked and impeded e.g. hallways.
- Do not leave the battery charging in your home unattended i.e. when you are out or while you are asleep.

- Do not cover charges or battery packs when charging.
- Do not overload sockets or use inappropriate extension leads.
- Do not charge or store batteries in direct sunlight or on hot areas. (45 degrees C or above)
- Do not charge batteries in the vicinity of combustible materials as paper, cardboard, curtains or hazardous materials such as such as aerosols, cleaning materials etc.
- Always switch off the mains plug socket and unplug your charger when you have finished charging.

If a replacement battery or charger is required for the equipment it should be purchased from the manufacturer or retailer the original equipment was purchased from. They will ensure that the replacements provided are safe to use with the equipment.

The warning signs that a mobility scooter, e-bike and e-scooter battery is a fire hazard.

A lithium battery fire can develop quickly, within a few seconds, often without warning emitting large volumes of toxic fumes and smoke. The early formation of smoke or a white vapour cloud indicate the start of a battery failure and the possibility of it bursting into flames. There are a number of other signs listed below that the battery may be a fire hazard.

Stop using or charging the equipment's battery immediately if the following points are noticed or identified:

- **Overheating** – if the equipment's battery feels extremely hot to touch.
- **Deformation** – if the battery looks swollen, any type of lump on the battery or the battery is leaking.
- **Noise** – if the battery is making hissing or cracking sounds.
- **Smell** – there is a strong or unusual smell coming from the battery.
- **Performance** – if the battery does not fully charge or is taking longer to charge than normal.
- **Smoke** – the battery or equipment is emitting smoke.

The following actions should be carried out if it is identified that the lithium battery is a fire risk:

- If the device starts emitting smoke or catches fire, if safe to do so switch the charger off, raise the alarm to alert everyone in the home, everyone should evacuate the home immediately. When safely out of the building call 999 immediately requesting the attendance of the fire and rescues services.
- If the battery shows any signs of failure, turn off the device and unplug it from the power supply immediately. Remove the equipment from the home and leave it a safe distance from the building at least 2 metres or more if possible.
- Call the equipment manufacturer or retailer it was purchased from for further advice.
- Ensure the faulty charger or battery to the Citizens Advice Consumer Service who can also provide advice on customer consumer rights.

E-bike conversion kits

We are aware that there are conversion kits available that can be used to convert standard bicycles into e-bikes.

Customers should only bring into the premises that we manage a converted e-bike that has been converted by a competent and qualified technician who can carry out the conversion works. They will be responsible for ensuring that the e-bike conversion is safe, fitted with the correct motor, battery and charger. The conversion equipment will also be marked with a CE or UKCA mark to ensure the equipment complies with UK product safety standards.

Customers installing the conversion equipment themselves (unless qualified to do so) could lead to safety issues with the e-bike and increase the fire risk within their home. It could also invalidate the manufacturer's warranty and make the customer ultimately responsible for any consequent fire damage, accident, and injuries to third party personnel.

Where we find that customers are storing and charging a converted e-bike in their home that has not been converted by a competent and qualified technician therefore increasing the fire risk in their home, their safety, and the safety of neighbouring customers and their properties. Customers will be advised to stop storing, charging and must remove the converted e-bikes from their home with immediate effect. **Where the customer fails to comply and refuses to remove the converted e-bike from their home, we will take the necessary action to remove the converted bike for the safety of all concerned and charge back the cost to the customer.**

13. Monitoring and Assurance

13.1 Monitoring

The following Performance Indicators (PIs) and KPIs will be reported to the EMT, Barnsley Council, Audit and Risk at the frequencies which will be outlined in our Service agreement:

- Buildings with a valid FRA renewed within its due date, as a percentage of total buildings requiring an FRA.
- Remedial actions that are overdue, as a percentage of total outstanding remedial actions.
- Buildings with no outstanding and overdue remedial actions, as a percentage of total buildings subject to an FRA.
- Buildings with fire safety systems / equipment present where all systems / equipment has been tested / maintained in accordance with this policy, as a percentage of total buildings with fire safety systems / equipment.
- Number of notices received by the Fire and Rescue Service in the reporting period.
- Number of notices from the Fire and Rescue Service that are overdue, as a percentage of total outstanding notices; and

- Number of safety occurrences, including any reported fires and fire safety related occurrence reporting (for example to the Health and Safety Executive or Regulator for Social Housing or the Building Safety Regulator) during the reporting period.
- Where relevant information is available, we will benchmark our performance against other organisations to ensure the highest standards of service delivery.

13.2 Assurance

The following assurance activity will be undertaken:

- Internal checking, independent of the Operational teams, to provide additional assurance around the accuracy of data and reporting.
- Internal audit to provide independent assurance on the operation and effectiveness of controls. Frequency agreed as part of the Internal Audit Programme and reported to the EMT.
- External audits will be carried out as and when required by an independent third party.

14. Communication

We will communicate our fire safety requirements and encourage our tenants and leaseholders to encompass fire safety through the following actions:

- Provide a copy of an FRA or evidence of fire equipment servicing to a relevant tenant and leaseholder within 15 days when reasonably requested to do so.
- Inform tenants and leaseholders of the importance of fire safety on a regular basis, through the provision of information through our website, newsletters and leaflets and information at sign-up.
- In purpose-built blocks of flats all new tenants and leaseholders will receive a fire safety briefing from a member of the fire safety team including the “Stay Put” strategy where applicable.
- Maintain a clear approach to gaining access to conduct surveys and undertake works and be clear that enforcement action may be taken when it is necessary to do so.
- Communicate with tenants and leaseholders (Where applicable) through appropriate ‘Fire Action’ signage that will be prominently displayed throughout communal areas.
- Communicate with tenants and leaseholders (Where applicable) annually to remind them of the importance of undertaking periodic electrical and gas safety checks.

- We will engage with BH resident groups to ensure all resident feel included, safe, and regularly update on fire safety issues.
- Maintain a clear complaints process and monitor and record complaints that indicate a risk to a fire safety and ensure the issues are investigated and remediated proportionate to the fire risk.
- We will communicate with employees through induction training, fire drills, appropriate signage and the Employee Hub.
- Through the regular Fire Safety Group meetings chaired and led by the Fire Safety Officer brief and update managers and business partners on the current status of the closure of fire risk assessment actions, current status of the fire risk assessment programme and forthcoming remedial works, updates on fire incidents and any other appropriate fire safety updates.
- Engage in a regime of regular and proactive communication with South Yorkshire Fire and Rescue Service, to ensure good lines of communication and operational familiarity.

Lift Safety Policy



Name	Lift Safety Policy
Owner	Executive Director of Property Services
Last Review	June 2024
Next Review	June 2026
Consultation Board	30 th September 2021
Consultation SMT / EMT	21 st September 2021
Consultation Residents (if applicable)	N/A
Equality Impact Assessment	12th May 2021
Confidentiality	Low
Board Approval	30th September 2021

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1 Introduction

- 1.1 Landlords are responsible for maintaining passenger lifts and for carrying out periodic thorough examinations and inspections to ensure those lifts operate safely. In addition to lifts landlords have a responsibility to maintain stair lifts, hoists and other lifting equipment to ensure the safety of their tenants.
- 1.2 Barnsley Metropolitan Borough Council are the Landlord and Berneslai Homes are the Landlord agent with delegated responsibility to manage and maintain the Councils housing stock via the ALMO arrangement. There are passenger lifts to assist tenants to and from their homes. In addition to these, there are domestic properties which have been adapted with living aids such as stair lifts, hoists and other lifting equipment to enable tenants to continue to live independently, and responsibility is taken for those which have been installed with our knowledge.

2 Policy Objectives and Scope

- 2.1 The key objective of this policy is to ensure that our Board, staff, partners and tenants are clear on our legal and regulatory obligations and how we will meet them. It provides the framework our staff and partners will operate within in respect of lift safety.
- 2.2 Berneslai Homes must establish a policy which meets the requirements of the key legislation and codes of practice set out in section 3. In addition to this, the policy must provide assurance that measures are in place to ensure compliance with these regulations and to identify, manage and/or mitigate risks associated with lift safety.
- 2.3 The policy is relevant to all our employees, tenants, contractors and other persons or other stakeholders who may work on, occupy, visit, or use our premises, or who may be affected by our activities or services. It should be used by all to ensure they understand the obligations placed upon us to maintain a safe environment for tenants and employees within the home of each tenant and within all non-residential premises or areas of buildings. Adherence to the policy is mandatory.

3 Regulatory Standards, Legislation and Codes of Practice

- 3.1 **Regulatory Standards** - Berneslai Homes must comply with the requirements of the Regulator of Social Housing's (RSH) regulatory framework and consumer standards for social housing in England. The delivery of this policy will ensure our compliance with the relevant standards, with the Homes Standard being the key one.
- 3.2 **Legislation** - the principal legislation applicable to this policy is The Health and Safety at Work Act 1974, the Lifting Operation and Lifting Equipment Regulations 1998 (LOLER) and the Provision and Use of Work Equipment Regulations 1998 (PUWER).
- 3.3 **Code of Practice** - the principal codes of practice applicable to this policy are:
 - 3.3.1 **ACoP L113** - Safe use of lifting equipment: Lifting Operations and Lifting Equipment Regulations 1998 (2nd edition 2014).
 - 3.3.2 **INDG422** - Thorough examination of lifting equipment: A simple guide for employers (2008).
 - 3.3.3 **INDG339** - Thorough examination and testing of lifts: Simple guidance for lift owners (2008).

- 3.4 **Sanctions** - Berneslai Homes acknowledges and accepts its responsibilities in accordance with the regulatory standards, legislation and codes of practice and that failure to discharge these responsibilities properly could lead to a range of sanctions including prosecution by the Health and Safety Executive under the Health and Safety at Work Act 1974, prosecution under the Corporate Manslaughter and Corporate Homicide Act 2007 and via a serious detriment judgement from the Regulator of Social Housing (RSH).

4 Additional Legislation

- 4.1 This lift safety policy also operates in the context of the following additional legislation:
- 4.1.1 The Management of Health and Safety at Work Regulations 1999
 - 4.1.2 The Provision and Use of Work Equipment Regulations 1998 (PUWER)
 - 4.1.3 The Workplace (Health Safety and Welfare) Regulations 1992
 - 4.1.4 The Building Regulations 2004 - Part M
 - 4.1.5 Construction (Design and Management) Regulations 2015
 - 4.1.6 Disability and Discrimination Act 2005
 - 4.1.7 Equality Act 2010
 - 4.1.8 Housing Act 2004
 - 4.1.9 Landlord and Tenant Act 1985
 - 4.1.10 Data Protection Act 2018
 - 4.1.11 Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)
 - 4.1.12 Homes (Fitness for Human Habitation) Act 2018

5 Obligations

- 5.1 Landlords are responsible for maintaining passenger lifts and for carrying out periodic thorough examinations and inspections to ensure those lifts operate safely. Section 3 of the Health and Safety at Work Act 1974 requires employers, such as landlords, to have responsibility for the health and safety of employees and people using or visiting their premises so far as reasonably practicable.
- 5.2 Passenger lifts in workplaces (for example, offices and communal blocks), which are primarily used by people at work, are subject to the Lifting Operations and Lifting Equipment Regulations 1998 (LOLER) and the Provision and Use of Work Equipment Regulations 1998 (PUWER).
- 5.3 Landlords are required to ensure that all lifts, when in use, are thoroughly examined after substantial and significant changes have been made, at least every six months if the lift is used at any time to carry people (or in accordance with an examination scheme) and following "exceptional circumstances" such as damage to, or failure of, the lift, long periods out of use or a major change in operating conditions which is likely to affect the integrity of the equipment.

- 5.4 Where stair lifts, hoists or through floor lifts have been provided for residents, normally as part of an adaptation, landlords have responsibilities for the safety of all users under Section 3 of the Health and Safety at Work Act 1974. These may be adequately discharged by undertaking maintenance, inspection and a 6-monthly thorough examination. LOLER (thorough examination) and PUWER (maintenance and inspection) apply only to stair lifts provided as work equipment for use by employees.
- 5.5 Insurers may impose demands for similarly stringent levels of risk management to cover public liability.

6 Statement of Intent

- 6.1 We acknowledge and accept our responsibilities with regard to lift safety and the inspection and maintenance of lifts, stair lifts, hoists and other lifting equipment.
- 6.2 We will take responsibility for all lifts, stair lifts, hoists and other lifting equipment in communal areas, and all lift installations and equipment in tenant's homes that we are aware of.
- 6.3 We will maintain a risk assessment for lift safety operations, which sets out all of our key lift safety risks together with appropriate mitigations. This will include carrying out the required testing, examination and maintenance of all lifting equipment, and taking action (within the advised timescales) to remedy any faults or defects identified through routine inspections or insurer's thorough examinations.
- 6.4 All lifting equipment that is used on sites we own or manage will be thoroughly examined by a competent person before it is commissioned into use and then subject to periodic examinations in accordance with the equipment's examination scheme.
- 6.5 We will ensure that we meet all of our legal requirements in regard to lift safety operations via a combination of regular inspections, thorough examinations (in conjunction with our insurers) and periodic routine maintenance of all lifting equipment within properties we own and manage.
- 6.6 A Thorough Examination will be carried out on all known aids and adaptations designed for lifting operations, including platform lifts, stair lifts and hoists, in properties we own and manage. These checks will take place every six months if the lift is being used to carry people and every 12 months if only carrying loads. These checks may also take place more frequently if required to be in line with manufacturers' recommendations.
- 6.7 We will ensure that all lifts in properties we own and manage will be fully accessible for disabled users, as per the requirements of the Disability Discrimination Act 2005, the Equality Act 2010, and to the specifications outlined in Part M of the Building Regulations 2004.
- 6.8 We will endeavour to ensure that all lifts and lifting equipment in properties and workplaces we own and manage will be in full working order at all times. Where we become aware that lifts or lifting equipment are not operating as they should, we will issue and ensure the completion of emergency repairs orders to remedy faults as quickly as possible.

- 6.9 Clear procedures will be in place and communicated to, and understood by, all relevant staff, for appropriate action in the event of any persons becoming trapped in lifts we are responsible for. Berneslai Homes' staff cannot release any persons trapped in lifts as they are not competent to do so safely but may provide reassurance until such time as the relevant lift maintenance contractors and/or emergency services arrive, as appropriate. We will maintain a service level agreement with lift maintenance service providers that ensures a response time of no longer than 1 hour in cases of entrapment.
- 6.10 All passenger lifts will have 2-way communication fitted that dials directly to a dedicated call center. In cases of entrapment call handlers will follow a scripted risk assessment to determine the medical condition of any persons that may be trapped. If there is an urgent concern for a persons' welfare the emergency services will be called and asked to attend immediately.
- 6.11 We will respond and take remedial action for any defects to aids and adaptations designed for lifting operations which are identified during regular use as part of our normal provisions for repairs and maintenance. All requests of this nature will be treated as an urgent priority.
- 6.12 We will operate robust processes and controls to ensure that all remedial works identified through routine maintenance inspections and insurer's inspections are completed within a reasonable timescale commensurate with the risk identified.
- 6.13 Robust processes and controls will be operated to ensure that any health and safety incident with regard to lift safety is properly reported as required under RIDDOR. These include defects classed as immediately dangerous.
- 6.14 We will operate robust processes and controls to manage works to void and occupied properties that may affect existing lifts, stair lifts or hoists. All lifts or lifting equipment within domestic properties will have a Thorough Examination before the property is re-let in order to ensure it is safe.
- 6.15 We will operate a robust process to gain access to properties where tenant vulnerability issues are known or identified, whilst ensuring we can gain timely access to any property in order to be compliant with this policy and safeguard the wellbeing of the tenant.
- 6.16 We will operate robust processes and controls when letting properties to ensure consideration as to the suitability of the accommodation for the prospective tenant in respect of any lifts or lifting equipment installed.
- 6.17 We will maintain a plan of all continuous improvement activity in respect of lift safety.
- 6.18 We will ensure contracts/service level agreements are in place with the contractors responsible for delivering any lift safety inspection and remedial works.
- 6.19 We will operate effective contract management arrangements, in the form of regular client-led meetings, with standard agendas and minutes produced, key performance indicators analysed and programmes and performance scrutinised.
- 6.20 We will operate a robust process for the management and rectification of immediately dangerous situations identified during the lift safety check or any other maintenance work.

7 Resident Involvement and Engagement

- 7.1 Berneslai Homes considers good communication essential in the effective delivery of lift safety, and we will establish and maintain a resident engagement strategy and programme to support tenants in their understanding of lift safety and to assist us in engaging with vulnerable tenants successfully.
- 7.2 We will share information clearly and transparently and will ensure that information is available to tenants via leaflets and information on our website.

8 Compliance Risk Assessment/Inspection Programmes

- 8.1 **CDM** - to comply with the requirements of the Construction (Design and Management) Regulations 2015 (CDM) a Construction Phase Plan will be completed for all repairs work to void and tenanted properties (at the start of the contract and reviewed annually thereafter), component replacement works and refurbishment projects. This plan will detail any lift installations that may be affected by the works and detail all necessary work required to make safe and reinstate lift installations to ensure that they are safe to use and continue to comply with all relevant legislation and any written examination scheme, including any testing and maintenance.
- 8.2 We will carry out a programme of maintenance visits by competent persons to all properties that have a passenger lift, stair lift, hoist or other lifting equipment and a written examination scheme in place. These programmes will ensure that all maintenance and testing set out in the written examination scheme is fully completed at the times and intervals stated.
- 8.3 We will oversee a programme of thorough examinations of passenger lifts by competent contractors appointed by our insurers. This is to ensure that our responsibilities towards lift safety are being discharged and to provide our insurers with adequate assurance around the quality of lift safety management.
- 8.4 **Properties managed by others** - we will we obtain records of a valid Thorough Examination for lifts within any properties that are managed by others, and step in and carry out the examination and re-charge the managing agent for the cost of this work where they do not provide the required record.

9 Compliance Follow up Work

- 9.1 We will ensure there is a robust process in place for the management of any follow-up works required following the completion of routine maintenance inspections, or where identified by a competent person, when undertaking required maintenance activities.
- 9.2 We will ensure there is a robust process in place for the management of any follow-up works required following the completion of inspections by our insurers.
- 9.3 We will ensure that there is a robust process in place to collate and record details of all remedial works completed against individual installations.
- 9.4 We will ensure there is a robust process in place to investigate and manage all RIDDOR notices issued with regard to lift safety.

10 Record Keeping

- 10.1 We will maintain accurate records against each property we own or manage, identifying where there is a passenger lift, stair lift, hoist or other lifting equipment together with the written examination scheme for each installation. This register will also hold data against each property asset of the type, age and condition of lift plant in place.
- 10.2 We will operate a robust process to deal with all changes to stock, including new property acquisitions, disposals and stock transfers, in order to ensure that properties are not omitted from the lift programme, and to ensure the programme remains up-to-date.
- 10.3 We will maintain accurate records of all written examination schemes and any associated remedial works completed and keep these for a period of not less than 5 years. Records will include the person or people responsible for conducting the inspection, any significant findings of inspections, the written examination scheme and its implementation, and the results of any inspection, test or check carried out, together with the dates. This will also include details about the state of operation and condition of the installation.
- 10.4 We will maintain accurate records of all inspections carried out by our insurers, the findings of these inspections, and records of completed remedial works where identified by our insurer's inspections, including dates.
- 10.5 We will ensure that records of all inspections and thorough examinations will be available to the Competent Person at all times and that hard copies of records can be produced, if required by the local enforcement authority.
- 10.6 We will keep a record of any entrapment incidents and will use these to inform future revisions of Examination Schemes.
- 10.7 We will hold and maintain accurate records on the qualifications of all consultants and engineers undertaking lift inspection and maintenance works.
- 10.8 We will operate robust processes and controls to provide and maintain appropriate levels of security for all lift safety related data.
- 10.9 We will ensure that all contractors' employee and public liability insurances are up to date on an annual basis, and maintain a record of this.

11 Key Roles and Responsibilities

- 11.1 Berneslai Homes Board will have overall governance responsibility for ensuring the Lift Safety policy is fully implemented to ensure full compliance with the regulatory standards, legislation and codes of practice. The Board will need to confirm this is the case to Barnsley Council under the terms of the current ALMO arrangement.
- 11.2 As such the Board will formally approve this policy and review it periodically. The review will be undertaken 2 years after the approval of this new policy, and then every two years thereafter (or sooner if there is a change in regulation, legislation or codes of practice).

- 11.3 The Board will receive regular updates on the implementation of the Lift Safety Policy and lift performance along with notification of any non-compliance issue which is identified. This is so they have assurance that the policy is operating effectively in practice.
- 11.4 The Executive Management Team (EMT) will receive reports in respect of lift management performance and ensure compliance is being achieved. They will also be notified of any non-compliance issue identified.
- 11.5 The Executive Director of Property Services has strategic responsibility for the management of lift safety and ensuring compliance is achieved and maintained. They will also oversee the implementation of the Lift Safety Policy.
- 11.6 The Head of Repairs, Maintenance & Building Safety will be responsible for overseeing the delivery of the agreed lift servicing and maintenance programmes via service level agreement with Barnsley Property Services, and the prioritisation and implementation of any works arising from the inspections.
- 11.7 The housing teams will provide key support in gaining access into properties where access is proving difficult and use standard methods to do so.
- 11.8 The Executive Director of Property will be responsible for ensuring the policy is reviewed every two years, and will notify the Council, Board, EMT and operational team responsible for the delivery of the compliance programme, of the upcoming review. The Executive Director of Property Services will ensure that this review process takes place before the policy expires in September 2023.
- 11.9 The Executive Director of Property Services will ensure that this policy is saved on our shared drive and distributed to all relevant members of staff.

12 Competent Persons

- 12.1 The 'Responsible Person', and the manager(s) with lead responsibility for operational delivery will be appropriately competent, having undertaken appropriate training and having sufficient experience to meet the criteria of a 'competent person' as defined by the Health and Safety Executive (HSE).
- 12.2 We will ensure that only suitably competent consultants and contractors, registered members of the Lift and Escalator Industry Association (LEIA) or equivalent, are procured and appointed to undertake risk assessments, prepare written examination schemes and undertake works in respect of lifts, stair lifts and hoists.
- 12.3 The operational team with responsibility for delivery will annually check and record the relevant qualifications of employees working for these contractors to ensure that all persons are appropriately qualified for the work that they are carrying out.

13 Training

- 13.1 Training will be delivered on this policy and the procedure that supports it.
- 13.2 Training will include team briefings for those employees who need to have a basic understanding and awareness of lift safety but who may not be actively involved in the delivery of the lift safety policy. This will be basic lift safety awareness training.
- 13.3 On the job training will be provided as required to those employees who will be responsible for managing or delivering the programme of lift inspections, planned maintenance and repair works as part of their daily job.

14 Performance Reporting

- 14.1 Robust key performance indicator (KPI) measures will be established and maintained to report on performance in relation to lift safety.
- 14.2 KPI measures will be produced and provided at EMT level on a monthly basis and Board level on a quarterly basis. As a minimum, these KPI measures will include reporting on:
 - The number of current domestic, non-domestic and 'other' properties with a passenger lift, stair lift, hoist or other lifting equipment and any changes in this number from the previous month;
 - The numbers and percentages 'with' and 'without' an 'in-date' service record and thorough examination record;
 - The number of remedial actions outstanding and overdue from service visits or through examinations
 - The number of entrapments within lifts (in month and year to date);
 - The number of RIDDOR notices issued with regards to lift safety.

15 Quality Assurance

- 15.1 Berneslai Homes will carry out independent third party quality assurance audits annually to 5% of written examination schemes for lifts (where not included within the insurer's inspection programme) to ensure that all examinations and planned maintenance activities are being fully and robustly implemented and completed. This is additional to inspections carried out by our insurers.
- 15.2 We will carry out an independent audit of lift safety at least once every two years. This audit will specifically test for compliance with the regulation, legislation and codes of practice and identify any non-compliance issues for correction.

16 Non-Compliance

- 16.1 The definition of non-compliance in relation to this policy refers to any incident which results in a potential breach of legislation or regulatory standard, or which causes a risk to health or safety.
- 16.2 Any non-compliance issue identified at an operational level will be formally reported to the Executive Director of Property Services in the first instance.
- 16.3 The Executive Director of Property Services will agree an appropriate course of corrective action with the Head of Repairs, Maintenance & Building Safety in order to address the non-compliance issue and report details of the same to the EMT.
- 16.4 The EMT will ensure the Board are made aware of any non-compliance issue so they can consider the implications and take action as appropriate.
- 16.5 In cases of a serious non-compliance issue the EMT and Board will consider whether it is necessary to discuss the issue with the Council; and potentially disclose the issue to the Regulator of Social Housing in the spirit of co-regulation, or any other relevant organisation such as the HSE, as part of the Regulatory Framework.

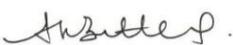
17 Approval

Strategic Lead: Executive Director of Property Services

Sign/date:  30/9/2021

Review
Approval
Sign/date:  26/06/2024

Chair Board: Sinéad Butters

Sign/date:  30/9/21

Board Member: Mark Johnson

Sign/date:  30/9/21

18 Glossary

18.1 This glossary defines the key terms used throughout this lift safety policy:

18.1.1 **LOLER** - Lifting Operations and Lifting Equipment Regulations 1998 - regulations which place duties on people and companies who own, operate or have control over lifting equipment.

18.1.2 **PUWER** - Provision and Use of Work Equipment Regulations 1998 - legislation which places duties on people and companies who own, operate or have control over work equipment. PUWER also places responsibilities on businesses and organisations whose employees use work equipment whether owned by them or not.



Minutes of Berneslai Homes Board held 11th July 2024 at 1.30 p.m.
Gateway Plaza

Present:

Ken Taylor (KT)	-	Chair
Richard Fryer (RF)	-	Board Member
Mahara Haque (MH)	-	Independent Chair of Customer Services Committee (Co-optee to the Board)
Adam Hutchinson (AH)	-	Board Member
Mark Johnson (MJ)	-	Board Member (joined remotely)
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
Lee Winterbottom (LW)	-	Managing Director Construction Services
Kulvinder Sihota (KS)	-	Executive Director, Corporate Services
Sam Roebuck (SR)	-	Head of Governance and Strategy and Company Secretary
Kathy McArdle (KMCA)	-	Service Director BMBC
Gary Brampton (GB)	-	Pennington Choices (For Item 2 – Stock Condition
Ben Davidson (BD)	-	Pennington Choices (Survey on the Confidential Agenda)

Observing

Housing Inspection Team:-

Raina Mason	Senior Lead
Scott Conroy	Team member
Emily Wall	Team member
Declan Smyth	Team member

The Chair welcomed everyone to the meeting and introductions took place.

	ACTION
<p><u>Item 1 – Apologies</u></p> <p>Eric Smith - Board Member (Co-optee to the Board)</p>	
<p><u>Item 2 – Declarations of Interest</u></p> <p>There were none declared.</p>	
<p><u>Item 3 – Customer First Video – Making a Difference</u></p> <p>DF introduced the item, referring to previous videos, outlining various stories. This video focuses on the positive difference made in neighbourhoods, working with the community and partner organisations and reflects what Berneslai Homes do.</p>	
<p><u>Item 4 – Customer Insight and Engagement Strategy</u></p> <p>DF presented the Strategy which seeks Board approval and their endorsement of the action plan (Appendix B) to enable the strategy to be brought to life. Board noted that the Strategy is fully aligned to regulatory duties.</p> <p>Reference was made to the previous work undertaken by TPAS and HQN in 2022.</p> <p>Officers and Board members are committed to hearing the tenants' voices and looking at opportunities where these can be captured. Once the Strategy and Action Plan has been approved and endorsed, work will commence on the checks and challenges, putting information onto the website in a user friendly way and making it accessible to everyone in the community.</p> <p>Board felt it was a good, clear and strong document, but were keen to understand how customers had been involved in the development of the Strategy. DF explained how BH had worked with the Tenants Voice Panel and other engaged tenants, commencing with an away day, looking at what was/was not working. TARA reps and mystery shoppers were also involved. Their feedback was considered when developing the document. Meetings then followed to shape the Strategy and action plan.</p> <p>He advised that tenants were very clear to stress the importance of the commitments being fulfilled, showing they have been listened to and that it is making a difference. Therefore, oversight will be monitored by the Customer Services Committee and an annual report will be presented to Board and BMBC. KMca felt it would be useful to bring updates to future Strategic Assurance meetings and she would arrange for this to be added to the agenda as a standard item. Board also requested that updates from Customer Services Committee are provided to Board.</p>	<p>KMca DF</p>

Board referred to the diversity element following their HDN session and questioned how confident BH were in ensuring the different customer bases had been captured. DF assured the Board that it was important that we do not duplicate the fora already in place in Barnsley. There are some well-established equality fora in Barnsley and links were made into these, this avoided the potential of consultation overload. He also referred to the action plan and some of the areas where more targeting was required i.e. the gypsy site, care leavers and he elaborated on the work that has been taking place in these areas. BH is also involved in community activities where engagement is in a more informal setting, this week for example at the Barnsley Pride event. Contact has also been made with DIAL regarding any issues they were aware of so these could also be reflected.

Discussion followed on the work of the Tenants Voice Panel and a question was raised regarding the potential of increasing the demographics. DF advised that this is a small group who are heavily engaged. The Panel have requested their meetings be reduced to four per year to enable them to focus their activities; one of their priorities is to engage in different elements of the community and groups of people to get a broader voice, utilising insight surveys and analysing equality factors to make sure they get true representation. This should increase demographics.

Board was also provided with examples of the various channels used to share information with the tenants and residents of Barnsley, including in paper format.

Board extended thanks to all involved.

Resolved.

- **Board recommended the Customer Insight and Engagement Strategy 2024-2027 for approval by BMBC Cabinet.**
- **Board endorsed the action plan to support the Customer Insight and Engagement Strategy 2024-2027.**
- **Board supported the proposal to include a summary of insight and engagement outcomes at each committee with an annual progress report on actions and impact being presented to Board and BMBC Cabinet.**

Item 5 – Employee Health and Safety Year End Report 2023/2024

SR presented the report highlighting the key points.

The report presents a complete overview of the year, comparing annual data to identify and question trends.

Quarterly health and safety audits are presented to EMT where employee health and safety actions are closely monitored.

<p>The BMBC Health, Safety and Emergency Resilience Service provides the statutory 'Competent Person' service to Berneslai Homes and as part of this service, BMBC undertake two yearly audits of the management of health and safety. The results are included in the report.</p> <p>Berneslai Homes' Corporate Employee Health and Safety Policy 2024-26 has been reviewed in line with this report with no notable changes made.</p> <p>Board was referred to the key points from the 2023-24 performance indicators (appendix B) outlined in tables 9.2.1 and 9.2.2.</p> <p>Attention was drawn to the spike in accidents and related absence in Q4. All the accidents were investigated; no patterns were identified, and all cases had risk assessments before, and all were reviewed post-accident. Board asked that any spikes need to be closely monitored.</p> <p>Board questioned 'near misses' and how they were being recorded. LW confirmed these are recorded and information will be included in future reports.</p> <p>LW referred to the increase in activity and turnover at Construction Services, therefore would expect to see some 'spikes.'</p> <p>MJ referred to the gas explosion simulation exercise planned for later in the year and due to his experience volunteered to be involved if required.</p> <p>Board was pleased to note a decrease in violence and aggression related incidents (from 28 to 18). Assurance was provided to Board that whenever an incident of this kind is reported, the case is looked at and to see if any lessons can be learned/action taken. All these incidents are reported to EMT on a quarterly basis. AGa advised of some training that has taken place, as a result of incidents, as the way people behave can escalate or de-escalate a situation.</p> <p>There has been an increase in absence due to mental health and Managers continue to support staff. The wide range of support and initiatives are included in the Health and Wellbeing Strategy. Board noted that Audit and Risk Committee will be carrying out a deep dive into mental health at their next meeting. A Board member commented on the good provision for mental health issues and questioned how this was working and if staff were accessing these resources. SR advised that the counselling services continues with a good take up by staff. Board noted that not all mental health issues are work related, some are personal issues. Occupational Health referrals continue, and wellbeing champions are accessible. There is also a significant amount of monitoring taking place on sickness absence. Board said they look forward to receiving assurance from the Audit and Risk Committee. The Chair asked if comparisons could be investigated at other organisations/ALMO's. AGa advised Board that Berneslai Homes promotes mental health and encourage conversations, therefore it is no surprise that this has increased. It reflects the openness of the organisation.</p>	<p>SR/LW</p> <p>SR</p> <p>SR</p>
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<p>The annual programme of review actions outlined at Section 10.2 of the report were drawn to Board's attention for approval.</p> <p>Resolved:-</p> <ol style="list-style-type: none"> I. Board considered the performance of the health and safety systems and procedures and agreed actions to be in line with expectations and were assured that robust mechanisms are in place to manage those systems. II. Board approved and signed the refreshed 2024-2026 Health and Safety Policy. III Board approved the areas of further development and monitoring identified at Section 10. 	
<p><u>Item 6 – Building Safety Compliance Year End Report 2023/2024</u></p> <p>AGu presented the report highlighting the key points. He was pleased to report an average of 99.22% compliance across statutory legislation.</p> <p>A positive highlight was brought to Board's attention about TSM measures, all are 100% compliant i.e. gas, fire, asbestos, water safety, lift safety.</p> <p>Board were asked to note the areas of focus, mainly as a result of no access:-</p> <ul style="list-style-type: none"> • Fire safety equipment servicing. • Electrical compliance from a 10 year perspective – there were 92 outstanding condition reports at year end, now reduced to 40, through stronger letters/leaflets being served. Work continues with BMBC for a legal remedy. <p>Board was assured that before this strong approach to access for electrical testing is initiated, many visits have also taken place. BH are also aware of vulnerable customers. This stage is the last resort.</p> <ul style="list-style-type: none"> • Domestic lifting equipment. • CO/Smoke installations – At year end there were 460 outstanding, this now stands at 250. BH are looking to utilise the gas legal remedy. Opportunities to carry out installations will be taken when undertaking gas servicing. KMCA stressed the importance of addressing the whole issue and requested this be tracked. <p>Board was assured that Property Services continue to work with partners, the Council etc on gaining access to properties.</p> <p>There has been an increase in damp/mould/condensation related works and particular reference was made to Awwab's Law. Board asked if there</p>	<p>AGu</p>

<ul style="list-style-type: none"> • 1300 adaptations carried out <p>The report also contains areas for improvement at Section 7.</p> <p>The report will be presented to BMBC’s Senior Management Team, followed by Cabinet, for further scrutiny. It will also be produced on an annual basis.</p> <p>The information will also be disseminated to staff as part of the monthly Team Brief.</p> <p>Board was extremely pleased with the report which highlights the hard work that takes place. They requested that their appreciation be extended to staff.</p> <p>Resolved:</p> <p>Board approved the annual review, noting the achievements and areas for improvements.</p>	<p>AGa</p>
<p><u>Item 8 – Barnsley Homes Standard Programme – Year End 2023/2024</u></p> <p>AGu presented the report, highlighting key points.</p> <p>As part of the BHS programme, in 2023/24 works were undertaken to 1275 properties. A total of 3046 elements components were also completed. Customer satisfaction was 98.31% which was above target.</p> <p>There was a total saving of £9K against the budget.</p> <p>All schemes were completed by Construction Services and Wates, with just external roofing still in progress.</p> <p>Ventilation has been a continued focus. The fan component lifecycle was discussed in relation to the Housing Revenue Account (HRA). AGu confirmed that if fans become faulty, they are either repaired or replaced. Replacement fans have been included in the business plan and would be a capital element. This will impact on future costs.</p> <p>Resolved:</p> <p>Board approved the Barnsley Homes Standard outturn reported and referred to BMBC.</p>	
<p><u>Item 9 – Value for Money Annual Report</u></p> <p>KS presented the report and highlighted the key points.</p>	

<p>Progress continues to maximise value for money. The position at year end is positive in the challenging environment. Examples of key savings include:-</p> <ul style="list-style-type: none"> - £1m annual recurrent savings, demonstrating that Berneslai Homes continue to be a good performing, low cost organisation as shown in the Housemark benchmarking data - £700K external funding realised - £900K additional income secured for customers <p>Audit and Risk Committee considered the report at their last meeting in June. AH, Chair of the Committee, confirmed that detailed discussion took place as outlined in the minutes of Audit and Risk Committee. The Committee was pleased with the performance achieved as part of the Housemark assessment and they look forward to receiving the next Strategy which will provide more detail on the approach which is moving from efficiencies to cash actionable savings.</p> <p>Resolved:</p> <p>Board approved the progress and achievements made in maximising the value for money as summarised in the report and detailed in the attached appendix.</p>	
<p><u>Item 10 – Resources Reports:-</u></p> <p><u>10.1 Board Fact Sheet</u></p> <p>Board received the factsheet and commented this continues to be particularly useful.</p>	
<p><u>Item 11 – Minutes/Actions from previous meeting</u></p> <p>Resolved:</p> <p>The minutes were approved as a true and accurate record and the actions were noted</p>	
<p><u>Date of Next Meeting</u> – 26th September 2024 and AGM</p>	

Board Meeting 11th July 2024

Actions

PUBLIC AGENDA			
Item	Action	By Whom	Comments
Item 4 – Customer Insight and Engagement Strategy	Updates be added to the agenda of future ALMO Strategic Assurance Meeting.	KMcA	Actioned
	Oversight being monitored by Customer Services Committee – updates to be provided to Board.	DF	Actioned
Item 5 – Employee Health and Safety Year end Report 2023/24	Near Misses to be included in future reports	SR	Actioned
	Mental Health – comparisons to be investigated at other organisations/ALMO's.	SR	HR Team looking at seeking comparator data
Item 6 – Building Safety Compliance Year End Report 2023/2024	CO/smoke installations – to be tracked and updates provided.	AGu	In progress
	Damp/mould/condensation related works - Updates to be provided	AGu	This is tracked on the Compliance Scorecard reported to Audit and Risk Committee
	Building Safety Cases - Separate briefing session to be arranged.	AGu	To be arranged



Creating great homes and communities
with the people of Barnsley

Report Title	2024/25 Quarter One Performance Summary	Confidential	No
Report Author	Head of Governance and Strategy	Report Status	For Information
Report To	Board 26/09/2024	Officer Contact Details	Sarah Drafz Sarahdrafz3@berneslaihomes.co.uk

1. Executive Summary	<p>Berneslai Homes' performance is measured so that we can monitor the success of our Strategic Plan commitments, consider how well areas of the business are doing and see the difference we are making to our customers.</p> <p>This report will</p> <ul style="list-style-type: none"> • Inform Board of Berneslai Homes' performance at quarter one of 2024/25, including areas of strength, areas for improvement and actions being taken to address underperformance. • Highlight the high risk areas for Board. <p>Challenging performance targets are set annually by the Council. At quarter one, performance for eight KPIs were reported as green (met or exceeded target), six KPIs were rated as amber (narrowly missed the annual target) and seven KPIs were rated as red (target not achieved). 17 KPIs were not RAG rated due to data not yet being available or not having benchmarking data to allow comparison.</p> <p>Key areas of strength are building safety compliance, where we achieved 100% across all five areas, building safety Tenant Satisfaction Measures (TSMs), rent collection levels and local spend.</p> <p>Key areas of focus include the proportion of emergency and non-emergency repairs completed in target timescales and void rent loss.</p> <p>Customer Services Committee were assured that appropriate measures were in place to address areas of underperformance. Comments from Customer Services Committee have been incorporated into this summary.</p>
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2. Recommendation/s

- 2.1 Board is asked to consider quarter one performance.
- 2.2 Where performance targets have not been achieved, Board should ensure they are satisfied with the explanations provided and there are adequate controls and actions in place.
- 2.3 Board should identify any areas where they feel more detailed consideration is required by Customer Services Committee.

3. Background

- 3.1 Berneslai Homes' performance is measured so that we can monitor the success of our Strategic Plan commitments, consider how well areas of the business are doing and see the difference we are making to our customers.
- 3.2 On a quarterly basis an assessment of Berneslai Homes performance against targets is made and scrutinised by Customer Services Committee. At quarter one of 2024/25 there were seven KPIs where performance was identified as behind target. Customer Services Committee were assured appropriate measures were in place to address areas of underperformance.

4. Current Position/Issues for Consideration

- 4.1 Challenging performance targets are set annually by the Council. At quarter one, performance for eight KPIs were reported as green (met or exceeded target), six KPIs were rated as amber (narrowly missed the annual target) and seven KPIs were rated as red (target not achieved). 17 KPIs were not RAG rated due to data not yet being available or not having benchmarking data to allow comparison.
- 4.2 Quarter one performance areas of strength:
 - Building safety: we have 100% compliance against all five of the building safety TSMs (gas, fire, asbestos, water and lift safety).
 - CH02: 96.2% of stage one and 96.7% of stage two complaints were responded to in target timescales (both are amber rated) against the target of 100% (target increased from 90% the previous year). Despite receiving approximately double the number of stage one complaints performance is 8% points better than quarter one 23/24. This confirms that actions taken to improve complaints performance are having a positive impact.
 - Income: In quarter one we collected 99.2% (£20.98M) of rent due. This is a real positive. The Income Team patch-based model has increased account ownership and accountability, earlier intervention and swift escalation along with increased management oversight has contributed to the high collection level. We plan to introduce voicescape caseload manager later this year and have already seen some impact collecting former tenant arrears using voicescape from quarter one.

- Local spend: We spent 65% of influenceable spend locally demonstrating our commitment to supporting the local economy.

4.3 Areas of focus:

- RP01 decent homes: at quarter one 230 properties (1.28% of stock) were classed as non-decent. The non-decency is a result of where conclusions from Pennington’s data received shows a different outcome between our records and the methodology used, therefore, to provide assurance a review is being undertaken. The review will verify whether the outcomes reported by Pennington’s remain accurate with appropriate action being taken to address any non-decency. The stock can be aggregated into three categories, as per Figure 1: Non-Decent Breakdown.

Category	% against stock	Count of assets
Non-Decent - in works	0.08%	14
Non-Decent - un-surveyed (to be reviewed in Q2)	0.73%	132
Non-Decent - omissions, additional assets from Pennington Choices, Electrical (review and remedial action needed)	0.47%	84
Totals	1.28%	230

This KPI was previously reported annually and is an annual Tenant Satisfaction Measure (TSM). It is now being reported quarterly to ensure that where investigations are taking place, or concerns have been raised appropriate action is undertaken to address identified non-decency. As a result of this work and the use of Pennington’s stock data it is expected that numbers of non-decent properties will reduce each quarter. Within the financial year, we have an increased number of failures in Q1 and Q4 based on review dates provided by our contractor. It is therefore expected that we will see some slippage in Q1. Future Decency reviews (property stock surveys) will be brought forward to Q2 and Q3 to smooth the number of reviews in Q4.

- RP02 1 We completed 92.9% of non-emergency repairs in target timescales against the target of 96% (red rated). Glazing availability has impacted on non-emergency repairs performance along with the complexity of work required to resolve damp, mould and condensation repairs. We continue to work with our procurement supply chain to reduce lead times on key materials and have contracts in place giving us the flexibility to utilise specialist contractors to ensure complex damp and mould cases can be achieved within target.
- RP02 2 We completed 96.6% of quarter one emergency repairs in target timescales against the target of 99% (red rated). Attend and make safe performance is strong, we are focused on reducing the time taken to fix actual defects and complete the repair. For both emergency and non-emergency repairs we are working with specialist contractors and suppliers to improve performance and currently reviewing Property Services structures to ensure there is the required dedicated resource provision in critical areas end to end and to enhance the service delivery offer to customers. Although there are no imminent changes, utilising the new IT

system to its full potential and ensuring the performance management of operatives are key objectives in delivering a quality right first time service to customers.

- Void rent loss: at quarter one 1.97% of income (£417K) was lost due to void properties. Performance is 0.66% points (£140k) worse than quarter one 2023/24 and has been impacted by an increase in the number of voids requiring extensive works. 2024/25 budgets have been set to include clearing the accumulation of major works voids. An inter-departmental void action plan has been produced drafted to improve performance. A number of short, medium and longer term actions have been agreed and performance will be monitored through existing arrangements.
- Staff sickness: at quarter one we are predicted to end the year with an average of 13.1 days sickness per employee. Performance is 1.2 days better than quarter one 2023/24. The main causes of sickness absence were mental ill health (42%), acute medical (26%) and musculoskeletal (20%). Human Resources continue to proactively monitor sickness absence, meeting regularly with managers to ensure sickness is managed effectively, alongside providing a quarterly spotlight report to SMT/EMT to highlight trends and recommended management action. Audit and Risk Committee conducted a deep dive into mental ill health absence at their August Committee including considering the support provided to staff. They will continue to monitor the situation alongside Remuneration Committee. The results of the recent annual health and wellbeing survey are being analysed and these will shape the wellbeing programme. Employee focus groups were undertaken in August which will inform the employee engagement framework and drive improvements to employee experience. Sickness performance has deteriorated since quarter one, with inclusion of July actual data providing a year end predicted position of 14 days sickness per employee.
- Disability: 4.77% of the workforce defined as disabled under the Equality Act definition of disability against a target of 8% this equates to 26 employees, which is the same as the previous quarter. Specific actions to improve representation include a proposed data-refresh on the equality information we hold for existing staff to ensure we are capturing up-to-date figures. This is due to take place in quarter two. We have also undertaken a Health and Wellbeing survey during this quarter which will provide us with insight around employees with long-term conditions which may amount to disabilities and how we can better support staff in managing these whilst in work. This data will be analysed and actions produced during the next quarter.
- Priority calls answered in target: 40.05% of priority calls were answered in the target timescale of three minutes against the target of 80% (red rated). The implementation of the new Repairs First system in quarter four of 2023/24 has impacted on contact centre performance and it was anticipated that it would be some months before the system became fully embedded. We have seen a 22.4% increase in the number of calls received in quarter one compared to quarter one 2023/24, some of which have been more complex and therefore been longer in duration. The Contact Centre have introduced a new operating model for out of hours to strengthen 24/7 service delivery for emergency housing repairs. There has been an

improvement in performance since the quarter one performance report was produced. 58.55% of calls in July were answered in target timescales.

4.4 The Annual Business Action Plan was agreed by Board in December 2023 and cabinet in February 2024 for the period 1st April 2024 to 31st March 2025. Quarter one shows progress against all agreed actions, see Appendix A of the Performance Report.

4.5 We have revised the performance report template for the new financial year to streamline the report, remove duplicated elements and take into account tenant feedback. An overview page is now included which shows the RAG status for all KPIs on one page. KPIs are simply split into the three pulses; TSM, council and company. These changes have made the report more succinct and Customer Service Committee welcomed the revisions. We would welcome Board feedback on the changes.

5. Customer Voice/Impact

5.1 To ensure that tenant's voices are represented, Tenant Voice Panel members sit on the Customer Services Committee and are involved in scrutiny of quarterly performance. In addition, Board representatives are members of Customer Services Committee and provide scrutiny of company performance. Twice a year a meeting is held with Tenant Voice Panel members to review performance in detail.

6. Risk and Risk Appetite

6.1 There are no risk register items which directly link to this report. Any compliance areas of concern linked to performance are included on the corporate risk register.

7. Strategic Alignment

7.1 Our KPIs are aligned to our strategic priorities; excellent customer services, sustainable communities, partnership working and successful well-managed company which support our vision 'Creating great homes and communities with the people of Barnsley.' We work closely with the council to ensure we align our services and Strategic Plan to meet the challenges and opportunities of their new Corporate Plan and the Barnsley 2030 vision.

7.2 The performance report links to all the Barnsley 2030 Strategic Ambitions (listed below) as it is one of the mechanisms by which we monitor our performance against plan.

- Hearing Customers
- Keeping tenants Safe
- Growth of Homes and Services
- Technology and Innovation
- Employment and Training
- Zero Carbon

8. Data Privacy

8.1 No processing of personal data has taken place in the creation of this report.

9. Consumer/Regulatory Standards

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

- Tenancy Standard
- Neighbourhood and Community Standard
- Transparency, Influence and Accountability Standard
- Safety and Quality Standard

By measuring and monitoring performance against our KPIs and involving tenants in this process we can effectively ensure we demonstrate progress towards achievement of our strategic objectives and compliance with multiple regulatory standards.

The quarterly performance report is published on our website as part of our approach to ensuring transparency and supporting effective scrutiny by tenants.

10. Other Statutory/Regulatory Compliance

10.1 There are no specific statutory or regulatory compliance implications arising directly from this report.

11. Financial

11.1 There are no specific financial implications arising directly from this report.

12. Human Resources and Equality, Diversity and Inclusion

12.1 There are no human resource implications arising directly out of the recommendations in this report.

13. Sustainability Implications

13.1 Various performance measures reported assess progress towards achieving our net zero ambitions which in turn links to our sustainability strategy.

14. Associated Background Papers

None.

15. Appendices

Appendix A – Quarter One 2024/25 Performance Report

Quarterly Performance Report Quarter 1-2024/2025



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2024/25 - Q1 Summary

TSM					
 Gas Safety Checks	 Fire Safety Checks	 ASB Cases	 ASB Cases Hate Incidents	 Satisfaction Home is Safe	 Listening to Tenants
 Asbestos Safety Checks	 Water Safety Checks	 DHS Compliance	 Non-Emergency Repairs	 Keeping Tenants Informed	 Treating Tenants Fairly
 Lift Safety Checks	 Stage One Complaints	 Emergency Repairs	 Tenant Satisfaction	 Handling Complaint	 Satisfaction with Communal Areas
 Stage Two Complaints	 Stage One Response Time	 Tenant Satisfaction with Repairs	 Time Taken Recent Repair	 Positive Contribution	 Satisfaction with Handling ASB
 Stage Two Response Time		 Well Maintained Home			

Council KPIs	
 Void Rent Loss	 Rent Collection
 Proportion of Apprentices	 Barnsley Pound
 EPC C or Above	 Management Fee

Company KPIs	
 Staff Satisfaction	 Staff Attendance
 Equality Act	 Minority Ethnic
 Current Tenant Arrears	 Contact Centre

TSM KPIs

TSM	
 Gas Safety Checks	 Fire Safety Checks
 Asbestos Safety Checks	 Water Safety Checks
 Lift Safety Checks	 Stage One Complaints
 Stage Two Complaints	 Stage One Response Time
 Stage Two Response Time	

YEAR END 23/24	Q1	Q2	Q3	Q4	YEAR END 24/25	TARGET 24/25	BENCH MARK	
100%	100%					100%		BS01: Gas Gas safety checks
100%	100%					100%		BS02: Fire Fire safety checks
100%	100%					100%		BS03: Asbestos Asbestos safety checks
100%	100%					100%		BS04: Water Water safety checks
100%	100%					100%		BS05: Lift Lift safety checks
39.6	16.3					In line with peer group median	39.4 peer group median	CH01 1: Stage One Complaints Stage one complaints relative to the size of the landlord
7.6	3.0					In line with peer group median	4.95 peer group median	CH01 2: Stage Two Complaints Stage two complaints relative to the size of the landlord
74.0%	96.2%					100%	75.9%	CH02 1: Stage One Response Time Stage one complaints response time
96.3%	96.7%					100%	80.7%	CH02 2: Stage Two Response Time Stage two complaints response time

TSM KPIs

TSM		YEAR END 23/24	Q1	Q2	Q3	Q4	YEAR END 24/25	TARGET 24/25	BENCH MARK	
 ASB Cases	 ASB Cases Hate Incidents	46.4	11.9					In line with peer group median	54.8 peer group median	NM01 1: ASB Cases Anti-social behaviour cases
		0.5	0.22					In line with peer group median	1.3 peer group median	NM01 2: ASB Cases Hate Incidents Anti-social behaviour cases that involve hate incidents
 DHS Compliance	 Non-Emergency Repairs	0.09%	1.3%					0%	2.17%	RP01: DHS Compliance Homes that do not meet the Decent Homes Standard
		94.1%	92.9%					96%	83.5%	RP02 1: Non-Emergency Repairs Repairs completed within target timescale
 Emergency Repairs	Annual Indicator  Tenant Satisfaction	94.3%	96.6%					99%	94.7%	RP02 2: Emergency Repairs Repairs completed within target timescale
Annual Indicator  Tenant Satisfaction with Repairs	Annual Indicator  Time Taken Recent Repair	76.8%	Annual					77%	76.8%	TP01: Tenant Satisfaction Overall satisfaction
		75.1%	Annual					76%	74.1%	TP02: Tenant Satisfaction with Repairs Tenant Satisfaction with repairs
Annual Indicator  Well Maintained Home		75.5%	Annual					76%	70.5%	TP03: Time Taken Recent Repair Satisfaction with time taken to complete most recent repair
		73.8%	Annual					74%	73.1%	TP04: Well Maintained Home Satisfaction that the home is well maintained

TSM KPIs

TSM	
Annual Indicator  Satisfaction Home is Safe	Annual Indicator  Listening to Tenants
Annual Indicator  Keeping Tenants Informed	Annual Indicator  Treating Tenants Fairly
Annual Indicator  Handling Complaint	Annual Indicator  Satisfaction with Communal Areas
Annual Indicator  Positive Contribution	Annual Indicator  Satisfaction with Handling ASB

YEAR END 23/24	Q1	Q2	Q3	Q4	YEAR END 24/25	TARGET 24/25	BENCH MARK	
74.9%	Annual					77%	77.0%	TP05: Home is Safe Satisfaction that the home is safe
59.6%	Annual					61%	64.0%	TP06: Listening to Tenants Landlord listens to tenants views and acts upon them
64.4%	Annual					68%	68.8%	TP07: Keeping Tenants Informed Landlord keeps tenants informed about things that matter to them
76.9%	Annual					81%	78.6%	TP08: Treating Tenants Fairly Landlord treats tenants fairly and with respect
43.1%	Annual					43%	36.5%	TP09: Satisfaction Handling Complaints Satisfaction with the landlords approach to handling complaints
65.9%	Annual					66%	66.5%	TP10: Satisfaction with Communal Areas Satisfaction that the landlord keeps communal areas clean and well maintained
59.6%	Annual					64%	63.5%	TP11: Positive Contribution Satisfaction that the landlord makes a positive contribution to neighbourhoods
48.4%	Annual					55%	55.7%	TP12: Satisfaction Handling ASB Satisfaction with the landlords approach to handling anti-social behaviour

Council KPIs

Council KPIs	
 Void Rent Loss	 Rent Collection
 Proportion of Apprentices	 Barnsley Pound
 EPC C or Above	Annual indicator  Management Fee

YEAR END 23/24	Q1	Q2	Q3	Q4	YEAR END 24/25	TARGET 24/25	
1.56%	1.97%					1.05%	Void Rent Loss (BH1) Income lost due to void properties
96.3%	99.2%					97%	Rent collection (BH2) Rent collected as a proportion of rents owed on Housing Revenue Account dwellings.
3.6%	3.3%					4%	Apprentices (BH3) Proportion of apprentices in workforce
66%	65.0%					60%	Local Spend (BH4) Spend funds locally supporting the Barnsley economy.
39.3%	41.9%					45%	EPC Ratings (BH5) Percentage of Properties with an EPC C or above.
Achieved	Annual					1%	Management Fee (BH6) Management Fee Efficiency target as part of annual Value For Money report.

Company KPIs

Company KPIs

Annual Indicator  Staff Satisfaction	 Staff Attendance
 Equality Act	 Minority Ethnic
 Current Tenant Arrears	 Contact Centre

YEAR END 23/24	Q1	Q2	Q3	Q4	YEAR END 24/25	TARGET 24/25	
48%	51%					50%	Staff Satisfaction (KPI 1) Employee satisfaction rate. My organisation is a great place to work.
12.4	13.1					9 days	Staff Attendance (KPI 2) Average number of days absent per full time equivalent employee.
4.7%	4.7%					8%	Diversity (KPI 3) Percentage of staff defining under the Equality Act definition of disability.
3.1%	2.9%					3.4%	Diversity (KPI 4) Percentage of minority ethnic staff in total workforce.
3.7%	3.6%					3.5%	Current Tenant Arrears (KPI 5) Percentage of Current Tenant Arrears.
73.5%	40.0%					80%	Contact Centre (KPI 6) We will answer priority calls in less than 3 minutes (Contact Centre).

Barnsley 2030 objective	Priority	Strategic Ambition	Milestones	Date	BH Lead and additional resources	Q1 Update
Healthy Barnsley	Implement phases 1.1 and 1.2 of Repairs First and DRS and ensure we use the new system to its full functionality to deliver efficient, effective, and timely customer service (NEC Repairs First) DRS	Technology and Innovation	Review of phase 1 repairs first implementation Phase 1.1 Repairs and Maintenance 1.2 December 24 Asset Management.	Sept 24 May 24 Sept 24	Managing Director Construction Services, Head of Asset Management, Head of Governance and Strategy	Head of GS - currently reviewing phase 1 and lessons learned. Head of AM: Demonstration from NEC provided for Asset Modules (phase 1.2). Full programme for implementation being developed/agreed by BH transformational board / EMT
Healthy Barnsley	Improving Data quality, accuracy and maturity and using this data to tailor services for our tenants.	Hearing customers	Data Strategy and 3 year Action Plan to improve data approved by EMT Soft market testing of tools to enhance data quality across systems and Business case to purchase software Improved induction for IT systems and introducing data standards and data owners across the organisation	June 24 October 24 March 25	Head of Governance and Strategy budget for data accuracy tool required.	H of GS - draft data strategy been to Executive Management Team. Final amendments to be approved. Year one action plan developed and agreed by Executive Management Team. Initial review of data tools taking place.
Healthy Barnsley	Using technology to streamline services and review and automate processes where possible.	Technology and Innovation	Agree 3 year programme of areas to review with EMT Work with BMBC in their digital transformation journey to improve automation for BH	June 24 March 25	Head of Governance and Strategy IT budgets	Initial meeting held between BMBC and BH. Discovery work around content relationship Management system is initial area being considered.
Healthy Barnsley	Hearing and responding to a wider tenant voice	Hearing Customers	Review successfulness of Insight and Engagement Strategy Fully develop chosen insight IT platform Increase insight following successful launch of Knowing our Customers Project	Dec-24 Jun 24 Dec 24	Head of Customer Services Engagement Manager Head Of Governance & Strategy - budget for insight platform	H of GS - knowing our Customers project paused as links to CRM. Insight strategy agreed Board 11th July 24. Ho CS - Survey platform being developed and question set agreed with service leads. slight delay due to staffing absence.
Healthy Barnsley	Bespoke approach to Neighbourhood Management	Hearing Customers	12 month review of Neighbourhoods and ASB structures All staff completed Housing Professional Passport by December 2024 Key Action Plans - Noise / ASB complete	Apr-24 Dec-24 Apr-24	Head of Estate Services, Neighbourhood Manager, ASB Team Leader	Restructure complete. Housing Professional Passport programme underway. Service Transformation continuing ASB
Healthy Barnsley	All homes to be compliant with Building Safety and Compliance regulations/legislation (Building Safety)	Keeping Tenants Safe	*Ongoing Monthly Building Safety Scorecard Reports to transfer to Realtime reporting via C365 *EICR 100% to 5 year Position (utilising warrant of entry for access) *Lifts 100% Compliant (utilising warrant of entry for access) *Building Safety Cases - Quarterly Review with Building Safety Project Board awaiting contact from the Building Safety Regulator *Embed the Damp, Mould & Disrepair Team & Produce a bespoke Strategy *Installation of IOT Monitoring	01/06/2024 revised to August 2024	Head of Repairs Maintenance and Building Safety	Monthly monitoring remains on Scorecard whilst the C365 Implementation works remain ongoing. Revised target agreed for August 2024 with dates booked with BMBC Corporate Assurance Team to audit the system and data to ensure accuracy

Barnsley 2030 objective	Priority	Strategic Ambition	Milestones	Date	BH Lead and additional resources	Q1 Update
Healthy Barnsley	All homes will have up to date asset data used to support repairs, maintenance, and investment (Stock Data)	Technology and Innovation	<ul style="list-style-type: none"> * Review stock data completion rates and run a targeted mop up programme to attain full asset data set. * Commissioning of a data validation exercise of stock data. * Rolling programme of stock condition across 20% of the stock per annum, operating on a risk based approach in relation to property selection. 	<p>June 24 Aug 24 Mar 25</p>	Head of Asset Management	Head of AM. March 2024 completion rates 83%. Penningtons completed stock validation report for BH. Mop up programme for remaining approx. 15% being undertaken. 2025/26 risk based approach being developed by AM Team for 20% per annum SCS
Learning Barnsley	Strategic Workforce Planning (incorporating Professionalism Agenda, Succession / Workforce Planning)	Employment and Training	<ul style="list-style-type: none"> Review of jobs in scope, current qualifications held and training needs Review employee specs and recruitment process to meet competency and conduct requirements Review PDR process Agree Workforce Planning/Succession Planning Framework 	<p>June 24 June 24 March 25</p>	Head of HR&OD	Head of HR,OD&Comms - Roles in scope for proposed competency & conduct standard agreed, current qualifications of post holders identified, training plan being developed. Job adverts for roles in scope now include qualification requirements. Interim review of PDRs completed
Growing Barnsley	Implementing the Lettings Policy and reviewing its impact	Hearing Customers	<ul style="list-style-type: none"> Post Go live review of new policy Review wider service processes Obtain feedback from applicants 6 months after go live Completion of annual review report for Board and BMBC Review mutual exchange service offer and provider Review service structure for efficiencies 	<p>April 24 June 24 Aug 24 Jan 25 Sep 24 Jan 25</p>	Head of Customer Services Lettings Manager	H O CS - Ppolicy Live 1/4/24. System still in development. Temp amends to existing set up. Qtr 1 analysis completed. Review of wider processes commenced. Update in Qtr 2
Sustainable Barnsley	To achieve EPC 'C' by 2030 and Net Zero by 2045 (Development approach to sustainability)	Zero Carbon	<ul style="list-style-type: none"> *Review exercise to be undertaken following completion of EPC 'C' retrofit pilot, delivered via PRIP contractual arrangement. *Develop and agree approach with EMT and BMBC for a EPC 'C' retrofit programme to deliver 2030 objective for all BH stock. 	<p>July 24 October 24</p>	Head of Asset Management	Head of AM: Pilot undertaken via PRIP. Retrofit with Barnsley Home Standard works in 2024/25 to be paused - HRA priorities. Commission for SAVA intelligent energy modelling system to be implemented to allow for a full stock retrofit plan to be developed



Creating great homes and communities
with the people of Barnsley

Report Title	Disrepair – Annual Report & Current Position	Confidential	No
Report Author	Arturo Gulla Executive Director of Property Services	Report Status	For Information
Report To	Board 26 th September 2024	Officer Contact Details	ArturoGulla@berneslaihomes.co.uk

1. Executive Summary

Disrepair

As managing agent for the landlord BMBC, we have a duty to comply with the RSH Consumer Standards including the Safety & Quality standard, alongside the following statutory legislation relating to disrepair:

- Landlord and Tenant Act 1985
- Defective Premises Act 1972
- Environmental Protection Act 1990
- Homes (Fitness for Human Habitation) Act 2018

Berneslai Homes follows the pre-action protocol for disrepair claims, allowing us to effectively manage litigation claims linked to disrepair.

Current Position

Disrepair Claims (Calendar Years)		
Year	Unit Number	Settlement Costs
2020	22	£109,670.90
2021	19	£152,725.16
2022	58	£122,383.03
2023	61	£147,420.11
2024 (to date)	132	£179,820.11
Total	292	£712,019.31

Ongoing (Live) Legal Claims	
2023	8
2024	83
Total	91

	<p>We have received more disrepair claims in the first 4 months of 2024 (Jan-April) than we did in the whole of 2023 (65 Claims). These are live legal claims, but we have a number of settled claims where works are ongoing and we are still on notice to complete. This trend continues throughout Q1 and Q2 of the 2024-25 financial year:</p> <ul style="list-style-type: none"> • Q1 April 2024 to June 2024 – 46 Claims • Q2 July 2024 to Present – 43 Claims <p><u>Top Causes for Claims</u></p> <ol style="list-style-type: none"> 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. <p><u>Ongoing Actions to Improve</u></p> <ul style="list-style-type: none"> • Recruit, retain and embed a dedicated Damp, Mould & Disrepair Team • Ongoing workshops with BMBC & Kennedys Legal • Ongoing collaboration with local peers including St Ledger Homes, Rotherham Council, Sheffield Council & Kirklees Council via a quarterly BH lead forum • Robust awareness training for staff • Effective tracking of agreed repairs through to completion
<p>2. Recommendation</p>	<p>Board are requested to note the annual update and current disrepair position and ongoing actions to manage/reduce both existing and future cases.</p>

3. **Background**

Housing Disrepair Overview

- 3.1 Housing disrepair is where the Landlord’s obligations have failed to keep in repair the structure and exterior of the property, and proper working order of the installations in the dwelling for the supply of water, gas, electricity, sanitation; space heating and heating water during the tenancy in order for it to be safe and suitable for tenants to live in.
- 3.2 Where repairs or works are needed and the landlord fails to carry out the work within a reasonable amount of time after the issues are reported, this could be considered housing disrepair.

Landlords cannot be liable unless they have been given notice of the defects.

- 3.3 A high quality repairs service is a key element in the provision of good quality rented housing. It is an essential element in achieving high levels of tenant satisfaction, improving the landlord and tenant relationship and protecting health & safety.
- 3.4 A poor repairs service increases the scope for legal action being brought by tenants which diverts resources away from housing management, maintenance and improvement works. The provision of a responsive well managed housing service depends on the interrelationship between four main areas:
- The Stock
 - Tenants
 - Staff
 - Resources
- 3.5 Our vision is: Creating great homes and communities with the people of Barnsley.

Housing disrepair cases are a good indicator of how Berneslai Homes are performing against this vision and it is imperritive we continue to focus and improve in this crucial area.

- 3.6 Many solicitors' practices are now targeting council and housing association properties in a similar way to PPI claims.

Methods used are targeted utilising radio adverts, telephone calls and most predominantly using 'door knockers' to identify properties with poor external appearance as this is often symptomatic of further issues internally.

Tenants are advised that they are entitled to compensation for repairs that have not been completed satisfactorily or are outstanding, and with the current cost of living crisis, the sector is seeing an influx in claims as a result of this practice. They are not always advised that they can report repairs themselves and Berneslai Homes will do them, but are often led to believe that they will get compensation if repairs have not been completed and are advised not to allow access to complete the repairs until the claim is settled. Often these repairs have not been reported to us.

Once tenants sign the solicitor's paperwork, they can be responsible for paying solicitor's fees if the claim fails.

4. **Current Position**

Disrepair Claims

- 4.1 Barnsley Metropolitan Borough Council to date this year (calendar) have received 132 disrepair claims from 30 different solicitors.

There have been a total of 292 disrepair claims received since January 2020 and the trend shows claims are on the increase every year with over £712k paid out in settlement costs during this period from the HRA, excluding solicitor and staff costs involved in the process.

Disrepair Claims (Calendar Years)		
Year	Unit Number	Settlement Costs
2020	22	£109,670.90
2021	19	£152,725.16
2022	58	£122,383.03
2023	61	£147,420.11
2024 (to date)	132	£179,820.11
Total	292	£712,019.31

- 4.2 There are currently 91 'live claims', which are ongoing between solicitors, 8 of those being from 2023.

Ongoing (Live) Claims	
2023	8
2024	83
Total	91

- 4.3 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.

We are also seeing an increase in personal injury claims such as exacerbation of asthma, dermatitis, eczema, skin conditions, anxiety and depression all related to disrepair.

- 4.4 The top category of disrepair claim relates to damp & mould. This is a common claim as causes and remedial work is complex and requires good interaction with tenants. In order to defend and resolve claims, it is very important that accurate and up to date property information and data is available.
- 4.5 A number of recent claims have been settled with reduced offers of compensation and we have some which have been totally withdrawn when tenants have been visited by our teams.
- 4.6 Disrepair claims are currently increasing across the sector.

Recent discussions with nearby local authorities including St Ledger Homes, Rotherham Council, Kirklees Council and Sheffield Council indicate disrepair numbers are in the hundreds across the board.

Disrepair Process

- 4.7 Once the letter of claim is received by BMBC, we are notified and follow the Pre-Action Protocol to visit properties and try to gain access to carry out repairs as quickly as possible once a claim is received.

Key documentation such as the house file, tenancy agreement, repairs history, rent arrears and any other relevant information are collated and sent to Kennedy's legal who then respond to the claimant's solicitor within 20 working days to agree a joint site visit (joint expert witness visit).

This visit must take place within 20 working days of a response.

The claimant's solicitors' surveyor will meet ours on site to investigate the items of disrepair to substantiate / dispute the claims, and will then agree a Scott Schedule which has to be submitted within 10 working days of the inspection.

Kennedys' Legal then use this information to review the repairs, notice we have received and the quantum of the issues which is reported back to BMBC to allow them to settle or reject the claim.

Decisions are made as to whether the issues are contributed to by the tenants, or whether there are genuine defects within the property that we were aware of but failed to put right.

Common defects include extractor fans either not being present, not working or turned off by tenants. If extractor fans are turned off then tenants are contributing to the disrepair so the claim can be disputed.

We then have 90 working days (unless stipulated otherwise in the agreed settlement) to action and complete the agreed repairs.

- 4.8 Disrepair claims require communication across a number of services within Berneslai Homes and Barnsley Metropolitan Borough Council to coordinate responses, with Property Services managing the inspection and actioning remedial repairs in a timely manner, to Neighbourhood Teams ensuring tenants are able to manage their tenancies and supporting them with their responsibilities for looking after the property needs to run alongside defending claims.

Improvement Actions

- 4.9 Recent workshops have taken place with BMBC and Kennedys Legal to review our current position, key areas of risk we have and current and future challenges to improve our approach to disrepair.

4.10 The following actions have been agreed with SMT/EMT and are ongoing:

- Recruit, retain and embed a dedicated Damp, Mould & Disrepair Team
- Ongoing workshops with BMBC & Kennedys Legal
- Robust awareness training for Staff
- Effective tracking of agreed repairs through to completion.

5. Customer Voice/Impact

5.1 Tenants have been consulted with and have fed into our new Disrepair Policy & Procedure. They have also co-created our new Repairs Policy which included extensive consultation. As part of this there has been a review of communications we publish via social media platforms, on our website and via letter to promote reporting repairs, allowing access to complete repairs and ensure they are fully aware of the process and risks involved in allowing these firms into their homes to initiate a money driven process which could impact them financially.

5.2 Working with tenants, actively listening and learning from repair related complaints, we have made some impactful changes which include the implementation of key policies, the implementation of a communications plan to ensure we are clear and transparent about what we will and won't do with timescales included, ensuring we always take individual household needs into account and have improved the way we communicate as an organisation with a review of website content, a new suite of letters and a new tenant sign up pack.

6. Risk

6.1 Following the tragic incident in Rochdale where Awaab Ishaac sadly lost his life due to damp & mould, disrepair and damp and mould is more prevalent in the sector.

Following the Awaab's Law consultation, we await the outcome and enactment of this law in the summer of 2024.

This will put additional strain on already stretched resources.

Legal costs for tenants' solicitors are not fixed; by way of background a claim for personal injuries under £25k attracts fixed costs whereas a disrepair claim for repairs can attract hourly rate costs. The Government was due to consider fixing costs in disrepair claims, but that has been postponed for review for another 2 years. This makes it attractive for firms doing bulk litigation to look at this area and increases the risk of a continual influx in disrepair claims in the sector.

6.2 The influx of disrepair claims brings with it financial implications in the form of settlement fees. This is a risk to the HRA which is already under pressure.

6.3 An influx of disrepair claims could have reputational damage and Housing Ombudsman and Regulator of Social Housing involvement if we were to be in breach of regulatory standards and legislation.

7. Strategic Alignment

- 7.1 In line with Barnsley 2030, disrepair claims are a good indicator of how we communicate with and listen to our tenants to ensure we comply with legislation and keep them safe in their homes.

8. Data Privacy

- 8.1 There are data sharing agreements in place with BMBC, BH & Kennedys Legal to allow the effective management of disrepair claims.

9. Consumer Regulatory Standards

- 9.1 Disrepair falls under the current RSH Consumer Standards:

Safety & Quality Standard

- 9.2 The Safety & Quality standard outlines required outcomes, the most relevant to repairs and maintenance activities.
Registered providers must provide an effective, efficient, and timely repairs maintenance and planned improvements service for the homes and communal areas for which they are responsible.

- 9.3 There are specific expectations of registered providers in relation to repairs maintenance and planned improvements as follows:

- Registered providers must enable repairs and maintenance issues to be reported easily.
- Registered providers must set timescales for the completion of repairs, maintenance, and planned improvements, clearly communicate them to tenants and take appropriate steps to deliver to them.
- Registered providers must keep tenants informed about repairs, maintenance, and planned improvements to their homes with clear and timely communication.
- Registered providers must understand and fulfil their maintenance responsibilities in respect of communal areas.
- Registered providers must ensure that the delivery of repairs, maintenance and planned improvements to homes and communal areas is informed by the needs of tenants and provides value for money.

Transparency, Influence & Accountability Standard

- 9.4 The Transparency, Influence & Accountability Standard ensures we treat tenants and prospective tenants with fairness and respect, take individual diverse needs into account to ensure we deliver fair and equitable outcomes, take tenants views into account on how decisions are made and how we deliver services whilst communicating effectively. Our performance must be provided to tenants and subject to scrutiny. We must also ensure complaints are addressed fairly, effectively, and promptly.

10. Other Statutory/Regulatory Compliance

10.1 The following legislation applies:

- s.11 Landlord and Tenant Act 1985 - Repairing obligations
- s.4 Defective Premises Act 1972 - Landlord's duty of care
- Environmental Protection Act 1990
- Homes (Fitness for Human Habitation) Act 2018
- Housing Ombudsman Best Practice Guidance

11. Financial

11.1 The influx of disrepair claims brings with it financial implications in the form of settlement fees. This is a risk to the HRA which is already under pressure. Since 2020, over £712,000 has been paid out in settlement payments which could have been spent on other essential services.

12. Human Resources and Equality, Diversity and Inclusion

12.1 An Equality Impact Assessment has been carried out as part of the introduction of the new Disrepair Policy & Procedure.

12.2 Working with our new IT system provider NEC, we are planning the implementation of the Assets module throughout 2024 which will then enable us to carry out a more detailed analysis of disrepair issues linked to property archetype and geographic location.

12.3 Working with BMBC, we are hoping to be able to utilise their CRM system within 2024 which will allow us to utilise customer profile data to identify if disrepair is related to or not any particular group of tenants.

13. Sustainability Implications

N/A

14. Associated Background Papers

N/A

15. Appendices

None.

16. Glossary

HRA Housing Revenue Account
BMBC – Barnsley Metropolitan Borough Council
BH – Berneslai Homes
SMT – Senior Management Team

EMT – Executive Management Team
CRM – Customer Relationship Management
IT – Information Technology
NEC – IT system provider
RSH – Regulator of Social Housing



Creating great homes and communities
with the people of Barnsley

Report Title	BH Sustainability Strategy 2022-27 Action Plan Progress Review	Confidential	No
Report Author	Arturo Gulla	Report Status	For Approval
Report To	Board 26 September 2024	Officer Contact Details	arturogulla@berneslaihomes.co.uk

1. Executive Summary	<p>Berneslai Homes Sustainability Strategy 2022-27 was approved by BH Board in September 2022 – appendix A. It was developed in alignment with the Council’s ambition for Berneslai Homes to become net zero by 2045. In addition, the government has set a target for social housing providers to attain a minimum rating of Energy Performance Certificate (EPC) C for homes by 2035 (2030 for “fuel poor” households). The Sustainability Strategy aligns with Berneslai Homes’ Strategic Plan and ambitions of “Zero Carbon.</p> <p>To ensure effective governance it was agreed that EMT and the Board would receive an annual update, and this would be shared with our key stakeholders.</p> <p>As a live document the action plan is regularly updated by the Head of Asset Management and reviewed by the Executive Director to monitor progress.</p> <p>Summary table below provides progress against Sustainability Strategy Annual Plan 2022/23 and 2023/24 success measures.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Success Measures 2022/23</th> <th style="text-align: left;">Date / progress update</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Deliver LAD2 and SHDF Wave 1 “Retrofit programmes to approx. 250 Council Homes</td> <td style="padding: 5px;">Completed - LAD2 delivered “retrofit” to 32 Council Homes. SHDF wave 1 is estimated to deliver “retrofit” to a further 70 Council Homes. The delivery window for SHDF wave 1 was extended to November 2023.</td> </tr> <tr> <td style="padding: 5px;">BH Construction Services to be accredited to PAS2030</td> <td style="padding: 5px;">Completed - Accredited for loft and floor insulation July 2024. Looking to add external wall insulation and internal wall insulation.</td> </tr> </tbody> </table>	Success Measures 2022/23	Date / progress update	Deliver LAD2 and SHDF Wave 1 “Retrofit programmes to approx. 250 Council Homes	Completed - LAD2 delivered “retrofit” to 32 Council Homes. SHDF wave 1 is estimated to deliver “retrofit” to a further 70 Council Homes. The delivery window for SHDF wave 1 was extended to November 2023.	BH Construction Services to be accredited to PAS2030	Completed - Accredited for loft and floor insulation July 2024. Looking to add external wall insulation and internal wall insulation.
Success Measures 2022/23	Date / progress update						
Deliver LAD2 and SHDF Wave 1 “Retrofit programmes to approx. 250 Council Homes	Completed - LAD2 delivered “retrofit” to 32 Council Homes. SHDF wave 1 is estimated to deliver “retrofit” to a further 70 Council Homes. The delivery window for SHDF wave 1 was extended to November 2023.						
BH Construction Services to be accredited to PAS2030	Completed - Accredited for loft and floor insulation July 2024. Looking to add external wall insulation and internal wall insulation.						

Green upskilling of staff – Retrofit Qualifications	Completed – Several members of Asset Management and Construction Services have completed retrofit qualifications. Some qualification ongoing.
Continue to network and share best practice	Ongoing - Zero carbon and sustainability task group established and meeting regularly to share technology advances and best practice for exploration. Superseded by Retrofit Task Group June 2024. Member of Yorkshire and Humberside Housing Association Sustainability Forum and Positive Climate Partnership.
Liaise with Wates to plant 500 trees	Completed - Wates have planted 2820 trees since 2022 to date.
Retrofit Pilot via with Construction Services and Wates	Commenced – Construction Services completed their Retrofit Pilot at Roper Lane December 2023. Wates will deliver “retrofit” alongside Barnsley Homes Standard works to 20 properties in Wombwell. Revised completion date November 2024 supply chain difficulties securing window installer to satisfy PAS 2030
Review Void Standard Specification to increase energy efficiency of homes through suitable measures	Commenced – completion April 2025
Partner with the Council and Energise Barnsley to install 1000 Solar PV systems to Council homes	Commenced – completion December 2025
Success Measures 2023/24	Date / progress update
Investigating possible amendments to secondary heating specification (gas and electric fires)	Complete – Report approved by EMT March 24 for phased removal or secondary heating. Needs to be incorporated in void standard as a starting point. Low numbers of secondary heating removals are taking place as part SHDF wave 2.1 scheme
Deliver SHDF Wave 2.1 “Retrofit programmes to approx. 150 Council Homes	Commenced – Revised number down to 130 due to increased costs 2 year programme completion March 25
Explore with the Council SHDF Wave 2.2	Completed - Not eligible to bid for wave 2.2 as successful at wave 2.1
EPC C task and finish group established with its own action plan including 20 properties to	Commenced - Wates will deliver “retrofit” alongside Barnsley Homes Standard works to 20 properties in Wombwell completion date anticipated

receive retrofit works alongside Barnsley Homes 2023/24 Standard as part of PRIP	March 2024. Revised completion date November 2024 supply chain difficulties securing window installer to satisfy PAS 2030.
Success Measure 2024/25	Date / progress update
Implement SAVA (intelligent energy modelling) as part of NEC Repairs First transformation project in conjunction with phase 2 Assets module	Commenced - Will provide intelligent energy modelling of stock. Commenced September 2024 estimated completion mid November 2024

Current EPC stock profile

The collection of 85% EPC data and associated findings has advanced our understanding of the stock surveyed profile

- A total of **41%** (no 7,362) of the stock has an EPC C or above.
- A total of **53%** (no 9,518) of the stock has an EPC D.
- A total of **6%** (no 1,077) of the stock has an EPC E or F.

The performance target for 2024/25 is 45% of the stock has an EPC C or above. The following years to 2029/30 will have a challenging year on year 11% target increase to achieve 100% position across the full stock.

In March 2024, the Council were presented by Berneslai Homes with several significant risks which were needed to be mitigated. The decision was made to postpone EPC works for 12 months to ensure that a portion of the budget was reallocated accordingly to alleviate these risks. It was agreed the time would be used to further develop and populate the new NEC assets module and SAVA system. This will provide a revised baseline position on what properties from a cost and measures perspective will require retrofit / sustainability works to achieve EPC C and net zero carbon.

Berneslai Homes have developed a project implementation programme for the new SAVA system and NEC assets module. The ICT Team will be working closely with the Asset Management Team to ensure smooth delivery of these new applications/platforms.

The new systems will better inform Berneslai Homes from an asset management and energy intelligence perspective. This will effectively allow for economic and social analysis and assessment of stock. The work completed will shape the future retrofit strategy and enable further development of a HRA 30 year business plan for delivering decarbonisation of the Council stock.

2.Recomm endations	<p>Berneslai Homes working closely with the Council will continue to deliver on the commitments we made in our Sustainability Strategy 2022-27, ensuring we continue our journey to meet our legislative EPC C targets for 2030 and long term strategic ambitions for net zero carbon by 2045.</p> <p>Board approve the review of the Sustainability Strategy annual plan 2023/24 progress report and provide appropriate feedback.</p>
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3. Background

3.1 Berneslai Homes Sustainability Strategy 2022-27 was approved by BH board in September 2022 – appendix a. It was developed in alignment with the Council’s ambition which is Berneslai Homes will become net zero by 2045, or earlier if possible, and the government has set a target for social housing providers to attain a minimum rating of Energy Performance Certificate (EPC) C for homes by 2035 (2030 for “fuel poor” households). The Sustainability Strategy aligns with Berneslai Homes Strategic Plan and ambitions of “Zero Carbon”.

3.2 The strategy focuses on: -

- Addressing emissions across our organisation, from our operational activities through to the homes we manage.
- A focus on managing better quality, higher performing homes that help our tenants save on fuel costs whilst also reducing their carbon emissions.
- Making sure that our plan feeds into the Council’s wider ambition to become net zero carbon by 2045.

3.3 Provides a structured framework to achieve our ambitions and that of the Council, key priorities within strategic plan can be achieved for decarbonisation and sustainability of the housing stock.

3.4 The EPC C task and finish group and Zero Carbon and Sustainability Task Group have been superseded by Retrofit Task group from June 2024.

4. Current Position / Issues for Consideration

4.1 To ensure effective governance it was agreed the Executive Management Team would receive regular oversight on the progress of the actions within the roadmap, which are the critical indicators of success. It was agreed by the Property Services Directorate this was an appropriate time to share progress with Board, EMT and other key stakeholders.

4.2 As a live document it is regularly updated by the Heads of Service and reviewed by the Executive Director to monitor progress.

- 4.3 Upon review of the success measures it clearly demonstrates there has been strong progress made against the remaining 2022/23 success measures and the newly added 23/24 success measures and progress made towards 2027 success measures – Appendix B.
- 4.4 In March 2024, the Council were presented with several significant risks which were needed to be mitigated. The decision was made to postpone EPC works for 12 months to ensure that a portion of the budget was reallocated accordingly to alleviate the risks. It was agreed the time would be used to further develop and populate the new NEC asset management and SAVA system. This will provide a revised baseline position on what properties from a cost and measures perspective will require retrofit / sustainability works to achieve EPC C and net zero carbon.
- 4.5 Berneslai Homes have developed a project implementation programme for the new SAVA system and NEC assets module. The ICT team will be working closely with the Asset Management Team to ensure smooth delivery of these new applications/platforms.
- 4.6 The new systems will better inform us from an asset management and energy intelligence perspective. This will effectively allow for economic and social analysis and assessment of stock. The work completed will shape the future retrofit strategy and enable further development of a HRA 30 year business plan for delivering decarbonisation of the Council stock.
- 4.7 Berneslai Homes working closely with the Council will continue to deliver on the commitments we made in our Sustainability Strategy 2022-27, ensuring we continue our journey to meet our legislative EPC C targets for 2030 and long term strategic ambitions for net zero carbon by 2045.

5. Customer Voice / Impact

Consultation was undertaken with customers via our tenant's voice panel (TVP). Customers views and feedback sought from the exercise have been fed into the original strategy. Several activities have taken with the TVP to ensure our approach to future decarbonisation is understood. Further sessions will be arranged as progress towards the sustainability road map is made.

6. Risk and Risk Appetite

- 6.1 The strategy and road map that is used to monitor performance, alleviates risk, and provides assurance to stakeholders that we have a framework that allows an effective approach to decarbonising the Council housing stock.
- 6.2 There remains currently no fully funded HRA 30-year business plan that includes for decarbonisation works to achieve EPC C by 2030 and net zero carbon works by 2045.

7. Strategic Alignment

7.1 The Sustainability Strategy aligns with Berneslai Homes Strategic Plan and ambitions of “Zero Carbon”. It supports the councils 2030 vision and the key theme of a sustainable Barnsley and its aims, to reduce carbon emissions of the council and borough wide.

8. Data Privacy

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

9. Consumer Regulatory Standards

9.1 In line with the Regulator for Social Housing Safety and Quality Consumer Standard, Berneslai Homes on behalf of the 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 Sustainability Strategy will only serve to improve the council housing stock, increasing energy efficiency, reducing carbon emissions and alleviating the effects of fuel poverty to our customers through our agreed approach.

10. Other Statutory/Regulatory Compliance

10.1 The Councils ambition is Berneslai Homes will become net zero by 2045, or earlier if possible, and the government has set a target for social housing providers to attain a minimum rating of Energy Performance Certificate (EPC) C for homes by 2035 (2030 for “fuel poor” households). The Sustainability Strategy provides a roadmap for improving the energy of the housing stock to achieving local and national targets.

10.2 The collection of 85% EPC data and associated findings has advanced our understanding of the stock surveyed profile:

- A total of 41% (no 7,362) of the stock has an EPC C or above.
- A total of 53% (no 9,518) of the stock has an EPC D.
- A total of 6% (no 1,077) of the stock has an EPC E or F.
- The D band presents opportunities for advancing our energy targets, but further checks on stock types and feasibility are still required.

10.3 The target outturn for 2024/25 is 45% of the stock has an EPC C or above. The following years to 2029/30 will have a challenging year on year 11% target increase to achieve 100%.

11. Financial

- 11.1 A rent in increase in April 2023 allowed for the Council to borrow around c.£30M to contribute towards the estimated £60M cost of bringing all properties to EPC C. In December 2023 the Council agreed for £14M of funding reallocated to resource the Councils Housing Growth – 5 Year New Build & Acquisition Programme.
- 11.2 As per point 4.4 of the report in March 2024, the Council were presented with several significant risks which were needed to be mitigated. The decision was made to postpone EPC works for 12 months to ensure that a portion of the budget was reallocated accordingly to alleviate the risks.
- 11.3 The Council have agreed the EPC programme funding will continue to contribute towards the Government's Social Housing Decarbonisation Funded schemes.

12. Human Resources and Equality. Diversity and Inclusion

- 12.1 The strategy and road map will endeavour to maintain an approach and upskill our staff accordingly to deliver services effectively to tenants as individuals and an organisation to drive ambitions.
- 12.2 The programme will aim to maintain a fair and equitable approach to all tenants and properties, in line with our policies and procedures and any applicable grant funding criteria.
- 12.3 As part of any energy efficiency works all tenants receive communications catered to their NEC stored contact preferences. Our Project Liaison Officer carries out a home visit tenant induction prior to any improvement work starting. This is an opportunity to identify and agree any required reasonable adjustments for the tenants.

13. Sustainability Implications

- 13.1 The Sustainability Strategy and road map will ultimately drive Berneslai Homes ambitions in reducing its carbon footprint and the emissions of the homes we manage on behalf of the Council.

14. Associated Background Papers

- 14.1 N/A

15. Appendices

- 15.1 Appendix A – BH Sustainability Strategy 2022-27
- 15.2 Appendix B – BH Sustainability Strategy action plan

16. Glossary

16.1 SHDF – Social Housing Decarbonisation Fund

EPC – Energy Performance Certificate

PAS – Publicly Available Specification



Sustainability Strategy 2022-27

SUSTAINABILITY STRATEGY

Here at Berneslai Homes we recognise that we have a responsibility to protect future generations by reducing carbon emissions and helping to limit the effects of climate change.

Working alongside Barnsley Council, we have developed our ambitious new Sustainability Strategy and Zero Carbon plan for Council homes across Barnsley.

Key pillars of our strategy include:

- Addressing emissions across our organisation, from our operational activities through to the homes we manage.
- A focus on managing better quality, higher performing homes that help our tenants save on fuel costs whilst also reducing their carbon emissions.
- Making sure that our plan feeds into the Council's wider ambition to become net zero carbon by 2045.



WHO WE ARE

We are Berneslai Homes, working in partnership with Barnsley Council as their local housing company.

Our values: everyone who works for Berneslai Homes will embrace these values and make them relevant to their role.

Our vision is clear:

Creating great homes and communities with the people of Barnsley.

Our mission supports our vision:

Great place, great people, great company.

Creating and developing vibrant neighbourhoods where diverse communities thrive and develop; attracting and retaining talented people, serviced by a diverse organisation.

Customer first

focus on residents being included on the zero-carbon journey.

Can do attitude

work purposefully to achieve zero-carbon objectives.

Curious

explore zero-carbon innovative solutions.



OUR AMBITIONS

Strategic Plan 2021-31

How will we measure our success?



Use of own vehicles to travel to work and mileage claims reduced by **50%**.



Fleet **100%** electric.



100% success rate in obtaining Social Housing Decarbonisation Funding up to 2030.



100% EPC 'C' for all properties.



HRA business plan **100%** funded with additional income for zero carbon work.



25% tenant heating replaced with green alternatives – air/ground sourced or hydrogen.

ZERO CARBON OUR AMBITION



Zero carbon - our ten year ambition

Meeting the targets locally and nationally by changing the way we work and investing in homes.

We will:

- Replace all Construction Services fleet to electronic vehicles (EV) by 2030.
- Increase staff expertise to deliver zero carbon measures throughout the borough.
- Work closely with the council to maximise the success of the decarbonisation and future zero carbon initiatives.
- Align with the councils, active travel, transport and, climate change strategies and the targets within these.
- Procure green energy for our operations.
- Fit solar panels to our properties.
- Have a modern and effective energy performance certificate process in place.
- Introduce new heating systems with green alternatives for our customers.

What we are doing now

- Utilising different funding mechanisms and opportunities available to deliver "retrofit" energy efficiency measures to homes.
- Supporting Construction Services route to PAS2030 accreditation.
- Collaborating with the Council on tree planting initiatives.
- Increasing our stock condition and energy performance data.
- Partnering with the Council and Energise Barnsley to install new renewable technology to homes.
- Networking with sector peers on decarbonisation through various forums.

OUR AMBITION FOR COUNCIL HOMES

Our aim: we will:

- Work with the Council to achieve EPC C by 2030 and net zero carbon by 2045.
- Use information on the stock to develop improvement programmes.
- Evaluate asset performance (financial and social) and undertake options appraisals where necessary.
- Engage with our customers on how to get maximum benefit from the investment we make.
- Reduce energy consumption to homes to minimise energy costs to customers.

Planning: we will...

- Engage and consult with our customers as part of our plans.
- Enhance data we hold to improve energy efficiency and reduce emissions.
- Target homes in fuel poverty and with lowest EPC bandings first where we can .
- Align to existing investment plans to achieve value for money and minimise disruption.

Fabric first: we will...

- Improve the building fabric to reduce heat loss and demand for heat.
- Focus on “quick wins” measures , which when actioned are cost effective and provide relatively large benefits.
- Consider renewable technology solutions when fabric improvements aren’t possible.

Low-carbon heating: we will:

- Monitor and trial new heating technologies as we move towards no new gas boilers from 2035.
- Work with our customers to understand new technologies.
- Select technologies offering affordable warmth, carbon reduction, suitability and affordability.
- Prioritise investment according to energy performance subject to cost benefit analysis.

BERNESLAI HOMES' CARBON FOOTPRINT

What is a carbon footprint?

A carbon footprint is a measure of the total greenhouse gas emissions (GHG) generated both directly and indirectly by an organisation:



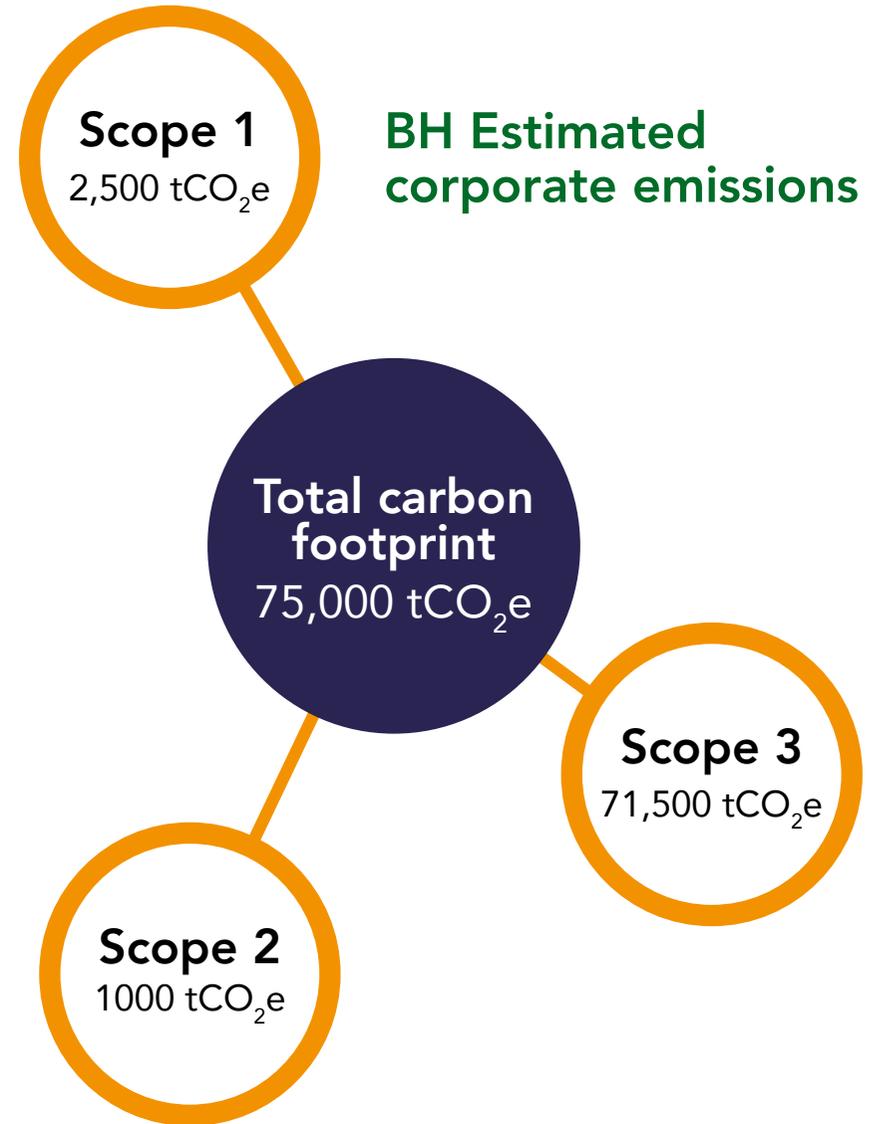
Scope 1: Emissions associated with fuels.



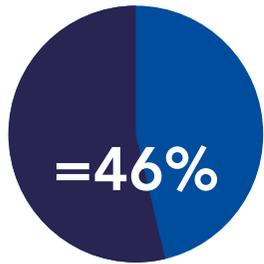
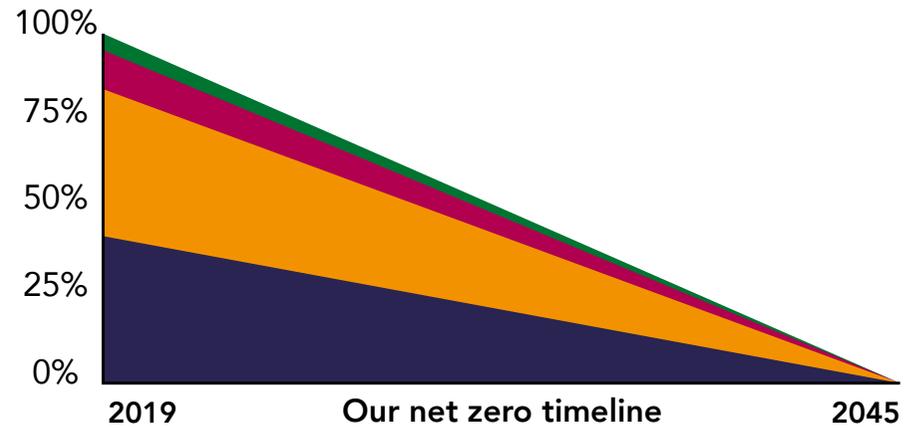
Scope 2: Emissions associated with fuels that are consumed indirectly, such as heating and cooling.



Scope 3: Emissions associated with activity in your value chain.



BERNESLAI HOMES MOVING TO NET ZERO



Procurement and capital expenditure

- Continue engaging with our most significant suppliers.
- Ensure more proactive net zero procurement initiatives.
- Review minimum environmental standards for all our contractors to meet.

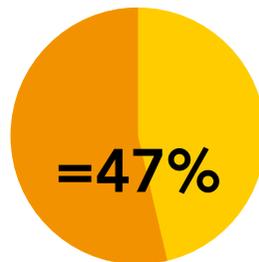


Business travel and commuting

- Introduce a staff sacrifice scheme for electric vehicles.
- Introduction of electric vehicles for fleet use.
- Work with the Council on the installation of EV charging infrastructure to buildings.

Corporate building energy

- Align with the Council on energy reduction plans for buildings.
- Continue educating all officers, customers and other stakeholders on climate change through carbon literacy training.
- Continue fitting solar panels and green heating to our properties.



Waste and water

- Review waste and water contracts and consolidate them.
- Review zero waste to landfill targets.
- Review waste minimisation strategy.



OUR PLANS FOR MOVING TO NET ZERO

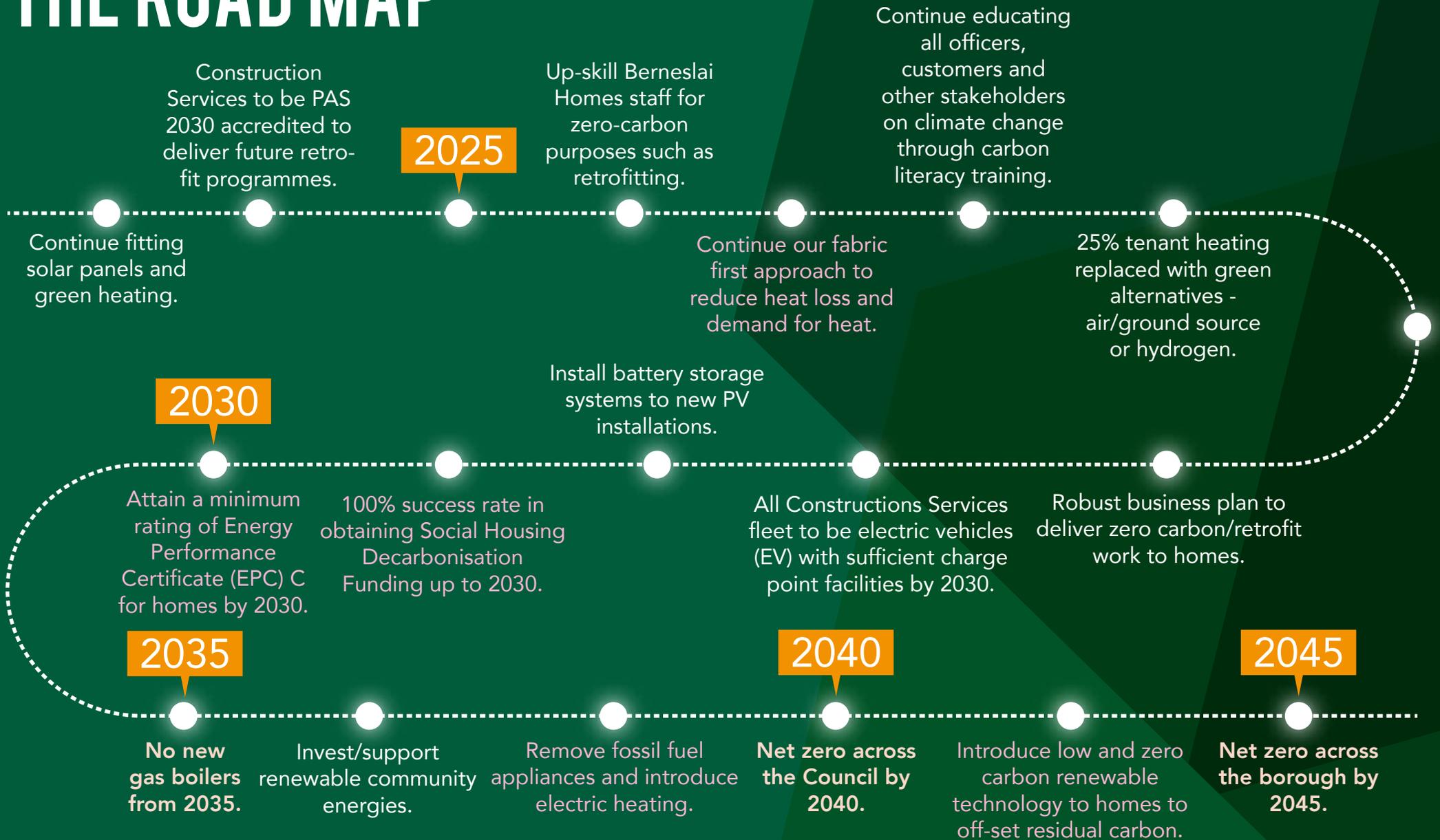
Our other plans

We will:

- review our policies to ensure support for cycling and walking.
- continue working to identify other ways that emissions can be reduced through effective management of the fleet.
- look to widen our search for sustainable suppliers. We will find the correct balance between supporting local business and procuring sustainably for our homes to meet our customers needs.
- reduce waste disposal and water consumption at our buildings to increase efficiency.



THE ROAD MAP



SUCCESS MEASURES 2027

- 100% Energy Performance Certificates (EPC) in place for all Council Homes.
- Successful with 100% funding through SHDF.
- HRA funded programme to retrofit/decarbonise homes.
- No homes with an EPC lower than 'D' rated.
- Customer behavioural change to the use of low carbon heating technologies.
- Measured reduction of BH corporate green house gas emissions.
- Continued partnership working with Council and Energise Barnsley to deliver sustainability initiatives to homes.
- Use of own vehicles to travel to work and mileage claims is reduced by 50%.
- On track for 25% of heating through renewable sources in homes.
- Construction Services fleet 65% electric vehicles (EV).



ANNUAL PLAN 2022/23

- Deliver LAD2 and SHDF Wave 1 “Retrofit” programmes to approx. 250 Council Homes.
- Work with the Council on SHDF Wave 2 bid submission for funding for further retrofit programmes.
- Berneslai Homes sign up to the Councils Affordable Warmth Charter.
- Consult with our Tenants Voice Panel to understand the approach to future decarbonisation.
- Complete Retrofit Pilot with Construction Services and Wates.
- Construction Services to be accredited to PAS2030.
- Carbon Literacy eLearning to be completed by staff.
- Green upskilling of staff.
- Review Voids Standard to increase energy efficiency of homes through suitable measures.
- Collaborate with Council in its Tiny Forests Tree planting initiatives.
- Liaise with Wates to plant 500 trees.
- Partner with the Council and Energise Barnsley to install 1000 Solar PV systems to Council Homes.
- Continue to network and share best practice.



GLOSSARY OF TERMS

Carbon Footprint – the amount of carbon dioxide released into the atmosphere as a result of the activities of a particular individual, organisation, or community.

Carbon Literacy – an awareness of the carbon dioxide costs and impacts of everyday activities, and the ability and motivation to reduce emissions, on an individual, community and organisational basis.

Climate Change – significant changes in global temperature, precipitation, wind patterns and other measures of climate that occur over several decades or longer.

Decarbonisation – the process of stopping or reducing of carbon gases, especially carbon dioxide, being released into the atmosphere.

Energy Performance Certificate (EPC) – are a ratings scheme to measure the energy efficiency of buildings.

Electric Vehicles (EV) – mode of transport which powered by electricity.

Fabric First – an approach to building design that involves maximising the performance of the components and material that make up the building fabric itself, before considering additional systems.

Fuel Poverty – is the condition by which a household is unable to afford to heat or cool their homes to an adequate temperature.

Green House Gas Emissions (GHG) – the emission into the earth's atmosphere of any gases, especially carbon dioxide, that contribute to the greenhouse effect.

Local Authority Delivery Scheme (LAD2) – Government funding for local authorities to improve the energy efficiency of domestic properties in England.

Low Carbon Heating – systems that release little to no carbon into the atmosphere as it works to heat a building.

Net-Zero Carbon – achieving a balance between the carbon emissions emitted into the atmosphere, and the carbon removed from it.

PAS 2030 – is the industry specification for which all energy efficiency installers must be certified to, and compliant with, when carrying out energy efficiency measures under government initiatives.

Retrofit – the process of making changes to existing buildings so that energy consumption and emissions are reduced. Changes should provide the benefit of a more comfortable and healthier home with lower fuel bills.

Social Housing Decarbonisation Fund (SHDF) – Government funding that will support the installation of energy performance measures in social homes in England.

tCO₂e – the amount of greenhouse gas emitted during a given period, measured in metric tons of carbon dioxide equivalent.



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Berneslai Homes Limited is a company controlled by Barnsley Metropolitan Borough Council. A company limited by guarantee, registered in England and Wales, number 4548803. Registered office: 10th floor, Gateway Plaza, Off Sackville Street, BARNSELY, South Yorkshire S70 2RD.

July 2022

Sustainability Strategy 2022 – 2027 Action Plan

Appendix B

Ref no.	Success Measures	Update	Status
	Success Measures 2022/23		
1.0	Deliver LAD2 and SHDF Wave 1“Retrofit” programmes to approx. 250 Council Homes	LAD2 delivered “retrofit” to 32 Council Homes. SHDF wave 1 is estimated to deliver “retrofit” to a further 70 Council Homes. The delivery window for SHDF wave 1 was extended to November 2023.	Complete November 2023
1.1	Work with the Council on SHDF Wave 2 bid submission for funding for further retrofit programmes	Successful as part of Tees Valley Combined Authority Consortium. “Retrofit” to 148 Council Homes delivery window will run to 30 th September 2025	Complete March 2023
1.2	Berneslai Homes sign up to the Councils Affordable Warmth Charter	Signed December 2022. By signing up to the charter we’ve made a pledge using one or more of the five key priorities: <ul style="list-style-type: none"> • Energy efficient homes • Affordable energy • Employment, education and skills • Partnership working • Low carbon commitments 	Complete January 2023
1.3	Consult with our Tenants Voice Panel to understand the approach to future decarbonisation	Solar battery project Age UK October 22 EPC C target approach and discussion around Energy Performance rating and stand-alone fires having a detrimental effect February 23	Complete April 2023

Ref no.	Success Measures	Update	Status
		Net Zero Measures Demonstrator Tour – Broadacres retrofitted home attended by 2 Tenants Voice Panel members April 23	
1.4	Complete Retrofit Pilot with Construction Services and Wates	Construction Services completed their Retrofit Pilot at Roper Lane December 2023. Wates will deliver “retrofit” alongside Barnsley Homes Standard works to 20 properties in Wombwell completion date anticipated March 2024. Revised completion date November 2024 supply chain difficulties securing window installer to satisfy PAS 2030.	Commenced Revised completion date November 2024
1.5	Construction Services to be accredited to PAS2030	Construction Services to continue the process to gain PAS2030 accreditation using Roper Lane Swedish timber constructed properties to gain experience and required evidence works completed 28 June 2024. Accredited for loft and floor insulation July 2024. Looking to add external wall insulation and internal wall insulation.	Complete July 2024
1.6	Carbon Literacy eLearning to be completed by staff	Carbon Literacy eLearning completed by 131 staff	Complete December 2022

Ref no.	Success Measures	Update	Status
1.7	Green upskilling of staff	Several members of Berneslai Homes Asset Management completed Level 2 Award in Understanding Domestic Retrofit, Level 3 Award in Retrofit Advice and Domestic Energy Assessor (as a pathway to level 4 award in Retrofit Assessment). A member of Tenants Voice Panel also completed Level 2 Award in Understanding Domestic Retrofit. Construction Services are also upskilling staff to meet the necessary qualification standard as required for PAS2030 accreditation. A member of Asset Management Team completed Level 3 Award in Energy Efficiency for Older and Traditional Buildings	Ongoing July 2024
1.8	Review Voids Standard to increase energy efficiency of homes through suitable measures	Lead Officer Head of RMBS. Energy wish list shared for consideration when creating the revised standard. Awaiting Savills data from PRIP review before finalising approach. Once agreed will go out for pricing. Works to be listed individually to enable compare. In the meantime a change to the void standard to remove secondary heating is planned.	Commenced April 2025
1.9	Collaborate with Council in its Tiny Forests Tree planting initiatives	Asset Management team away day tree planting with BMBC November 2022 included 11 large trees planted along with a litter pick of the park at Thurnscoe park. 600 saplings will be a thriving Tiny Forest within just a few years which have been planted at Goldthorpe	Completed November 2022

Ref no.	Success Measures	Update	Status
1.10	Liase with Wates to plant 500 trees	Wates have planted 2820 trees since 2022 to date.	Completed August 2024
1.11	Partner with the Council and Energise Barnsley to install 1000 Solar PV systems to Council Homes	Council leading on contract with Berneslai Homes leading on the operational delivery. Installation programme commenced August 2024	Commenced Completion by December 2025
1.12	Continue to network and share best practice	Zero carbon and sustainability task group established and meeting regularly to share technology advances and best practice for exploration. Superseded by Retrofit Task Group June 2024. Member of Yorkshire and Humberside Housing Association Sustainability Forum and Positive Climate Partnership.	Complete July 2024 ongoing
	Success Measures 2023/24	Update	Status
2.0	EPC C task and finish group established with its own action plan including 20 properties to receive retrofit works alongside Barnsley Homes Standard works as part of Wombwell 23/24 scheme	Wates will deliver "retrofit" alongside Barnsley Homes Standard works to 20 properties in Wombwell completion date anticipated March 2024. Revised completion date November 2024 supply chain difficulties securing window installer to satisfy PAS 2030.	Commenced Revised completion November 2024
2.1	Investigating possible amendments to secondary heating specification (gas and electric fires).	Report approved by EMT March 24 for phased removal or secondary heating. Needs to be incorporated in void standard as a starting point. Low numbers of secondary heating removals are taking place as part SHDF wave 2.1 scheme	Completed Report approved March 2024
2.2	Explore with Council SHDF wave 2.2 expected October 2023	Not eligible to bid for wave 2.2 as successful at wave 2.1	Completed Nov 2023

Ref no.	Success Measures	Update	Status
2.3	Deliver SHDF Wave 2.1 "Retrofit programmes to approx. 150 Council Homes	Commenced – Revised number down to 130 due to increased costs 2 year programme completion March 25	Commenced completion Dec 24
Success Measure 2024/25			
3.0	Implement SAVA as part of NEC Repairs First transformation project	Will provide intelligent energy modelling of stock. Commenced September 2024 estimated completion December 2024	Commenced completion Dec 24
3.1	Corporate and fleet services moving from Carlton.	Change in approach to procurement and operations new carbon emissions assessment required links to 4.5 and 4.9	Commenced
Success Measures 2027			
4.0	100% Energy Performance Certificates (EPC) in place for all Council Homes	Target to have 100% by April 2024. 12,947 as at August 23. 14,415 as at July 24.	Commenced
4.1	Successful with 100% funding through SHDF	100% successful bid for SHDF Wave 1 & 2.1 and both successful. Not eligible for Wave 2.2. Commenced planning for wave 3 awaiting competition opening.	Commenced
4.2	HRA funded programme to retrofit/decarbonise homes	Working with the Council to develop a fully funded retrofit plan that achieves EPC C 2030 and Net Zero Carbon 2045.	TBC
4.3	No homes with an EPC lower than 'D' rated	A total of 6% of the stock has an EPC lower than a 'D'.	Ongoing monitoring
4.4	Customer behavioural change to the use of low carbon heating technologies	Ongoing customer engagement to improve customers experiences of ongoing use of low carbon heating technologies i.e. Social Housing Decarbonisation Scheme and Energise Barnsley solar PV scheme.	Ongoing

Ref no.	Success Measures	Update	Status
4.5	Measured reduction of BH corporate green house gas emissions	The relocation Berneslai Homes Construction Services will have a positive impact on BH corporate green house gas emissions.	Commenced September 2024
4.6	Continued partnership working with Council and Energise Barnsley to deliver sustainability initiatives to homes	Worked with Energise Barnsley to explore Northern Power Grid Community Distribution System Operation innovation project	Commenced
4.7	Use of own vehicles to travel to work and mileage claims is reduced by 50%	Work with the Council to agree a collective approach for staff.	Ongoing
4.8	On track for 25% of heating through renewable sources in homes	BH performance report currently at 14.12%	Commenced
4.9	Construction Services fleet 65% electric vehicles (EV)	BH CS Transport & Depot Manager to develop approach to electric vehicle usage	Ongoing
Success Measure 2031			
5.0	Use of own vehicles to travel to work and mileage claims reduced by 50%.	As is 4.7 above	Ongoing
5.1	Fleet 100% electric.	As is 4.9 above	Ongoing
5.2	100% success rate in obtaining Social Housing Decarbonisation Funding up to 2030.	As is 4.1 above. 100% success rate to date for waves eligible to bid for.	Commenced
5.3	100% EPC 'C' for all properties.	As at July 24 6,281 properties are C + rated. (August 23, 5,296 properties are C + rated). This is an increase of 2,652 achieving EPC C since Sep 22.	Ongoing
5.4	HRA business plan 100% funded with additional income for zero carbon work.	As is 4.2 above	TBC
5.5	25% tenant heating replaced with green alternatives – air/ground sourced or hydrogen.	Will form part of the agreed Retrofit Strategy between Berneslai Homes and the Council regarding the replacement to green alternatives	TBC

Knowing our staff

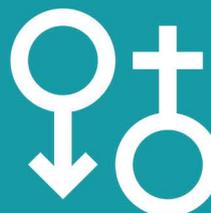
ITEM 12



56% Male (*) **49%**
44% Female (*) **51%**



7.6% 16-24 (**9%**)
19% 25-34 (**13.5%**)
32% 35-49 (**18.3%**)
36.5% 50-64 (**21.4%**)
4.9% 65+ (**19.4%**)



2.7% LGBTQ+ (**2.5%**)



4.9% Identify as disabled (**22%**)



95.4% White British (**96.9%**)
2.1% BME (**3%**)
2.5% Prefer not to say



49.7% Christian (**68.5%**)
45.7% No faith (**24%**)
1.5% Other religion (**0.3%**)
3.1% Prefer not to say

White text = Barneslai Homes staff
Pink text = Barnsley Profile - 2021 census
(*) Economically active

Data: June 2024

Our assets / our homes



Total assets ▶

18,400 total assets
Council owned stock – 17,967
Together housing – 53
Leaseholders – 349
Shops – 31



Council owned stock ▶

Houses - 10,219 (57%)
Bungalows - 4,644 (26%)
Flats, maisonettes, bedsits and other property types - 3,104 (17%)
Houses - 2,838 (28%) 2 bed, 7,087 (69%) 3 bed and 294 (3%) other, 1 bed and 4 bed+



Designation ▶

68% of homes are general needs (12,167)
32% with restrictions (*) (5,794)
11 Independent Living Schemes with 312 flats for over 60s



Age of stock ▶

70% of homes were built before 1965



Attributes ▶

743 blocks to maintain
46 community facilities
90% of our homes are mains gas, 10% air source, biomass, ground source, other electrical and solid fuel



Condition ▶

14,008 homes EPC surveyed (78%)
99.91% homes meet Barnsley Homes Standard
15,073 homes received stock condition survey (84%)

(*) Restrictions are generally age or medical requirements. General needs is accommodation that is available for any applicant as long as they meet the bedroom matching rules.

Data: May 2024

Building safety compliance

- ✓ Fire safety compliance
- ✓ Gas safety compliance
- ✓ Asbestos safety compliance **100%**
- ✓ Water safety compliance
- ✓ Lift maintenance

✓ Electric safety compliance (*) **99.76%**

(*) This is due to no access, which we're working on as a priority

Data: June 2024

Repairs and maintenance



75% Satisfaction with repairs in last 12 months

76% Satisfaction with time taken to complete repairs after being reported

39 Disrepair cases (Since April 2024)

320 Damp, mould and condensation treatment jobs outstanding

Managing estates



60% Satisfaction landlord makes a positive contribution to neighbourhoods

48% Satisfaction with landlord's approach to handling of anti-social behaviour

66% Satisfaction that communal areas are clean and well maintained

Letting homes



5,675 Number of people on housing register

88 Average number of applications per property advertised

Data: June 2024

Listening to tenants

43% Satisfaction with how we deal with complaints

60% Satisfaction that we listen to tenant views and act upon them

36 Service improvements implemented during 2023/24

64% Satisfaction that we keep tenants informed

77% Satisfaction that we treat tenants fairly



Delivering value for money



- 77% of tenants say rent is value for money
- Collected 99.2% of rent due (June 2024)
- Tenant arrears 3.66% (June 2024)
- 66% of funds were spent locally, supporting the local economy and keeping the 'Barnsley Pound' in Barnsley (March 2024)
- Made over £155K of efficiency savings that was invested back into services (2023/2024)

Data: September 2023



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Last updated August 2024