



## **Regulatory Standards Annual Compliance Self-Assessment Year Ending March 2022**

## Introduction

In providing good quality homes and management services to over 20,000 customers across Greater Manchester, Irwell Valley Homes (IVH) seeks to follow the standards and expectations set out in the Regulatory Standards whilst also following relevant legislation and good practice. This document sets out how we comply with the various aspects of the Regulatory Standards by highlighting our activities against the required outcomes as identified within the relevant standard. Additional assurance through other channels (such as the provision of external assurance and key documents) is also provided for each area.

## Statement of Compliance by the Chair of the Board

As a responsible business and as part of our commitment to supporting our co-regulatory approach with the Regulator of Social Housing (RSH), we review our compliance with the Regulatory Standards every year to ensure that we continue to meet the expectations of our customers and stakeholders. This includes reviewing compliance against other relevant legislative and governance requirements.

The Board continues to be supported by three IVH delegated committees, the Resident's Scrutiny Panel, and the Boards of the group subsidiary, who, along with the main Board, receive assurance on compliance throughout the year through a reporting cycle on the key areas of the Association's internal controls framework. A key element of this framework is the Association's Combined Assurance Framework (CAF) - identifying assurance across our 'top risks' to show how these risks are being effectively managed. Assurance is derived from our "three lines of defence" – ranging from operational policies and processes through to assurance being provided by external providers, including our Internal and External Auditors and our Treasury Advisors. The CAF and wider internal controls provide the appropriate confidence to Board that our assurance is robust and is being appropriately monitored and refreshed. IVH currently has the highest rating for governance (G1) and a compliant rating for financial viability (V2). This, combined with the Board's own internal assessment and an independent review from external auditors Campbell Tickell, provides confidence to members that effective processes are in place to evidence our compliance. This document helps to evidence our compliance.

## Signed on behalf of the Board



**Paul Wilcox**  
Chair  
Irwell Valley Housing Association Ltd

## Regulatory Standards Compliance Overview

### Economic Standards

Standard	Compliant Yes/No	External Assurance gained from...
Governance and Financial Viability	✓	Independent Legal Advice; Board/Committee Oversight; Risk-based Internal Audit Programme; Independent Reviews; Regulatory Oversight; External Consultants; Task & Finish Groups External Audit; Customer Scrutiny
Value for Money	✓	
Rent	✓	

### Consumer Standards

Standard	Compliant Yes/No	External Assurance gained from ...
Tenant Involvement and Empowerment	✓	Independent Legal Advice; Board/Committee Oversight; Risk-based Internal Audit programme; Independent Reviews; Regulatory Oversight; External Consultants; External Audit; Customer Scrutiny
Home	✓	
Tenancy	✓	
Neighbourhood and Community	✓	

## Regulatory Standards Compliance in Detail

### The Economic Standards – Governance and Financial Viability

#### Outcome - Governance:

Registered providers shall ensure effective governance arrangements that deliver their aims, objectives and intended outcomes for tenants and potential tenants in an effective, transparent and accountable manner. Governance arrangements shall ensure registered providers adhere to all relevant law; comply with their governing documents and all regulatory requirements; are accountable to tenants, the regulator and relevant stakeholders; safeguard taxpayers' interests and the relevant stakeholders; have an effective risk management and internal controls assurance framework; and protect social housing assets.

#### We do this by:

We review our activities in relation to all relevant law (including core financial controls, data governance/information management and technology, health and safety compliance, governance) on an annual basis. Evidence highlighting how we comply with these laws is reviewed and discussed by the Leadership Team on an annual basis with an overview report being presented to the Audit & Risk Committee, thereby providing reasonable assurance that we are working within our legal requirements. These reports also highlight any anticipated future requirements and outline our planned actions to maintain compliance. The Association has prioritised resources and budgets over the last three years to prepare for and meet the expected requirements of the Fire Safety and Building Safety legislation. Majority of the high-risk building safety work has now been completed; any additional works is now included within the planned asset programme. Meeting and exceeding minimum fire safety standards to ensure the ongoing safety of customers is a priority for the Board

Legal advice is sought, where necessary, to ensure that Members can make fully informed decisions across all areas of the business. We also engage external advice when appropriate, including fire engineering, employment, and data protection specialists. We have increased our health and safety compliance and governance skills in-house in response to the increased building safety requirements.

A compliance review against our adopted Code of Governance and the associated Code of Conduct is undertaken annually by the Board.

All reports to Board, committees and the Leadership Team are required to outline any implications for corporate priorities, existing or emerging risks, customers, financial & value for money, regulatory & legal compliance, reputation & communications, equality & diversity, and environmental & sustainability as well as linking to the Associations' risk appetite.

To supplement our compliance, we commission independent governance reviews at least every three years - with the latest full review reported to Board in March 2022.

Our Financial Statements are published as part of our accountability to key stakeholders. During 2021/22, two of our Board members were also residents of the Association. We have a Residents' Scrutiny Panel (RSP) that scrutinises front line service areas of the organisation to provide challenge and identify recommendations for service improvements. The outcomes of all RSP reviews are reported to and discussed by the Board while the Audit & risk Committee track the progress of any recommendations quarterly via the Combined Assurance Framework (CAF).

IVH is led by a strong Board and Leadership Team which match the skills required to meet the needs of our current Corporate Plan. Our current regulatory grading is G1 and V2.

IVH has a Risk Management Framework approved annually, a live online Risk Register for managing risks, and the Risk & Assurance Manager supporting the Leadership Team. Heads of Service manage these documented risk assessments each quarter or as events affect them. Mitigation strategies have been identified and tested to support our Financial Plan. At the end of March 2022, the Board approved a set of Strategic Risks to be uploaded into a new live web-based Risk Register, developed in 2021/22 quarter four, to improve accessibility for risk owners and Members, develop more comprehensive records of risks, and improve reporting.

Assurance is gained annually on our risk register and our management and mitigation of risk, with the Risk Management Framework subject to regular audit by our internal auditors. This includes consideration of the IVH risk appetites and triggers, set by the Board, and the relationship between risks and the Corporate Priorities, all of which are components in the Risk Register. Our regulator publishes an annual Risk Sector Profile, and our auditors PwC and risk advisors Hargreaves Risk & Strategy, also share an annual profile of current and emerging housing sector risks from across their clients. IVH engages in national risk forums to consider the consistency and relevance of IVH risks with comparable organisations and report an analysis of these in the CAF to the Audit & Risk Committee. Additionally, IVH undertakes a gap analysis between its risks and the annual sector risk profile released annually by the regulator for assurance, which is reported to the Board.

Risk management is monitored quarterly through the CAF, which is reported to Audit & Risk Committee who oversee key assurance functions on behalf of the Board. This quarterly reporting ensures that Members have a clear line of sight over the management of controls to mitigate our identified key risks.

Our internal auditors provide an annual statement of their opinion of our internal controls, including our progress with the implementation of identified recommendations. The Board are provided with contextual information on the external political and financial operating environment to help inform Board priorities and their management of risk.

IVH has a strong track record of risk management and the protection of our assets. We maintain an Asset and Liability Register - reporting to Board on the key aspects of our register. The register currently has a “green” assurance rating.

#### Key documents/ evidence:

- Corporate Plan 5.3.1.
- Annual legislation compliance reports to Leadership Team and Audit & Risk Committee
- Code of Conduct for Members
- Board Member Services Agreement
- Code of Governance / Code of Conduct compliance assurance reports
- Terms of Reference for Board and Committees
- Intra Group Agreement
- Rules and/or articles for all organisations within the IVH Group
- Financial Regulations for IVH and all subsidiaries

- External Governance Reviews
- Latest regulatory viability and governance grading (currently G1 and V2)
- Annual Report 2021/22
- Regulatory Returns (Statistical Data Return; Financial Forecast Return; Financial Viability Return; Quarterly Surveys; Annual Fraud Report; CORs)
- Audit Management letter
- Risk Management Framework (including Risk Appetite)
- Annual Risk Management audit
- IV Subsidiaries Annual Oversight Review
- Strategic Risks and Sector Update Reports to Board
- Sector Risk Profile Report to Board
- Annual Scenario Planning and Stress Testing (as contained in the Long Term Financial Plan Approval Report)
- Annual Internal Audit Report 2021/22
- Annual Internal Audit Plan 2021/22
- Internal Audit Reports
- Annual Internal Controls Assurance Report
- Quarterly Combined Assurance Framework and Update Reports
- Asset and Liability Register and Update Reports
- Review of Compliance with Insurance Policies Report
- VFM Strategy
- Financial Statements
- Integrity Policy (Inc. Anti-Bribery)
- Anti-Fraud Policy (Inc. Anti-Money Laundering)
- Whistleblowing Policy
- Public Register 2021/22 and Public Register Report (including Annual Fraud Report and Annual Return to the RSH)
- Key Performance Indicators
- Board Effectiveness Report (including skills gap analysis)
- Annual Report by the Chair of Audit Committee
- Health and Safety Compliance Quarterly Update Reports to Board
- Health and Safety Governance annual Update Report to Board
- Health and Safety Committee Minutes
- Health and Safety Policy and supporting policies
- Pay Policy
- Shareholder Policy
- Recruitment and Selection Policy & Procedure

- Recruitment, Renewal and Selection of Board Members Policy
- Data Protection Policy and supporting policies
- Assets and Liability Register
- RSP Terms of Reference

**Sources of external assurance include:** Independent Legal Advice; Board/Committee Oversight; Internal Audit; Independent Reviews; Regulatory Oversight; External Consultants; External Audit; Customer Scrutiny

### **Outcome - Financial Viability:**

Registered providers shall manage their resources effectively to ensure their viability is maintained while ensuring that social housing assets are not put at undue risk.

### **We do this by:**

Financial viability is well-managed and monitored with external assurance being received from our treasury advisors (Centrus), our external auditors (BDO Ltd.) and through our internal audit programme (PwC). We have a good relationship with our lenders and closely monitor our loan covenants to ensure our continued compliance with these requirements, which is reported to Board. The Association has minimal risk exposure from diversification activities and our assets and liabilities are closely monitored. Our market rent investment portfolio is regularly appraised and monitored by the Board with regard to our Charitable Investment Policy with external assurance being provided by external valuers.

The financial capacity of the organisation is assessed at least annually and is linked to our risk appetite. Scenario planning and stress testing is a vital part of our financial planning process, ensuring that we can respond to multiple adverse events whilst protecting our social housing assets. Mitigation plans have also been developed with the Board and Leadership Team in the event of risk events happening. More frequent reviews of the financial capacity of the organisation, introduced during 2020/21 in response to multifactorial pressures emerging from the Covid-19 pandemic, continue to ensure that the Association could respond effectively to external pressures arising from the operating environment.

### **Key documents/ evidence:**

- Financial Plan and Budget Report to Board (Inc. Scenario Planning and Stress Testing)
- Financial Statements 2021/22
- External Audit Findings Report
- Treasury Strategy & Funding Plan
- Treasury Management Policy
- Quarterly Treasury Reports to Board
- External Review of Financial Forecasting Return by HRS
- Development Update Reports
- Capitalisation and Depreciation Policy
- Charitable Investment Policy
- Bad Debt Provision Policy
- Quarterly Financial and Operational Performance Overview Reports (including covenant compliance) to Board
- Monthly Financial and Operational Performance Overview Reports (including covenant compliance) to Leadership Team
- Review of Auditors Performance and Re-appointment
- Review of Subsidiary Annual Accounts
- Quarterly Subsidiary Financial Performance Overview
- Quarterly Procurement and Vfm Update Report
- VFM Strategy



## Specific Expectations of the Regulator

Registered providers shall adopt and comply with an appropriate code of governance. Governance arrangements should establish and maintain clear roles, responsibilities and accountabilities for the board, chair and chief executive and ensure appropriate probity arrangements are in place. Areas of non-compliance with their chosen code of governance should be explained. Registered providers should assess the effectiveness of their governance arrangements at least once a year

### How we comply:

For the year ending 31<sup>st</sup> March 2022, the Board adopted the NHF's Code of Governance 2020. The Board report on compliance against the Code annually using the NHF checklist as a guide and have reported full compliance with the Code. We also annually check our compliance against the latest NHF Code of Conduct.

IVH undertake regular full external governance reviews, with the last one carried out by Campbell Tickell and reported in March 2022, resulting in key governance activities being completed - providing robust assurance on our continuing governance arrangements.

The Board and all delegated committees have their own terms of reference with the responsibilities of each chair being outlined in specific job descriptions. Our Board members sign up to a service agreement which requires them to work in the interests of IVH and its customers. An approved Integrity (inc. Anti-Bribery) Policy is in place, requiring all new and existing Members and colleagues to declare any interest or disclose any connections on an annual basis. Disclosure of interests is a standing agenda item on every Board and Committee meeting to ensure that decisions are made solely in the interests of IVH. Probity arrangements have been supported with refresher training through e-learning for Integrity (inc. Anti-Bribery) and Anti-Fraud (inc. Anti-Money Laundering).

A Board effectiveness review is conducted on an annual basis. A governance review conducted by external consultants every 3 years.

Registered providers shall ensure that they manage their affairs with an appropriate degree of skill, independence, diligence, effectiveness, prudence and foresight.

### How we comply:

Board membership is reviewed to ensure that the knowledge and skills of our Board align with our Corporate Priorities and can respond to the challenges faced by IVH. An annual effectiveness review takes place alongside a skills audit to highlight any areas where skills/ knowledge and competencies need strengthening. Board recruitment is guided by the skills audit, with members ideally being recruited to strengthen skills in relation to key areas where additional skills are required. The Board can also co-opt specialists onto the Board to provide additional support and challenge when required. A Development Committee provides oversight and scrutiny of our development and growth programme, which is one of our key risk areas.

Minutes of meetings reflect Board challenge and debate. Each year, the Board hold a Strategy Day to discuss the direction and strategy of the organisation in light of the external environment and risks. External speakers are invited to the Strategy Days and Board meetings to help Members gain independent in-depth understanding of the current and future operating environment in relation to the decisions that they need to make, this included a presentation and discussion by the Chief Executive Officer of the NHF. Involved customers attended the Strategy Day and the focus was on the Social Housing White Paper and improving the customer experience.

Members' commitment and competency is monitored through an induction period and an appraisal process (latest appraisals undertaken in Q4 2021/22) in line with Code of Governance expectations. A training plan for the Board and separate personal development plans for individual Members are in place.

Registered providers shall communicate in a timely manner with the regulator on material issues that relate to non-compliance with the standards

#### How we comply:

IVH communicates appropriately with our Regulator. We submit returns to the Regulator within the required deadlines and maintain dialogue with the Regulator, as required. For example, during 2021/22, clarity was sought on the correct definition for disposals to ensure the quarterly notifications were accurate, and discussions have been held with the Regulator in relation to permission for the demolition of properties at Heanor Avenue, and whether these would be regarded as Disposals that needed to be reported in the quarterly returns.

Registered providers shall ensure that they have an appropriate, robust and prudent business planning, risk and control framework

#### How we comply:

Our 30-year financial plan is updated at least annually. Our financial planning process involves robust testing of the plan based on scenarios which have been identified by the Board and external consultants (including Centrus and the Bank of England). External assurance is received from several sources providing Board with evidence that financial planning decisions are being made based on reliable information and setting out the level of risk that the Association is willing to take. Controls are in place and are regularly monitored internally and externally to mitigate the worst effects of the risks facing IVH. External assurance through 2021/22 was received from:

- Treasury Advisors
- External Auditors
- Internal Auditors
- Risk and Strategy Consultants

Our CAF identifies lines of assurance for our Strategic and high scoring risks, and illustrates the efficacy of controls and actions, reviewed quarterly by the Audit & Risk Committee. Areas of increasing / decreasing assurance are identified, discussed, and planned for. Areas of decreasing assurance or other priority areas help direct our strategic and annual audit plans.

The framework shall ensure that there is access to sufficient liquidity at all times; financial forecasts are based on appropriate and reasonable assumptions; effective systems are in place to monitor and accurately report delivery of the registered provider's plans; financial and other implications of risks to the delivery of plans are considered; and that registered providers monitor, report on and comply with their funders' covenants.

#### How we comply:

Our Treasury Management Strategy is reviewed as and when required, following the implementation of the Funding Plan. Our Treasury Management Policy is reviewed annually, with input from our treasury advisors. Cashflow is monitored weekly allowing IVH to prepare for any major cash outflows and financing costs. Quarterly treasury reports are reported to Board through the Finance Update Report, including an update on key actions from the

Funding Plan. We understand when we need to access future funding to achieve our Corporate Plan, based on the cash flow forecasts. Proval is used to manage cashflow to support the Development Programme.

We take advice from both our treasury advisors and auditors and attend meetings and seminars with the Bank of England to ensure that our financial planning assumptions are based on meaningful and reliable information. Board Members approve these assumptions on an annual basis, as a minimum. Financial plans are regularly updated to reflect existing and emerging risks evident from the external operating environment. The Board receives treasury update reports on a quarterly basis. These summarise the treasury activity for the period and future forecast interest rates and treasury cashflows. This also informs the Board of any exceptions to the areas highlighted in our Treasury Management Policy in relation to the key areas of control.

Supplementing these reports is a budgetary monitoring and reporting framework, with regular budget performance reporting with budget holders and quarterly reporting to Board. We reforecast each month as required, so action can be taken quickly if an area is overspent or under-performing. Strong controls are in place regarding spend to budgets with external assurance received that these controls are working effectively through internal and external audit. In addition, Development Updates are included within the quarterly finance report presented to Board and development appraisals are scrutinised more closely by the Development Committee.

We have a risk appetite statement that is reviewed by Board against our current corporate and financial plans and the wider environment at least annually. The risk appetite has stated financial limits that can be measured and monitored to ensure that the Association works within its capacity. Our risk consultants reviewed our Financial Plan for 2021/22 to provide external assurance as a component of the annual review of risks, helping the Board understand its level of risk and consider their appetite for new opportunities.

Financial, regulatory, and risk implications are considered as part of all reports to Board, Committees, and the Leadership Team.

Covenant compliance is monitored and how we comply with loan covenants is reported to Board on a quarterly basis. External assurance is received from our external auditors on an annual basis.

The framework shall be approved by the registered provider's board and its effectiveness in achieving the required outcomes shall be reviewed at least once a year.

#### How we comply:

Our framework for treasury, risk, and control are reviewed annually by the Board, with external assurance provided on each. The Financial Plan and performance against it is reviewed by the Board at least annually. This is planned in advance, and the meetings at which these areas are scheduled to be discussed are embedded in a 'forward agenda'.

In addition to the above, registered providers shall assess, manage and where appropriate address risks to ensure the long-term viability of the registered provider, including ensuring that social housing assets are protected. Registered providers shall do so by maintaining a thorough, accurate and up to date record of their assets and liabilities and particularly those liabilities that may have recourse to social housing assets; carrying out detailed and robust stress testing against identified risks and combinations of risks across a range of scenarios and putting appropriate mitigation strategies in place as a result; before taking on new liabilities, ensuring that they understand and manage the likely impact on current and future business and regulatory compliance.

#### How we comply:

IVH has an Asset and Liability Register which is approved and is reviewed by Board annually. Ongoing monitoring of this register, and risks arising from any liabilities, is carried out quarterly (or more frequently if there is a significant change). Colleagues have been trained on the monitoring and upkeep of the register to ensure that this remains a 'live' document. The register was given a "green" assurance rating by our Internal Auditors during 2019/20 and due for re-audit in 2023/24.

The liabilities for the IVH Group have been mapped.

As part of our financial planning process, IVH conducts stress testing on a range of scenarios discussed and approved by Board, with external assurance based on a review of the sector risks identified by our internal auditors and risk consultants. The financial plan is reviewed against these results and amended if required to protect the organisation from the worst of these risks. The risk appetite is set in relation to stress testing results and metrics are used to measure our performance.

To support this framework, a detailed mitigation plan is developed by Leadership Team, which includes identified savings that could be implemented should one or more risk events affect the viability of the organisation.

Registered providers shall ensure that any arrangements they enter into do not inappropriately advance the interests of third parties, or are arrangements which the regulator could reasonably assume were for such purposes.

#### How we comply

IVH has an Integrity (inc. Anti-Bribery) Policy in place. Key elements, such as gifts and hospitality and declarations of interest are recorded and reported annually to our Audit & Risk Committee. Members must also declare any interests at every meeting. If an interest does exist, the Member will not be involved in any decision-making regarding that item and, if necessary, will not take part in any discussion of that item. Arrangements also exist for colleagues involved in similar decision-making processes. There is e-learning and refresher training for all colleagues.

Arrangements with third parties are governed by the Integrity (inc. Anti-Bribery) Policy, Financial Regulations, and Procurement Strategy and related procedures, including tendering procedures. All of these are monitored internally and receive regular external oversight by our Internal and External Auditors to make sure that this framework is being followed.

Registered providers shall communicate with the regulator in an accurate and timely manner. This includes returns to the regulator, including an annual report on any losses from fraudulent activity, in a form determined by the regulator.

#### How we comply:

The Association is fully aware of its responsibilities to the Regulator and all returns are submitted within the set deadlines.

Board is involved in the approval process for the Statistical Data Return (SDR), and the Executive Director of Finance, Governance and Investment oversees the timely submission of the required information. Board are made aware of our submissions and ongoing compliance and issues that may

arise. A report of any fraudulent activity, as informed to Audit Committee throughout the year, is confirmed annually to Audit & Risk Committee prior to submission to the Regulator (note: the Public Register & Fraud report is reported to Board as of May 2022)

During 2021/22, there were a small number of instances when the Association provided additional information to, or sought clarity from, the Regulator to ensure that they are fully aware of the activities of IVH. None of these resulted in any further regulatory engagement. The Association keeps a record of all these communications with the Regulator.

Registered providers shall assess their compliance with the Governance and Financial Viability Standard at least once a year. Registered providers' boards shall certify in their annual accounts their compliance with this Governance and Financial Viability Standard.

#### How we comply:

This self-assessment confirms our compliance with the Governance and Financial Viability Standard and across the other regulatory standards, providing an overview of the assurance that Board receives to enable them to confirm and monitor their compliance. Compliance with the Governance and Financial Viability Standard is confirmed in our annual accounts and signed off on behalf of the Board by the Chair of Board.

Registered providers which are parent companies shall, as appropriate, support or assist those of their subsidiaries that are registered providers with a view to ensuring compliance with regulatory requirements.

#### How we comply:

At this current time, the only subsidiary in the group is a development company, Irwell Valley Developments Limited (IVDL), which completes majority of IVH's development schemes. The Terms of Reference for the IVH Board places responsibility on the Board for "establishing the strategic direction for the Association and demonstrating effective management, control, accountability and good conduct of the IVH Group". Three Board Members from IVH are also Directors of the subsidiary company IVDL which helps to ensure that the activities are in line with and support the activities of the parent. The relationship between the IVH Board and group members forms part of external governance reviews. An Inter-Group Agreement is in place for the Group, as well as service level agreements between IVHA and IVDL. IVH completes any required returns to the relevant regulatory bodies on behalf of subsidiary organisations.

## The Economic Standards – Value for Money

#### Outcome:

Registered providers must clearly articulate their strategic objectives; have an approach agreed by their board to achieving VFM in meeting these objectives and demonstrate their delivery of value for money to stakeholders; articulate their strategy for delivering homes that meet a range of needs; and ensure that optimal benefit is derived from resources and assets and optimise economy, efficiency and effectiveness in the delivery of their strategic objectives.

#### We do this by:

The Value for Money Strategy is updated and approved by Board annually. This sets the VfM metrics and targets for the year ahead. During 2021/22 the Association achieved VfM savings of £796k, against a target of £560k and performed favourably against the VfM Performance Metrics apart from

reinvestment due to slippage in the development programme (this reduced the metric from 12.7% to 7.1%). IVH also monitor performance against internal VFM Metrics. The RSH and internal metrics are reported to Audit & Risk Committee quarterly, as well as demonstrated through our Annual Report and Annual Accounts.

#### Key documents/ evidence:

- VFM Strategy
- VFM and Procurement Quarterly Update Reports
- VFM Metrics 2021/22 (within the Financial Statements)
- Internal Audit Reports (various, as per Internal Audit Plan)
- Key Performance Indicators Year End 2021/22
- Asset Management Strategy
- Treasury Management Strategy
- Procurement Strategy
- Financial Regulations
- Long Term Financial Plan
- Growth and Development Strategy
- Charitable Investment Policy
- Charitable Investment Update Report

Sources of external assurance include: External Consultants; Internal Audit; Customer Scrutiny; Regulatory Oversight; Independent Reviews; External Audit; Board/Committee Oversight.

#### Specific Expectations of the Regulator

Registered providers must demonstrate a robust approach to achieving VFM – this must include a robust approach to decision making and a rigorous appraisal of potential options for improving performance; regular and appropriate consideration by the board of potential VFM gains; consideration of VFM across their whole business and where they invest in non-social housing activity, they should consider whether this generates returns commensurate to the risk involved and justification where this is not the case; and that they have appropriate targets in place for measuring performance in achieving VFM in delivering their strategic objectives, and that they regularly monitor and report their performance against these targets

#### How we comply:

The Board continue to appraise their ability to achieve growth ambitions and we are progressing an ambitious growth and development strategy supported by our Financial Plan. Majority of lean reviews have now taken place, however due to the ongoing changes within the sector and customer needs, IVH ensure we have flexibility to review structures where required to achieve efficiencies and good practice. We continue to review our customer facing services to ensure that customers are receiving the right support in the most effective way, which has resulted in the creation of a Tenancy Sustainment Team during 2021/22. Through 2022/23 we will continue to focus on customer sustainment to provide the right support and services to our customers to help them sustain successful tenancies with us.

The Board receives an annual report regarding our charitable investments which appraise the costs and benefits of our investment properties and other financial and social investments, and the Charitable Investment Policy is reviewed every two years. In addition to the above, Audit & Risk Committee regularly receive update reports against VfM targets. We have a VfM Strategy and set annual targets for improvements. Achievement against targets is monitored by the Audit & Risk Committee on a regular basis on behalf of the Board.

Registered providers must annually publish evidence in their accounts to enable stakeholders to understand the provider's performance against its own VFM targets and any metrics set out by the regulator, and how that performance compares to peers; and measurable plans to address any areas of underperformance, including clearly stating any areas where improvements would not be appropriate and the rationale for this

### How we comply

Our Performance Indicators are aligned to the VfM metrics and are published as our evidence in our Annual Accounts. Targets are set annually to improve performance and regular reports to Members provide opportunity for the scrutiny of our performance.

## The Economic Standards – Rent Standard\*

### Outcome:

Registered providers shall charge rents in accordance with the government's direction to the regulator in February 2019 and the Rent Standard Guidance effective from 1 April 2020.

### We do this by:

Our Rent Policy is updated annually and review by Board, in accordance with the Rent Standard Guidance and relevant legislation and guidance (such as Fair Rents).

### Key documents/ evidence:

- Rent Policy
- 'Your Rent' leaflet (website)
- Rent Performance

Sources of external assurance include: **Internal and External Audit; Independent Legal Advice; Regulatory Oversight; Board/Committee Oversight; Consultancy.**

### Specific Expectations of the Regulator

Registered providers shall ensure they meet the following requirements, which derive from the government's direction to the regulator of February 2019 and the 'key requirements' set out in the Rent Standard Guidance that accompanies this standard.



### How we comply

Data integrity exercises are carried out by our Internal Auditors. An Internal Audit of property data quality, and the process for property data creation and amendment through until submission of the annual Statistical Data Return was carried out during 2021/22. Following this audit, improved processes have been put in place for updating standing data. The continual improvement of data quality remains a corporate priority for the Association. Following the changes to the Rent Standard from April 2020, a Rent and Service Charge internal audit was carried out, this provided IVH with assurance they had adopted the new standard correctly.

Registered providers shall set rents for low cost rental accommodation with a view to achieving that Rents conform with the pattern produced by the rents formula set out in the Rent Guidance (formula rents) with a 5% upward tolerance on individual rents (10% for supported housing and sheltered housing) ('the limit of the rent flexibility level'), but subject to the maximum rent levels specified in that Guidance ('rent caps'); that weekly rent for accommodation increases each year by an amount which is no more than CPI + 1%; that weekly rent for accommodation which is above the limit of the rent flexibility level increases each year by an amount which is less than CPI + 1%, until it reaches the limit of the rent flexibility level; that rent caps increase annually by CPI +1.5%; and formula rents increases annually By CPI +1%.

### How we comply:

We have a Rent Policy which is reviewed annually to make sure that changes to rents reflect the current rent guidance. This is supported by detailed rent setting procedure documents. Compliance is reviewed during the rent setting process in line with the Policy and the relevant assurance checks by authorised individuals is completed.

Where accommodation is let on Affordable Rent terms, registered providers shall set rents with a view to rent for accommodation (inclusive of service charges) being set at a level which is no more than 80% of the estimated market rent for the accommodation (inclusive of service charges), based on a valuation in accordance with a method recognised by the Royal Institution of Chartered Surveyors; rent for accommodation increases each year by an amount which is no more than CPI + 1%; and rent for accommodation is re-set, based on a new valuation, each time the accommodation is let.

### How we comply

We currently have 192 general needs, and 24 supported housing homes on affordable rent tenancies. 102 new affordable property developments were delivered during 2021/22 across Water St, Lowther Rd, Canal Side, Fairfield, and Siddall St. Our Rent Policy outlines how we set our rents for these properties in line with the guidance as laid out in the Rent Standard. We have also reduced rents as appropriate for these homes to cap at the Local Housing Allowance.

Affordable rent terms can only be used in relation to accommodation provided pursuant to a housing supply delivery agreement entered into between a registered provider and the Homes and Communities Agency (HCA) or the Greater London Authority (GLA).

### How we comply:

IVH has prior agreements for our affordable rent homes.

The Rent Standard shall not apply to rental accommodation let by registered providers to a social housing tenant household during a financial year where the household income was £60,000 or more in the tax year which ended in the financial year preceding the financial year in which the Rent Standard will not apply. The requirement to charge higher rent to higher income social housing customers remains voluntary.



#### How we comply:

IVH modelled the potential benefits and impacts of implementing a higher rent to higher income customers and chose not to implement this policy.

Where the application of the Rent Standard would cause providers to be unable to meet other standards, particularly in respect of financial viability, including the risk that a reduction in overall rental income causes them to risk failing to meet existing commitments such as banking or lending covenants, the regulator may agree to waive specific requirements of the Rent Standard for a period of time.

#### How we comply:

IVH had previously been able to meet the challenges presented by the rent decrease and the resulting reduction in income through its financial planning processes. The Association keeps a watching brief on the operating environment and the potential implications of future rent reductions or caps as part of its financial and risk planning.

Registered providers shall provide clear information to tenants that explains how their rent and any service charge are set, and how they are changed, including reference to the CPI benchmark to which annual changes to rents should be linked (except where rents are controlled under different legislation)

#### How we comply:

Customers receive comprehensive information about their rent and service charges, and we inform customers of any changes in their rent as required. We regularly review our service charges with customers, as well as the information we send, to make sure that this is communicated in an effective way. We work with our local authority partners and our customers to make sure that those customers receiving benefits have a smooth transition onto a new rental charge to prevent the accrual of arrears. In addition, we have colleague resource to support and monitor customer transition to Universal Credit. Internal Audits of core financial controls for rent and service charges took place during 2020/21, income collection during 2021/22. Allocations and lettings internal audit is also scheduled for 2022/23.

## The Consumer Standards – Tenant Involvement and Empowerment Standard

### **Outcome – customer service, choice and complaints:**

Registered providers shall provide choices, information and communication that is appropriate to the diverse needs of their tenants in the delivery of all standards; and have an approach to complaints that is clear, simple and accessible that ensures that complaints are resolved promptly, politely and fairly.

### **We do this by:**

IVH were early adopters of the NHF Together with Tenants – a campaign to build a collaborative balanced relationship between RPs and customers. We previously developed a customer offer, in consultation with customers. In 2021/22, we continued to monitor our performance in relation to the offer with the Customer Offer Panel and we published our performance on our website.

In addition, we worked with customers to develop a new Customer Strategy and action plan, which sets out how we will improve the customer experience and ensure the customer voice is heard and acted on. The strategy also sets out our plans to improve the quality of customer data we hold and use it to improve our approach to tailoring services to meet customers' needs.

To support our colleagues, we have clear behaviours linked to performance review and continue to provide 'Mary Guber International' Customer Service training across all our teams to improve customer experience. . We continue to review our communications to make sure these are as accessible as possible, with internal resource dedicated to this through our Communications and Marketing Team.

Customers can contact us 24 hrs a day through our App, website, live chat, social media and by contacting our emergency out of hours service - for essential services such as ASB and repairs. Colleagues work flexibly where required and can offer customers appointments out of normal office hours to suit the customers' needs. We know that a high percentage of our customers are in employment and that this is an essential service for them – as is the increased functionality of the App – so customers can take control of managing their own accounts with us. Our contact centre helps improve customer experience by providing a single point of contact.

Our complaints policy and information about ways to make a complaint are set out on our website. Customers are offered a variety of ways to submit a complaint, including in person, by telephone, email and via the customer app. All complaints are acknowledged by a dedicated Customer Voice Officer who also keeps customers informed about the progress of their complaints. In addition, in April 2021 we introduced a satisfaction survey that is sent to customers when we have responded to their complaints. Levels of satisfaction are monitored and reported to Board quarterly, along with the performance data about the time it takes to respond to complaints. In addition, learnings from complaints are discussed at Leadership Team and are publicised on our website. We carry out annual self-assessments in relation to the Housing Ombudsman's Code for Complaint Handling. In 2021/22, we demonstrated that we complied with the Code. The self-assessment was reviewed by the Customer Offer Panel, before being reported to Board in November 2021 and then published on our website

### **Outcome – Involvement and empowerment:**

Registered providers shall ensure that tenants are given a wide range of opportunities to influence and be involved in the formulation of their landlord's housing related policies and strategic priorities; the making of decisions about how housing related services are delivered, including the setting of service

standards; the scrutiny of their landlord's performance and the making of recommendations to their landlord about how performance might be improved; the management of their homes, where applicable; management of repair and maintenance services, such as commissioning and undertaking a range of repair tasks, as agreed with landlords, and the sharing in savings made, and agreeing local offers for service delivery .

### We do this by:

We provide opportunities for customers to be involved, both at a strategic and operational level - with customers represented on the Board and by having an effective Residents Scrutiny Panel (RSP) in place. The RSP reports to the Board and is part of our approach to co-regulation. Our Customer Voice Strategy sets out how customers can influence and scrutinise our services in a way that suits them. We ask customers *if* they want to get involved, *how* they want to do this, what topics or issues interest them and *what help we can offer to enable them to get involved*. This involvement and engagement ranges from Board and Panel membership through to providing feedback on policies, feeding back through transactional and perception surveys and being involved in the co-design e.g. customer app and a new website we are developing. It also includes local engagement through neighbourhood and estate inspections, and involvement of customers in procuring services such as our out of hours calling handling service

The RSP offers a unique opportunity for customers to be involved in scrutinising our services. The RSP report their findings directly to our Board, while the Audit & Risk Committee oversees the completion of any improvement recommendations. The RSP carry out at least two scrutiny reviews a year – these areas are chosen by the RSP members on service areas that are important to them as consumers. In 2021/22, the Panel completed two reviews: a service review of the way we handle ASB; and a strategic review of our Customer Voice Strategy.

As mentioned above, customers directly influenced the Customer Offer, which is a set of service standards linked to the commitments in the NHF's Together with Tenants charter, covering repairs, complaints, customer experience and customer voice.

We have a Customer Offer Panel that reviews our performance in relation to the Customer Offer and members of the Panel meet Heads of Service to carry out 'deep dives' into performance.

Our Customer Voice Strategy outlines other opportunities to get involved, influence and scrutinise service delivery and these are publicised on our website and through customer communications. We carry out a rolling perception survey to assess our performance in relation to the customer offer and use the survey as an opportunity to invite customers to become involved.

During the last twelve months, we consulted with:

- 228 customers about the Private Renters policy
  - 5 customers gave feedback on Leasehold policy
  - 90 customers on Recruitment policy
  - 320 customers on website changes
  - 12 customers who tested our app prior to the launch
  - 488 customers about the repairs and adaptations policies
  - 273 customers living in high-rises took part in a survey about building and fire safety
  - 8 customers (RSP) about the Service Charges policy
- Customer voice commitment Action taken
- 12 customers provided input on the Customer Annual report, prior to publication

Feedback provided by customers has been used to shape these policies and the annual report.

In addition, involved customers provided feedback to the RSH about their proposed Tenant Satisfaction Measures (TSMs).

#### **Outcome – customer service, choice and complaints:**

Registered providers shall treat all tenants with fairness and respect; and demonstrate that they understand the different needs of their tenants, including in relation to the equality strands and tenants with additional support needs.

#### **We do this by:**

Providing excellent customer service is at the heart of what we do. 2021/22 saw the full implementation of a new Tenancy Sustainment Team, which offers bespoke support for customers who are experiencing financial difficulties and those who are struggling with mental health. During 2021/22, the team supported a total of **1,080 customers**.

- Tenancy sustainment support provided to 264 customers
- HACT (Energy campaign) Q3/Q4 = **359** customers helped, with a total of £40, 124 fuel vouchers issued
- **57** customers supported to claim pension credits
- **400** customers in receipt of UC were helped to update DWP about the change in their rent as a result of the annual rent increase
- Tackling Poverty = £54,461.53 of grants and income was generated for customers in financial difficulties

£47, 035.85 was secured to reduce customers' arrears

Our homes, services, support and employment are tailored around people's individual needs. We know people can face challenges in relating to accessing housing, support, and employment. We are committed to changing this and have a strategy and action plan to help us promote equality in all that we do. Our EDI Strategy and equality impact assessments help us to do to this and all colleagues have taken part in EDI training over the year to support this.

Our EDI priorities for customers are

- Ensuring our services are inclusive and accessible to everyone.
- Ensuring our homes enable everyone to live well.
- Providing more affordable housing of different tenures and types to meet the needs of the communities we serve.
- Improving equality of opportunity within the communities we serve.
- Being an ally and supporting marginalised groups in the communities we serve.

We have an action plan that supports the strategy with clear outcomes over three years that over three years linked to these priorities.

We have an Equality and Diversity Forum (which is supported by a Board Member, the CEO and residents) who oversee the delivery of our Equality and Diversity Strategy. Progress against the Strategy is also monitored by the Leadership Team, with progress and outcomes being reported to Board.

#### **Key documents/ evidence:**

- Residents' Scrutiny Panel Feedback Reports
- Residents' Scrutiny Panel Minutes
- Key Performance Indicators
- Customer Satisfaction Reports
- Mystery Shopping Reports
- Equality Impact Assessments
- Equality and Diversity Strategy and Action Plan
- Equality and Diversity Forum Minutes
- Customer Voice Strategy
- Customer Offer
- Access and Customer Care Policy
- Customer Annual Report
- IVH Website

Sources of external assurance include: **Internal Audit; Customer Scrutiny; Regulatory Oversight; Independent Reviews; External Consultants; Board/Committee Oversight.**

### Specific Expectations of the Regulator

#### Customer service, choice and complaints

Registered providers shall provide tenants with accessible, relevant and timely information about how tenants can access services; the standards of housing services their tenants can expect; how they are performing against those standards; the service choices available to tenants, including any additional costs that are relevant to specific choices; progress of any repairs work; how tenants can communicate with them and provide feedback; the responsibilities of the tenant and provider; and arrangements for tenant involvement and scrutiny.

#### How we comply

Customers receive a wide range of information at sign up and periodically throughout their tenancy - including reminders of how they can access specific services. Our App, text and email notifications, website and social media presence are key ways in which we provide customers with relevant information. We also offer a variety of ways for customers to get in touch with us, including the app, email, livechat and home visits. To ensure all our customers are informed we send out news updates every six months - containing useful information for all customers. Customers in rent arrears receive additional information twice a year. We use social media to regularly communicate information about local services and events with customers.

Customers can find out about the standards of service they should expect through our website. Our Customer Offer and our performance in relation to this are displayed on our website. Performance information is also provided through the Annual Report to Customers, which we develop in consultation with customers.

Appointments are generally scheduled to suit customers' needs and repairs appointments are confirmed by text to customers (landlines or mobile). We also offer Saturday appointments for gas safety inspections. We introduced software called IAppoint in 2021/22, which enables operatives and Property Inspectors to book any follow-on work required with customers, offering an appointment to suit the customers.

Our website details how customers can feedback to us and our App means that customers can take control of their accounts with us at a time and location more convenient to them. We are getting ready to launch a new website, and customers have worked with us on the design and content.

Landlord and tenant responsibilities are set out in customers' tenancy agreements and on our website and are included in our Customer Offer.

Our Customer Voice Strategy sets out how customers can get involved and scrutinise services at different levels of involvement. The menu of involvement opportunities is available on our website.

Providers shall offer a range of ways for tenants to express a complaint and set out clear service standards for responding to complaints, including complaints about performance against the standards, and details of what to do if they are unhappy with the outcome of a complaint. Providers shall inform tenants how they use complaints to improve their services. Registered providers shall publish information about complaints each year, including their number and nature, and the outcome of the complaints. Providers shall accept complaints made by advocates authorised to act on a tenant's/tenants' behalf

#### **How we comply:**

Our approach to dealing with complaints is set out in our Customer Complaints Policy. We review our performance against the Complaints Handling Code each year, with the Customer Offer Panel. Our self-assessment is considered by Board and published on our website each year.

Customers can make complaints to us in a variety of ways - including at any point of contact (such as the phone or via colleagues), through our app or our website. We also accept complaints from advocates. Once a complaint has been investigated, if the customer remains dissatisfied with the outcome, customers can take their complaint to the next relevant stage with the final stage being the Housing Ombudsman (HOS). All colleagues receive training on taking and logging complaints from customers. Information (including learning) on our performance in terms of receiving and responding to complaints is included in the Customer Annual Report. Learnings from complaints and action taken to improve services are also published on our website.

In 2021/22, we introduced a customer satisfaction survey for complainants. Satisfaction levels are reported to Board quarterly and we contact customers who express dissatisfaction with the way we handle complaints.

Two of our involved customers are members of the Housing Ombudsman's Residents' Panel.

#### **Involvement and Empowerment**

Registered providers shall support their tenants to develop and implement opportunities for involvement and empowerment, including by supporting their tenants to exercise their Right to Manage or otherwise exercise housing management functions, where appropriate; supporting the formation and activities of tenant panels or equivalent groups and responding in a constructive and timely manner to them; the provision of timely and relevant performance information to support effective scrutiny by tenants of their landlord's performance in a form which registered providers seek to agree with their tenants.

Such provision must include the publication of an annual report which should include information on repair and maintenance budgets; and providing support to tenants to build their capacity to be more effectively involved.

#### **How we comply:**

We support customers to get involved in housing management decisions and we consult customers on new service charges.

There are a variety of ways for customers to get involved in the activities and decision-making processes at IVH. IVH has a Resident Scrutiny Panel (RSP) in place – to scrutinise services and strategies that impact customers. We also have a Customer Offer Panel that scrutinises our performance in relation to the Customer Offer and complaints learnings. Other activities such as mystery customers also form part of our engagement strategy. Residents are also members of the Board. We have a network of more than 1,000 customers who have expressed an interest in being involved with IVH in different ways and in relation to different topics and services. We have recruited panel members from this network and have consulted them about policy changes.

We publish a Customer Annual Report with information and key documents being published on the website and via social media. We also publish complaint learnings and action taken ('you said, we did'), our Complaints Handling Code self-assessment and performance information relating to the customer offer, on our website. Customers have also been involved in shaping a range of policies, co-designing our customer app and new website and selecting contractors and suppliers that deliver customer facing services on our behalf.

Registered providers shall consult with tenants on the scope of local offers for service delivery. This shall include how performance will be monitored, reported to and scrutinised by tenants and arrangements for reviewing these on a periodic basis.

#### **How we comply:**

Our Customer Offer has been formulated based on customer feedback and the Customer Offer Panel was set up to monitor and challenge our performance relating to the offer. We publish quarterly customer offer performance information on our website. We have plans to develop further service standards with customers in the next twelve months.

Registered providers shall consult tenants at least once every three years on the best way of involving tenants in the governance and scrutiny of the organisation's housing management service.

#### **How we comply:**

A review took place through September to December 2019 with our new Customer Offer and Customer Voice Strategy being developed and re-launched in March 2020. Customers were also involved in developing a new Customer Strategy in March 2022, covering customer involvement and customer experience, which was subsequently approved by Board in June 2022.

#### **Understanding and responding to diverse needs:**

Registered providers shall demonstrate how they respond to tenants' needs in the way they provide services and communicate with tenants

#### **How we comply:**

We record information on our housing management database to help identify how to best communicate with customers. We also engage services that can help us communicate with those customers whose first language is not English or who may need other assistance or support. A number of our colleagues can communicate in other languages, and we will make use of their skills in communicating with customers. We pass relevant information onto our contractors, as appropriate so that services can be adapted. We also identify customer need through vulnerability flags enabling us to amend our service as appropriate to the individual customer.

Policies to help more vulnerable customers such as our Hoarding Policy, Domestic Abuse and Safeguarding Policy are in place. Colleagues receive training on these policies and in line with the requirements of their roles. Customers were involved in reviewing our Domestic Abuse policy in 2021.

Colleagues will make appointments outside of normal working hours to respond to customers' needs. Our Communications and Marketing Team have reviewed customer communications following a re-branding exercise to make sure that these are attractive and accessible to our customers. We also use videos as an additional communication tool for key corporate messages.

We are in the process of piloting a new operating model, at the heart of which is improved systems and processes for capturing and storing customer data in a way that will help us to tailor services to meet the diverse needs of our customers in a more targeted way. We also implemented a new way of working that reduces back office administrative functions and re-invested these resources in customer facing roles, so that we can get to know our customers and their needs. Internal auditors completed a review of customer voice and complaints, giving assurance about our approach.



## The Consumer Standards – Home Standard

### **Outcome – Quality of Accommodation:**

Registered providers shall ensure that tenant' homes meet the standard set out in section five of the Government's Decent Homes Standard; meet the standards of design and quality that applied when the home was built, and were required as a condition of publicly funded financial assistance if these standards are higher than the Decent Homes Standard; and in agreeing a local offer, ensure that it is set at a level not less than these Standards and have regard to section six of the Government's Decent Homes Guidance.

### **We do this by:**

We continue to report zero non-decent homes. We hold full stock condition data on our homes and communal areas to understand and plan for our assets and ensure that improvement plans continue to be based on meaningful data. External assurance that the stock condition work has followed robust methodology is obtained and a 10% sample stock condition survey has been commissioned in 2022, to supplement and support our internal data based on a stratified sample, alongside an overall stock condition validation exercise. This will assist us further to refine our long-term investment approach in line with our Asset Management Strategy 2022-2025.

Standards of design and quality are maintained as required. Our surveyors are qualified to the relevant level and fully trained to project manage improvement programmes, including oversee relevant health and safety requirements both during and post the programme.

### **Outcome – Repairs and Maintenance:**

Registered providers shall provide a cost-effective repairs and maintenance service to homes and communal areas that responds to the needs of, and offers choices to, tenants, and has the objective of completing repairs and improvements right first time; Meet all applicable statutory requirements that provide for the health and safety of the occupants in their homes

### **We do this by:**

We have a dedicated Homes Team who provide the majority of the responsive, day to day repairs. We also have a separate Empty Homes team who concentrate on undertaking repairs to voids.

We know that our customers want us to complete repairs right first time and we monitor this area of service through our performance measures which are reported to Board on a quarterly basis. 85% of all repairs were "First Time Fix" as at the end of March 2022, which was a significant improvement on the previous financial year. During the year, we introduced I Appoint, which enables operatives to make follow on appointments with customers if they cannot complete a job in one visit. In addition, Property Inspectors use IAppoint and this means that they can book in repairs and offer an appointment at the time of their inspection.

The Board and the Executive Team take IVH's landlord responsibilities very seriously and we have a dedicated Health and Safety, Compliance and Fire Safety teams. These teams, alongside the Gas Team, are focused on ensuring that we meet all our statutory requirements for health and safety - including

gas, fire, water hygiene, asbestos legionella, lift and electrical safety. Each of these areas are identified on our risk map with key controls being identified for each area and external assurance providers in place.

Compliance is monitored by our Health and Safety Committee and our Board. The Board receive health and safety compliance performance information on a quarterly basis. The Board have prioritised resource and budgets for health and safety and have increased these over the last few years to respond to our commitment to ensure that our homes are safe for our customers. The Audit & Risk Committee gain assurance through our Internal Audit Plan which includes regular reviews of health and safety compliance areas, focusing on at least one key area per year.

To provide assurance that we are meeting relevant statutory requirements for health and safety, we engage external organisations qualified to oversee and confirm the reliability of our compliance work through a mixture of desktop and on-site auditing. We employ a full time Health and Safety Manager and Health and Safety Advisor as well as a dedicated Compliance and Fire Safety team to provide expert advice across the organisation. In addition to internal compliance checks undertaken by an independent team, the Health and Safety Manager oversees compliance audits across the organisation to support our health and safety compliance and promote a positive health and safety culture. We have a dedicated compliance management system which is where documentation is held for all compliance activity. The system records and automates anniversary dates, collates records and activities to store an audit trail of actions.

In addition to the Board and Health and Safety Committee, IVH have an established Fire Response Group who lead in identifying actions following the Hackitt review of building safety in response to the Grenfell Tower fire. All four high-rise tower blocks have now been fitted with sprinklers, new fire doors have been installed and compartmentation work carried out internally and we also completed work on another building over 18m including replacement of cladding and installation of new balconies. We are continuing to deliver fire remedial works on risk-based approach, prioritising new fire doors and compartmentation to limit the spread of fire. Additionally, we now have an accredited member of staff who can self-certify their work on fire doors to BM Trada Q Mark Standard.

IVH has an ongoing programme of fire risk assessments and monitors the implementation of any actions on a risk basis. In addition, we continue to work with specialist fire engineering companies to identify any further remediation works required on all buildings over 18m. This has also been extended to those below 18m. Work is ongoing to respond to the identified remedial works across our portfolio, with regular updates being sent to relevant customers and close work with key external stakeholders.

Customers continue to receive safety information to reduce the risk of fires and we work closely with the Greater Manchester Fire Service and other partners and Registered Providers to discuss emerging risks and the appropriate response to these.

#### Key documents/ evidence:

- Key Performance Indicators
- Asset Management Strategy
- Environmental Strategy
- Repairs Policy
- Quarterly Health and Safety Compliance Update Reports to Board
- Health and Safety Policy and relevant supporting policies
- Fire Safety Update Reports

- Health and Safety Meeting Minutes
- Fire Response Group Minutes
- Fire Engineering Reports
- Internal Audit Reports
- Combined Assurance Framework Update Reports
- Chief Executive's Update Reports

**Sources of external assurance include:** Internal Audit; Customer Scrutiny; Regulatory Oversight; Independent Reviews; Independent legal Advice; External Consultants; Board/Committee Oversight.

### **Specific Expectations of the Regulator**

#### **Quality of accommodation**

Registered providers may agree with the regulator a period of non-compliance with the Decent Homes Standard, where this is reasonable. Providers shall ensure their tenants are aware of the reasons for any period of non-compliance, their plan to achieve compliance and then report on progress delivering this plan.

#### **How we comply:**

No homes were reported as being non-compliant with the Decent Homes Standard based on Property Inspectors and Surveyors who access our properties on a regular basis.

#### **Repairs and maintenance**

Registered providers shall ensure a prudent, planned approach to repairs and maintenance of homes and communal areas. This should demonstrate an appropriate balance of planned and responsive repairs, and value for money. The approach should include responsive and cyclical repairs, planned and capital work, work on empty properties, and adaptations.

#### **How we comply:**

We have a 30-year Asset Management Plan covering all capital works and an element of reactive works to empty properties and adaptations. We have a value for money metric that monitors the balance between responsive and planned works and this monitored quarterly by Audit & Risk Committee and reported to Board and within the statutory accounts.

We have instructed a 10% sample validation of our existing stock condition data, to be carried out by Savills due for completion in August 2022, with results submitted for review in September. This will assist us further to refine our long-term investment approach in line with our Asset Management Strategy 2022-2025. We procure through frameworks (where this provides the best value) and run several programmes concurrently to ensure savings.

We have an empty homes standard that aims to provide a quality home to incoming customers. If component replacements are required on empty homes, we carry these out before the property is relet.

Registered providers shall co-operate with relevant organisations to provide an adaptations service that meets tenants' needs.

**How we comply:**

We carry out minor adaptations of £1,000 or less for our customers. For adaptations above this amount, we have agreed contracts with all our local authority partners to contribute 40% to the cost of any adaptations they carry out on behalf of our customers. We aim to respond to requests from Councils within 5 working days.

## The Consumer Standards – Tenancy Standard

### **Outcome – Allocations and mutual exchange:**

Registered providers shall let their homes in a fair, transparent and efficient way. They shall take into account the housing needs and aspirations of tenants and potential tenants. They shall demonstrate how their lettings make the best use of available housing; are compatible with the purpose of the housing; and contribute to local authorities' strategic housing function and sustainable communities.

### **We do this by:**

In 2021 we revised our Lettings Policy (now called Home Move (Allocations) Policy), in consultation with customers, to increase the percentage of allocations we make through GM local authorities' Choice Based Lettings schemes. We now offer 80% nominations (previously 50%), with the remaining 20% of our empty homes being allocated to current IVH customers who have a priority need.

We attend and contribute to local strategic housing partnership meetings and rehousing panels. We work with GMHP to help reduce homelessness within the GM area, through our involvement in the Housing First Initiative, as well as through increased nomination rights

There should be a clear application, decision-making and appeals processes

### **We do this by:**

We let 80% of our homes through Choice Based Lettings Schemes across GM, 100% in Bolton. With these allocations, customers apply through the schemes and are subject to the Choice Based Lettings Policy relevant to that LA. The decision making and appeals process is handled by the local authority, and we work in partnership to resolve any issues. We also let our homes to IVH customers who require urgent rehousing, e.g. due to domestic abuse, overcrowding or under occupation. In the rare event that we have low demand for specific homes, we advertise these properties through social media and on our website. Customers are encouraged to discuss any decisions with our new Home Move Team who will aim to resolve any issues. Our complaints/issue process is available for our applicants and existing customers if we are not able to resolve an issue at this stage.

Registered providers shall enable their tenants to gain access to opportunities to exchange their tenancy with that of another tenant, by way of internet-based mutual exchange services.

### **We do this by:**

We are members of House Exchange the UK's leading not for profit database of people looking to mutually exchange their home. This is signposted to customers at the point of contact, through our website and through our dedicated transfer leaflet.

### **Tenure**

Registered providers shall offer tenancies or terms of occupation which are compatible with the purpose of the accommodation, the needs of individual households, the sustainability of the community, and the efficient use of their housing stock

### **We do this by:**

Our Tenancy Policy outlines the various tenancies we use and why these are applicable for the type of housing. We also use licences where appropriate in some housing depending on the nature of the service and the support being provided. Resident and landlord responsibilities are clearly set out in our tenancy agreement/licence document. To support neighbourhood sustainability and protect our existing customers, we use starter tenancies where applicable. These allow us to closely monitor and support our customers through the first year of their tenancy, with input from our Tenancy Sustainment Team if appropriate, and, if all other approaches have failed, end the tenancy in the most efficient way if the customer is not ready to sustain a tenancy with us.

Registered providers shall meet all applicable statutory and legal requirements in relation to the form and use of tenancy agreements or terms of occupation.

### **We do this by:**

Independent legal advice is regularly sought when considering amendments to our tenancy agreement.

### **Key documents/ evidence:**

- Tenancy Policy
- Home move (allocations) Policy
- Homelessness Strategy
- Tenancy Agreements
- Complaints Policy
- Key Performance Indicators
- Internal Audit Reports

**Sources of external assurance include:** Internal Audit; Customer Scrutiny; Regulatory Oversight; Independent Legal Advice; Board/Committee Oversight.

### **Specific Expectations of the Regulator**

#### **Allocations and mutual exchange**

Registered providers shall develop and deliver services to address under-occupation and overcrowding in their homes, within the resources available to them. These services should be focused on the needs of their tenants and will offer choices to them.

### **How we comply:**

Our lettings policy was revised with customers, in 2021 and gives priority to customers whose homes are overcrowded or if they are under-occupying. 20% of our lets now go to current customers (previously 10%). We also signpost our customers to other providers of housing where we are unable to help and offer advice and support regarding mutual exchanges. As members of House Exchange, our customers can also find suitable tenants to exchange homes with outside of IVH.

Registered providers' published policies shall include how they have made use of common housing registers, common allocations policies and local letting policies. Registered providers shall clearly set out, and be able to give reasons for, the criteria they use for excluding actual and potential tenants from consideration for allocations, mobility or mutual exchange schemes.

#### How we comply:

Our Home Move (Allocations) Policy clearly sets out how customers can apply for a home with us, and how we allocate our homes. We assist existing customers find out how they can move to a more suitable home. Relevant information can also be found on our website, including the criteria that customers would need to meet where this is applicable.

Registered providers shall develop and deliver allocations processes in a way which supports their effective use by the full range of actual and potential tenants, including those with support needs, those who do not speak English as a first language and others who have difficulties with written English

#### How we comply:

We have an Equality, Diversity and Inclusion Strategy and Action Plan, which outlines how we aim to ensure equality of opportunity across our services and throughout our organisation. The way we let our homes supports the three key EDI priorities in our strategy and our action plan supports the delivery of this:

- Ensuring our services are inclusive and accessible to everyone.
- Ensuring our homes enable everyone to live well.
- Providing more affordable housing of different tenures and types to meet the needs of the communities we serve

We set people up to ensure they can live well in their home by matching customers to properties that are right for them and supporting them through to process based on their individual needs. For example, we use translation and interpretation services during the allocation stage and provide an aids and adaptations service to ensure people have the equipment they need to live well.

Registered providers shall record all lettings and sales as required by the Continuous Recordings of Lettings (CORE) system

#### How we comply:

IVH provides and collects information on all our lets and participates in CORE. All lets are inputted directly into the CORE website as required.

Registered providers shall provide tenants wishing to move with access to clear and relevant advice about their housing options.

#### How we comply:

Our new Home Move (Allocations) Policy outlines how we deal with customer's requests to transfer, we also provide customers with information at point of contact, and we have a dedicated customer leaflet (website) for customers wishing to transfer or exchange. Customers are signposted to other agencies who can also offer suitable accommodation. In those cases where customers are vulnerable and need further support on their housing options, we can refer them to our Tenancy Sustainment Team to provide a higher level of support and guidance to ensure the customers access and understand their housing options and also assist them to act on them.

Registered providers shall subscribe to an internet based mutual exchange service (or pay the subscriptions of individual tenants who wish to exchange), allowing a tenant to register an interest in arranging a mutual exchange through the mutual exchange service without payment of a fee; the tenant to enter

their current property details and the tenant's requirements for the mutual exchange property they hope to obtain; and the tenant to be provided with the property details of those properties where a match occurs.

**How we comply:**

IVH subscribes to House Exchange - the UK's leading not for profit database of people looking to mutually exchange their home. We will help customers to access the relevant information. House Exchange allows customers to gain access to the relevant homes for them. Customers can access this information direct through House Exchange.

Registered providers shall ensure the provider of the internet based mutual exchange service to which they subscribe is a signatory to an agreement, such as HomeSwap Direct, under which tenants can access matches across all (or the greatest practicable number of) internet based mutual exchange services.

**How we comply:**

IVH subscribes to House Exchange the UK's leading not-for-profit internet based mutual exchange scheme.

Registered providers shall take reasonable steps to publicise the availability of any mutual exchange service(s) to which it subscribes to its tenants.

**How we comply:**

This information is set out in our Home Move (Allocations) Policy, our Transfer leaflet and through our website.

Registered providers shall provide reasonable support in using the service to tenants who do not have access to the internet.

**How we comply:**

We can also offer support to our customers to access this information through our Home Move team, Community Co-ordinators and Tenancy Sustainment Team.

**Tenure**

Registered providers shall publish clear and accessible policies which outline their approach to tenancy management, including interventions to sustain tenancies and prevent unnecessary evictions, and tackling tenancy fraud, and set out the type of tenancies they will grant; where they grant tenancies for a fixed term, the length of those terms; the circumstances in which they will grant tenancies of a particular type; any exceptional circumstances in which they will grant fixed term tenancies for a term of less than five years in general needs housing following any probationary period; the circumstances in which they may or may not grant another tenancy on the expiry of the fixed term, in the same property or in a different property; the way in which a tenant or prospective tenant may appeal against or complain about the length of fixed term tenancy offered and the type of tenancy offered, and against a decision not to grant another tenancy on the expiry of the fixed term; their policy on taking into account the needs of those households who are



vulnerable by reason of age, disability or illness, and households with children, including through the provision of tenancies which provide a reasonable degree of stability; the advice and assistance they will give to tenants on finding alternative accommodation in the event that they decide not to grant another tenancy; and their policy on granting discretionary succession rights, taking account of the needs of vulnerable household members.

#### How we comply:

Our Tenancy Policy clearly sets out the type of tenancies that we will grant; our use of starter tenancies; how we support customers to sustain their tenancy and how we will prevent and tackle tenancy fraud. The Policy states that a customer can appeal any decision with a manager in the Communities Team and, if they are unhappy with the outcome of their complaint, they can follow our complaint's process.

Successions are granted in accordance with customer's specific tenancy agreement.

Fixed Term Tenancies are not used by IVH.

Registered providers must grant general needs tenants a periodic secure or assured (excluding periodic assured shorthold) tenancy, or a tenancy for a minimum fixed term of five years, or exceptionally, a tenancy for a minimum fixed term of no less than two years, in addition to any probationary tenancy period

#### How we comply:

This is reflected in our Tenancy Policy.

Where registered providers use probationary tenancies, these shall be for a maximum of 12 months, or a maximum of 18 months where reasons for extending the probationary period have been given and where the tenant has the opportunity to request a review.

#### How we comply:

Starter tenancies are issued in accordance with our Tenancy Policy and are for a maximum of 12 months with the ability to extend the period if required. Customers can request a review of any decision to end or extend a starter tenancy.

Where registered providers choose to let homes on fixed term tenancies (including under Affordable Rent terms), they shall offer reasonable advice and assistance to those tenants where that tenancy ends

#### How we comply:

IVH does not currently use Fixed Term Tenancies.

Registered providers shall make sure that the home continues to be occupied by the tenant they let the home to in accordance with the requirements of the relevant tenancy agreement, for the duration of the tenancy, allowing for regulatory requirements about participation in mutual exchange schemes.

#### How we comply:

Our tenancy agreement gives customers the right to the quiet enjoyment of their home. The agreement is clear in terms of the rights and responsibilities of both landlord and the tenant. Our Tenancy Policy outlines our work to ensure that our homes are not abused by customers through misuse or subletting. Colleagues within our Communities Team carry out tenancy reviews to ensure that these remain occupied by the customer who signed the tenancy agreement. We subscribe to the National Anti-Fraud Network (NAFN) Data Intelligence services which is available to help support our colleagues to investigate tenancy fraud. Customers can report any concerns to us direct or they can complete a tenancy fraud report form on our website (anonymously if preferred).

Registered providers shall develop and provide services that will support tenants to maintain their tenancy and prevent unnecessary evictions.

#### How we comply:

We view eviction as a last resort and our Communities, Rents and Tenancy Sustainment teams are committed to helping customers to sustain successful tenancies. We use Starter Tenancies to protect our customers and our assets from anti-social customers and to provide early intervention on tenancy management. We review our tenancies with our customers, to allow our colleagues to provide tenancy support in the most effective way, focusing our resources on the most vulnerable of our customers. Our Tenancy Sustainment Team and our Customer Experience Rent Team offers support to our customers to reduce debt, maximise their income and complete Universal Credit applications. We have introduced a Tenancy Sustainment team to support our commitment to help our customers sustain successful tenancies, this team support customers to tackle sustainment issues, such as property condition, rent, anti-social behaviour, social issues, which left unsupported, can put our customers tenancies at risk.

Registered providers shall grant those who were social housing tenants on the day on which section 154 of the Localism Act 2011 comes into force, and have remained social housing tenants since that date, a tenancy with no less security where they choose to move to another social rented home, whether with the same or another landlord. (This requirement does not apply where tenants choose to move to accommodation let on Affordable Rent terms).

#### How we comply:

Our Tenancy Policy reflects this requirement and independent legal advice has been sought in relation to this policy to gain assurance over its provisions.

Registered providers shall grant tenants who have been moved into alternative accommodation during any redevelopment or other works a tenancy with no less security of tenure on their return to settled accommodation.

#### How we comply:

This requirement is stated within our Tenancy Policy.

## The Consumer Standards – Neighbourhood and Community

### **Outcome – Neighbourhood management:**

Registered providers shall keep the neighbourhood and communal areas associated with the homes that they own clean and safe. They shall work in partnership with their tenants and other providers and public bodies where it is effective to do so.

#### **We do this by:**

We aim to create neighbourhoods that are safe for customers. Community Co-ordinators conduct regular estate inspections to identify issues and hazards. They are supported by an Estates Team, that carries out a wide variety of neighbourhood tasks to make sure our neighbourhoods remain safe and clean, including the removal of fly tipping. We use colleague volunteer days to carry out neighbourhood clean-up days and to carry out small neighbourhood improvements e.g. additional gardening work at our 50 plus schemes.

We work with our local authority partners, Police, local fire authorities, other providers and agencies to address concerns across our neighbourhoods. We continue to be active participants of the GM Providers Group to help inform strategy across Greater Manchester to guide and influence the priorities of the Mayor of Greater Manchester and the devolution agenda to the benefit of all our customers and the neighbourhoods in which we work. We have a dedicated Anti-Social Behaviour Team, that works closely with customers, Tenancy Sustainment and Community Co-ordinators, as well as partners across GM, to address complex and serious ASB.

### **Outcome – Local area co-operation:**

Registered providers shall co-operate with relevant partners to help promote social, environmental and economic wellbeing in the areas where they own properties.

#### **We do this by:**

Playing to our strengths and working with others helps us to do more. We work with a wide range of partners across the public, voluntary and charitable sectors. Over the year we worked with 42 voluntary and community groups and our strong relationships with statutory, community and voluntary sector partners have enabled us to respond collaboratively to emerging issues with focused neighbourhood interventions to tackle specific challenges.

We're underway with a multimillion-pound estate regeneration programme in Trafford. Working with a wide range of partners including residents, public sector agencies, and community and voluntary partners, we are transforming the estate by building more affordable housing, improving existing homes and enhancing the environment and public realm. The first phase is nearly complete and includes 79 new affordable new homes and over £7.2 million of improvements to existing homes. Plus, new roads, parking, walkways, cycle routes and environmental enhancements. This is supported with significant investment in community projects and initiatives to enable residents to live well in their community and get on in life.

A big focus for the year has been supporting customers with the rising cost of living and accessing good employment post pandemic. We continue to fund Citizens Advice services in Trafford and Tameside. Every month these services respectively support around 100 people and unlock an additional £10,000 of financial support for them. We act as civic commissioners on both the Tameside and Trafford Poverty Truth Commissions. Linking people in positions of

influence within the area, with those who have lived experience of poverty. Together our work is shaping the new poverty strategies for each local authority as well as new services to respond to the emerging themes.

Over the last year we have developed new partnerships with the DWP, Tameside in Work, Sale Sharks, Salford Employment Partnerships, and Bury Growing Together, and our continued investment in the GM wide Athena partnership has seen us contribute to the successful Motiv8 programme. This year 479 IVH customers participated in the programme. Around half had been unemployed for more than 5 years and 80% came from homes where no one was employed. In total our employment and skills partnerships supported 221 into secure employment last year and a further 724 people were helped with employment and skills support.

Supporting wellbeing and promoting social inclusion has also remained a focus. Several new partnerships are delivering services for older and isolated people within the communities we serve, and we have supported several youth initiatives. One example is our work with three other housing providers providing youth development activities in Salford, Trafford and Tameside. Through the partnership 2,250 people have been supported to improve their life chances, feel empowered, connected, and enabled to achieve their potential. As well as working with the young people, the partnership has supported family-wide initiatives to support lasting change.

We have a £2m charitable investment fund, the Irwell Valley Foundation, which is overseen by a resident led panel. Every year we invest the dividends from the investment fund to help people with their personal development and wellbeing, as well as projects and initiatives that benefit the wider community. From hosting outreach services at our community resource centre, to serving up free kid's meals in the school holidays at our community café this support makes a real difference. Over the year, the Irwell Valley Foundation invested £17,578 supporting 23 individual customers and £47,730 supporting community projects and groups. By working with partners this investment has attracted over £700,000 in match funding to maximise the impact of the projects and initiatives we have supported.

We also work with our suppliers and contractors to maximise our impact. Social value offers are embedded in our procurement process and are aligned to the community impact strategy. Suppliers and contractors pick from a menu of offers linked to our action plan with the value of the offer determined by the contract value. Offers utilised during the year range from cash donations to our customer hardship fund, to employing full time apprentices. Suppliers have also contributed gifts in kind such as materials and labour to make over a new community centre in Bolton

In addition, colleagues are given two days every year to use their skills to support charities and organisations who we work with within the communities we serve, helping them to play an active role in making a difference. Last year we facilitated 4762 hours of volunteering in the local communities, including 619 hours that were delivered directly by our colleagues - bringing people together, creating a sense of purpose, and developing our partnerships.

#### **Outcome - Anti-Social Behaviour**

Registered providers shall work in partnership with other agencies to prevent and tackle anti-social behaviour in the neighbourhoods where they own homes.

#### **We do this by:**

Anti-social Behaviour is tackled by our Community Co-ordinators and any high-risk cases are tackled by our specialist Anti-social Behaviour Team which comprises 2 Community Safety Officers, with input from our Tenancy Sustainment Team. Our Community Safety Officers also provide guidance to our Community Co-ordinators to ensure they are tackling and preventing ASB in our Neighbourhoods in accordance with legislation and internal Policies, but also working in partnership with the relevant agencies to achieve the best outcomes for our customers.

Customers can contact us through a variety of methods, including by phone, email or via our customer app, 24 hours a day to discuss or report ASB issues. We work in partnership with other agencies and have numerous examples of this leading to positive outcomes, such as injunctions and issuing fines for fly-tipping. We attend and are active in relevant Crime and Disorder Reduction Partnerships and advocate mediation between neighbours where this is appropriate.

Where possible, our new customers sign a starter tenancy, which we use to protect our existing customers and to closely monitor the conduct of new ones. We provide support to new customers to help them to understand their rights and responsibilities and these are clearly discussed with customers at sign up and through their first year in their home. We also rate our tenancies on a traffic light system to identify those customers most in need of support - so we can work with them to maintaining a successful tenancy. To further support our customers, and to work with our partner agencies, we also have a Safeguarding and a Hoarding Policy. Relevant colleagues have been trained on these procedures to enable them to highlight and respond to any concerns. Colleagues have also been trained on dealing with hate crime, safeguarding and domestic abuse.

The Resident Scrutiny Panel completed a review of ASB in 2021, which commended the work of the ASB team and requested additional information for customers in different formats, about reporting ASB and how we deal with it. These recommendations are being implemented and new information added to our new website.

#### Key documents/ evidence:

- Neighbourhood Management Policy
- Quarterly Financial and Performance Report
- Chief Executive's Update Report
- Safeguarding Policy
- Domestic Abuse Policy
- Hoarding Policy
- IV Foundation Annual Report
- ASB Policy & Procedure

Sources of external assurance include: **Customer Scrutiny; Regulatory Oversight; Independent Legal Advice; Board/Committee Oversight.**

#### Specific Expectations of the Regulator

#### Neighbourhood management

Registered providers shall consult with tenants in developing a published policy for maintaining and improving the neighbourhoods associated with their homes. This applies where the registered provider has a responsibility (either exclusively or in part) for the condition of that neighbourhood. The policy shall include any communal areas associated with the registered provider's homes.

#### **How we comply:**

We have a Neighbourhood Management Policy which sets out how we will maintain neighbourhoods and communal areas. All Community Co-ordinators have received comprehensive training to help them to manage our neighbourhoods effectively. Customers are invited to join us on neighbourhood or estate inspections to help identify and discuss any issues. They can also feedback concerns or comments direct to their Tenancy Services Team, through either our website or social media. A key priority within our Corporate Plan is focused on tailoring our services to customers.

#### **Local area co-operation**

Registered providers, having taken account of their presence and impact within the areas where they own properties, shall identify and publish the roles they are able to play within the areas where they have properties; and co-operate with local partnership arrangements and strategic housing functions of local authorities where they are able to assist them in achieving their objectives.

#### **How we comply:**

We co-operate with our local authority partners and other stakeholders as necessary. We continue to be active in Greater Manchester partnerships and initiatives. In 2022/23 we will be launching a new Communities Strategy, which will set out how we will build on our work as an anchor organisation in our 6 priority areas across GM. Community Plans will be developed to address local priorities and will involve partner organisations.

#### **Anti-Social Behaviour**

Registered providers shall publish a policy on how they work with relevant partners to prevent and tackle anti-social behaviour (ASB) in areas where they own properties.

#### **How we comply:**

Our ASB Policy outlines how we work with relevant partners to prevent and tackle anti-social behaviour. We have a customer leaflet available to provide essential information. The policy was reviewed and revised in consultation with the RSP in 2021.

In their work to prevent and address ASB, registered providers shall demonstrate that tenants are made aware of their responsibilities and rights in relation to ASB; strong leadership, commitment and accountability on preventing and tackling ASB that reflects a shared understanding of responsibilities with other local agencies; a strong focus exists on preventative measures tailored towards the needs of tenants and their families; prompt, appropriate and decisive action is taken to deal with ASB before it escalates, which focuses on resolving the problem having regard to the full range of tools and legal powers available; all tenants and residents can easily report ASB, are kept informed about the status of their case where responsibility rests with the organisation and are appropriately signposted where it does not; and provision of support to victims and witnesses.

#### **How we comply:**

We have a strong culture of rights and responsibilities, which we promote this from the very start of customer's tenancies through starter tenancy management and from regular contact with the Community Coordinators. Customer's rights and responsibilities are clearly outlined in their Tenancy Agreement.

We monitor the type of cases received and our performance in handling these.

We issue starter tenancies to protect our existing customers and to closely monitor and support new tenancies. We assess our tenancies to identify those customers that need extra support from us to help them to manage their tenancy. Our policies help colleagues support our very vulnerable customers.

We advise our customers to speak to us at an early stage. Colleagues are trained in dealing with ASB and they are supported by more specialist colleagues (Community Safety Officers) and through an ASB legal advice service. We log complaints and have procedures and timescales for response depending on the nature of the complaint. To support victims and resolve ASB we use several of tools including mediation, our own noise monitoring equipment, specialist CCTV companies, Noise App, professional witnesses and specialist organisations, including Witness Support. Our Tenancy Sustainment Team also play an important role in supporting customers who are experiencing serious ASB.

ASB can be reported through a variety of methods including through our website, App and through an out of hours emergency number. We acknowledge ASB cases and inform customers who will be dealing with their case within strict time deadlines. Where we are unable to help, we will signpost customers to the relevant agency.