

Present:

Nigel (N) (Chair)

Princess (P)

Dylan (D)

Theresa (T)

Rosie (R)

Keith (K)

Gillian Douglas (GD) - Executive Director of Housing

Chris Brown (CB) - Director of Housing Quality & Investment

Carol Hinvest (CH) – Director of Resident Engagement and Services

Fenella Beckman (FB) – Director of Housing Strategy

Clare Hopkins (CHo) - Head of Housing and Communities

Dean Cooper (DC) Head of Repairs

Apologies:

Kevin

Alys Exley-Smith (AES) - Community Relations Manager

Item ref	Item	Owner
1	Welcome and introductions	
1.1	N welcomed everyone to the meeting and introductions were made. Agreement was made to record the meeting for the purpose of the minutes.	
2	Minutes	
2.1	No issues of accuracy identified. The minutes of the meeting of 5 December 2024 were agreed as a true record.	
2.2	3.6 – N would like CB and team to come back and talk more about the intersection between tenants living in properties and the results of the stock condition survey. Agreed to put on future agenda.	N/CB
2.3	3.9 – The Panel asked to see a report on how the gas contractors are performing. Would like the contractors to adopt an engagement standard.	СВ
2.4	5.5 – N raised a question about whether residents have been asked what they want in terms of support. Agreed to do this as part of the resident consultation around ASB policy changes.	СНо

	Action log	
2.5	Item 1 – N has spoken to four residents who have expressed an interest in being part of the panel. It was clear some just wanted to escalate personal issues and so not appropriate. N felt the training and support offered wasn't sufficient to incentivise people and we should be pick this up in the volunteer offer. Keep item open.	
2.6	Item 2 – keep open.	
2.7	Item 3 – agreed to close	
2.8	Item 4 – CB gave verbal update. Working on policy and procedure and will be going for consultation around May 2025 so it's approved and in place well before October when the legislation comes in. CB's team wants to set up a damp and mould working group with tenants to develop the procedure. P shared an observation that she was contacted quickly after raising a repair, but that three sub-contractors of Masher Bros contacted her to make an appointment so it didn't seem very streamlined.	
2.9	Item 5 – CB confirmed there is a report each month of lift breakdowns. N asked for a formal written response for the action log.	СВ
2.10	Item 6 – CB confirmed there are some carryover projects and then a six month programme of new projects.CB will provide formal wording for the action log. Will be starting to share the plan with resident groups and SPP will review what is shared. GD reminded the panel there is an annual report for residents and it would be good to know what residents want to see in that. We are not yet ready to publish details on the website of all the projects and works and when these will be done. CB acknowledged the desire to have forward notice and the right level of detail for both tenants and leaseholders about planned works.	СВ
2.11	K raised a concern about the entry door systems at Evelyn that were due to be replaced but have been removed from the programme. CB agreed to update K outside of the meeting on specifics relating to individual issues.	СВ
2.12	D raised a question about whether residents could fundraise or volunteer to do some small works themselves – like replacing carpets, painting communal walls. GD confirmed LBL would still need to project manage it and ensure due process. The main barrier is not capital funding but resources. N reminded panel of the Right to Manage option. CB agreed to look into	СВ

	what is possible to do and what other local authorities have done in terms of good practice.	
2.13	Item 7 – agreed to leave open. Timeline has been expanded to enable residents to be involved in testing.	
2.14	All other items agreed to close down.	
3	Update on ombudsman and regulation	
3.1	CH gave update on the Housing Ombudsman Service (HOS) paragraph 49 special investigation. HOS asked for evidence in December 2024, came in for two days in January 2025 for a site visit. HOS had three meetings with residents and also meetings with Council Officers. Second evidence request was sent back last week. HOS is now considering evidence and will provide report in first quarter of 25/26. LBL is getting involved with HOS about a new approach to engaging residents and quicker resolutions.	
3.2	GD gave update on the Regulator of Social Housing (RSH) involvement. It is nearly 1 year since the notice was issues (26/3/24) after we self-referred for 3 issues. LBL meet with the RSH monthly. GD explained there has been progress on the following: • Repairs work in progress reduced from 18,000 to 10-11,000. • 5,000 overdue FRA actions down to 2,200 • Non -decent homes now 24% based on accurate data	
3.3	GD confirmed progress had been made but there is more to do. Required to comply with all four consumer standards and LBL will be commissioning a mock inspection by an external third party; residents would be invited to participate in this. This is likely to start around June 2025.	
3.4	N raised a question about the interaction between the HOS and RSH with the Building Safety Regulator (BSR). GD confirmed the BSR have a very specific remit but the organisations are cross-referencing data sets to ensure consistency and will be doing more of this in the future. GD LBL have submitted 3 building safety cases so far and are working on 11 more.	
4	Performance overview	
4.1	CH confirmed improvement is being made, but slower than we would like in some areas. Twelve perception Tenant Satisfaction Measures (TSMs) are about the same level with no great movement. Improvement seen on keeping tenants	

	informed and tenants feeling they are treated fairly and with respect. Complaints handling has increased from 16% to 29% which is a good increase.	
4.2	H&S compliance is close to 100% on most of these. Lift safety there is some narrative in the report about why this isn't 100% (3.8 of performance report).	
4.3	CH confirmed LBL continue to receive large numbers of complaints. There is often a seasonal reason for more repairs in winter – due to heating, weather impacts and so on. The % of stage 1 complaints answered in time has declined – LBL computer systems were unable to measure the new requirement in the HOS code to acknowledge within 5 days and respond in a further 10. We are looking at how we can get more automation to assist with this.	
4.4	Repairs - % of non-emergency repairs on time is 69% which is highest all year. % of emergency repairs 63% showing recovery from Q1. R asked for clarification about what "ontime" meant and DC explained the categorisation of repairs and the timeframes in the <u>repairs guide</u> .	
4.5	ASB is very much the same. Counted as per 1000 homes.	
4.6	Call centre performance – in Q3 last year the average wait time was 59 minutes. Q3 for 2024-25 is 15 minutes. We want to see further reductions, but this is a significant improvement. N asked what was the plan to bring this down and DC confirmed a number of things: • Technology improvements – currently wait times are longer because each call takes longer to handle due to multiple systems. Due end of May. • Recruitment – three people in training and more recruitment is underway. More people answering calls will also help.	
4.7	N asked a question about which teams are included in the "landlord services excluding repairs" line – this is all services under CH. Gas contractor times sit outside of the reporting. N asked for the gas contractor's phone performance to be shared with the panel.	СВ
4.8	P expressed that the efforts being made are seeing improvements. N concurred there was more to do but things do feel to be improving from the resident perspective.	СВ
4.9	N asked if TMO and PFI data is included? CH confirmed it is but only in Q4 as they are small numbers.	

4.10	N said the resident newsletters are very useful and questioned how digitally excluded got this information.	СН
5	Resident Review Panel report – new tenants	
5.1	CHo introduced the report by thanking and acknowledging the time given by residents to write such a good report.	
5.2	The management response has accepted most of the recommendations and the report shows assigned lead officers and timeframes for the actions.	
5.3	One area to learn from was the lack of a scoping meeting. This is key to set the scene and ensure all parties understand what is needed.	
5.4	We have drafted a briefing note for staff where their area is being looked at, because not all teams will have regular contact with the Resident Review Panel. N asked for this to be available to all staff and will be put on the intranet with the framework.	
5.5	N asked for clarity around the number of new tenants – CHo confirmed this is 25-30 per month on average for general needs stock.	
5.6	N suggested we consider mitigations if someone is absent from work and how delays can be minimised in future.	
5.7	T gave comments as a member of the Review Panel. Recommending specific empathy training not just customer service training. Also asked for assurances around the six week visits and that Housing Officers would be involved in review process.	
5.8	CHo confirmed the issue with the visits is the reporting of the outcomes linked to changes in the Housing Management computer system. Team Leaders can see progress in a dashboard but this can't yet be exported in a meaningful way. Housing Officers will be involved in quarterly meetings.	
6	Repairs transformation	
6.1	CB shared slides. One of the key areas in the RSH notice was repairs. Need to provide a cost-effective repairs and maintenance service to homes and communal areas. The transformation programmes are complex and there is a level of scrutiny. Key areas of focus around performance, management policy and process data management.	

6.2	Trends are going in the right direction but not fast enough or stable enough.	
6.3	Need to categorise the repairs correctly when taking the call. We want to put more work into the DLO to have both performance and cost benefits.	
6.4	DC presented slides on the "how". There is a detailed plan with 110 actions across different workstreams. This helps track progress.	
6.5	There are over 300 KPIs in the Quality and Investment Directorate. Using data to know how we're doing.	
6.6	 There are milestones in each area. Some of the areas of focus are: New IT system in Spring/Summer 2025. Pilot of Supervisors checking every job has seen increase in productivity. Heat mapping to help inform the capital programme. Category 1 hazards from the stock condition survey and damp & mould inspections. In preparation for Awaab's law. Intensive training and mentoring for supervisors. Focus on supporting people back to work. Skills matrix – understanding who can (and can't) do certain things. Will allow for dynamic scheduling in new system. Looking at recruitment plan. 	
6.7	DC outlined ways for residents in get involved – there is a slide on this. Looking at website and resident portal.	
6.8	N welcomed the update. N requested copies of slides be sent earlier so the panel can consider and construct informed questions in advance.	
6.9	N would like to see more in a future report about risks to the improvement programme.	
6.10	T said late sharing of slides had hindered ability to give meaningful comments. T raised how important it was for residents to know about appointments so they can give access. T said anecdotally this had gotten worse recently.	
6.11	R raised a concern about the interaction between systems and issues with the portal. Not always clear when or if a repair has been logged. DC confirmed the new portal will be better.	

6.12	K said the portal is OK to log repairs but the history shown is not detailed enough to follow up on what has been done.	
7	Forward Plan	
7.1	N wants the forward plan to reflect the need to keep track of repairs transformation and how Awaab's law will impact this.	
8	AOB	
8.1	None.	
9	Date of next meeting	
9.1	12 June 2025 at 6.30pm	
10	Close	
10.1	N thanked everyone for attending and closed the meeting at 20:04.	