A meeting of the Management Committee will take place on **Thursday 29 September 2022 at 3.30pm at ELHA Head Office, Haddington**

Please advise staff if you are unable to attend

A Care & Repair Training Session will start the meeting

Joyce Bolan Secretary

BUSINESS

1.0 GENERAL

- 1.1 Apologies
- 1.2 Declaration of Interest by Management Committee Members
- 1.3 Minutes of 25 August 2022 for approval
- 1.4 Action List for information
- 1.5 Matters Arising

2.0 GOVERNANCE

- 2.1 Election of Office Bearers for approval
- 2.2 Other Management Committee Appointments for approval
- 2.3 Code of Conduct and Eligibility for Membership for signing
- 2.4 Secretary's Report for homologation

3.0 PRIORITY ITEMS

4.0 POLICIES

- 4.1 Sustainability Policy Review for approval
- 4.2 Flexible Working Policy Amendment for approval
- 4.3 Comments & Complaints Policy Amendment for approval
- 4.4 Quality Assurance Framework Money & Home Energy Advice for approval
- 4.5 Vulnerable Customer Policy Money & Home Energy Advice for approval
- 5.0 BUSINESS MANAGEMENT None

6.0 ANY OTHER BUSINESS

DATE OF NEXT MANAGEMENT COMMITTEE MEETING

Saturday 26 November 2022 at 9.30am at The Marine Hotel, North Berwick Followed by the Management Committee Away Day





Action List

Report by Martin Pollhammer, Chief Executive – for information

The table below sets out the required actions agreed at the last meeting of the Management Committee on 25 August 2022, and confirms the actions taken as a result.

Minute Ref	Action Required	Action By		
1.3	Publish the papers and minutes from the May 2022 Management Committee meeting on elha.com	ES	Complete	
2.1	Check whether full details of Management Committee member addresses need to be used in approving membership	MP	Advice sought from Anderson Strathern	
2.2	Report on the outcome of the investigation into Unit Reactive Maintenance Costs	DM	This will be reported in the next KPI report to Management Committee	
2.3	Report the endorsement of the nominations to the Management Committee to the Association's members.	PE	Complete, AGM papers issued on time	
4.1	Update the Entitlements, Payments and Benefits Policy in the ELHA File Structure and publish on elha.com	ES	Complete	
4.1	Confirm £10k minimum level meets regulatory requirements	MP	Being checked, further update at the next Management Committee meeting	
4.2	Update the Stress Policy in the ELHA File Structure and Management Committee area of elha.com	ES	Complete	
4.3	Update the Property Maintenance (Legal Obligations) Policy in the ELHA File Structure and publish on elha.com	ES	Complete	
4.4	Check the wording of Section 12.4, then update the Treasury Management Policy in the ELHA File Structure and Management Committee area of elha.com	PO/ES	Complete	

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Agenda Item 1.4

Minute Ref	Action Required	Action By	Action Taken
4.5	Update the Authorisations and Standard Charges and Allowances Policy in the ELHA File Structure and Management Committee area of elha.com	ES	Complete

Election of Office Bearers

Report by Martin Pollhammer, Chief Executive – for approval

1.0 Election of Management Committee Office Bearers

In accordance with the Rules of the Association, the Management Committee is required to elect the following Office Bearers for the coming year at the first Management Committee meeting following the Annual General Meeting:

- 1. Chair
- 2. Vice-Chair
- 3. Secretary

2.0 Voting Procedure

The voting procedures are as follows:

- Nominations will be invited
- Retiring Office Bearers may stand for re-election (note the Chair cannot serve for more than five consecutive years)
- Each nomination should be proposed and seconded
- Where there is only one nomination per post, a majority of the Management Committee members present are required to approve the Office Bearer's appointment
- Where there is more than one nomination per post, a secret ballot of Management Committee Members is required to determine the elected Office Bearer

The outgoing Secretary should Chair the discussion in relation to the appointment of the Chair. Once this appointment is made, the new Chair can assume their position and chair the discussions in relation to the appointment of other Office Bearers.

Recommendations

The Management Committee is asked to confirm the appointment of the Chair, Vice Chair and Secretary for the Management Committee year 2022/23.

Audit & Assurance Committee, Working Group and Advisory Committee Membership 2022/23

Current membership of the Management Committee's Sub-Committees, Advisory Boards and the R3 Board, are set out below:

Management Committee Member	Audit & Assurance	Health & Safety	JCC	R3 Board	RWG	GSWG
lain Atkinson	~					
Joyce Bolan	~	~	✓			✓
Jim Curran						
Shirley Evans						
Peter Ewart	~			✓		
Alan Forsyth				√ *	√ *	
Peter Hayman	~	~	√ *			✓
Katrina Hamilton	~					
Brian Logan	~				1	
Pamela McLeod						
David Rose	~	~	✓	1		✓
Eileen Shand					✓	

* Current Chair

JCC – Joint Consultative Committee

RWG – Remuneration Working Group

GSWG – Governance Standards Working Group

Other Management Committee Appointments

Report by Brian Logan, Vice Chair – for approval

1.0 Appointments to be Made

The Association currently has one Sub-Committee; the Audit & Assurance Committee. In addition, there are two Advisory Committees (Health & Safety Committee and Joint Consultative Committee (JCC)), and two Working Groups (the Remuneration Working Group and the Governance Standards Working Group).

As this is the first meeting since the Association's AGM, membership of the Audit & Assurance Committee, Advisory Committees and Working Groups should be confirmed. A minimum of three and a maximum of ten members can sit on the Audit & Assurance Committee. The Chair should not be a member of the Remuneration Working Group.

Current membership of the Advisory Committees and Working Groups are set out in **Appendix 1** to this report. The Management Committee is asked to appoint up to ten members of the Audit & Assurance Committee, and up to three members to each of the Advisory Committees and Working Groups.

2.0 Appointments to the Board of R3 Repairs Limited

The R3 Repairs Limited Board is appointed annually by the Management Committee. It consists of up to six members, three of which are expected to be Management Committee members (but can be ELHA members of staff), and three who are independent members. The R3 Repairs Limited Board can appoint Directors in between the annual re-appointment process.

There are currently three Management Committee members serving on the R3 Board, and two are prepared to stand again, these are Alan Forsyth and Peter Ewart. ELHA does not wish to place staff members on the R3 Board unless it is unavoidable. The Management Committee needs to confirm which members of the Management Committee will sit on the R3 Board in 2022/23.

There is one independent vacancy on the R3 Board. The R3 Board is considering a Succession Plan, but has not yet identified a potential candidate to recommend to the Management Committee. There are therefore three independent places available on the R3 Board. Two serving independent members of the R3 Board have indicated their willingness to continue. The Management Committee is asked to confirm Nick Pollard and Fiona Sheldon's re-appointment as Directors.

2.1 Nick Pollard

Nick is currently Group Finance Director at Link Group, which has an in-house maintenance subsidiary. Nick was previously the Director of Finance & IT for Kingdom Housing Association, and prior to that, Finance Director at Argyll Community Housing Association. Nick is familiar with the regulatory, governance and financial regime of both the commercial environment as well as the social housing sector through his career.

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Nick's previous experience includes being a Senior Housing Finance Consultant in Scotland with Tribal, working on several large scale voluntary stock transfers and SHQS delivery plans, as well as experience of social housing regulation having been a social housing financial analyst / regulator in England with the Housing Corporation for four years. Nick also has an extensive knowledge of treasury finance, commercial and retail banking, having spent 14 years with Lloyds Banking Group in a variety of roles.

Nick has a degree in Business Economics and is a qualified member of the Association of Accounting Technicians. He lives in Tranent, East Lothian, with his wife and three children.

2.2 Fiona Sheldon

Fiona is well known to several Management Committee members, having been a member of the Management Committee from September 2008 until the 2013 AGM (after having previously served on the Management Committee as one of the founder members of the Association). Fiona has served on the R3 Board since its inception, initially as one of the Management Committee Members of the Board.

Fiona lives in East Lothian and is a retired solicitor, having practised in Haddington for 35 years, during which time Fiona was adviser to the Haddington Citizens Advice Bureau for 24 years.

3.0 Care & Repair Local Advisory Committee

The Care & Repair Local Advisory Committee (LAC) normally has Management Committee representation. Eileen Shand is the current LAC Chair.

The Management Committee is asked to appoint a Local Advisory Committee member for 2022/23.

4.0 SFHA Representative Member

One Representative Member for the SFHA is required (who, if required, is able to cast the Association's vote at General Meetings). David Rose is the current representative member.

5.0 EVH Representative Member

One Representative Member for EVH is required (who, if required, is able to cast the Association's vote at General Meetings). David Rose is the current Chair of EVH and is ELHA's representative member.

6.0 Care & Repair Charitable Trust

Finally, although not related to ELHA (since it is a standalone charity, so this is for information only), the Board of the Care & Repair Charitable Trust has always had some Management Committee representation. Currently David Rose serves on the Charitable Trust Board.

Recommendations

The Management Committee is asked to:

- (a) Confirm membership of the Audit & Assurance Committee (and if the Management Committee wishes, to delegate responsibility for electing a Convenor to the Audit & Assurance Committee);
- (b) Confirm the membership of the Health & Safety Committee;
- (c) Confirm the membership of the Joint Consultative Committee;
- (d) Confirm the membership of the Remuneration Working Group;
- (e) Confirm the membership of the Governance Standards Working Group;
- (f) Confirm the appointment of Directors to the R3 Repairs Limited Board;
- (g) Appoint a representative to the Care & Repair Local Advisory Committee;
- (h) Appoint a Representative Member of the SFHA; and
- (i) Appoint a Representative Member of EVH.

Code of Conduct and Eligibility for Membership

Report by Martin Pollhammer, Chief Executive – for signing

Please refer to Section 3 on page 2 of this report for details of how to complete the declarations you are required to make

1.0 Code of Conduct

Each Management Committee Member has a personal responsibility to uphold the requirements of this Code and must agree to adopt the Code of Conduct to continue in their role of a Management Committee Member. A requirement of the Code of Conduct is that each Management Committee Member must review and sign this Code annually.

Part of the Code of Conduct requires Management Committee Members to declare any interests which will then be recorded on a Register of Interests. These are normally declared when appointed as a Management Committee Member. However, it is the Management Committee Members responsibility to ensure that this is kept up to date. Any failure to make a complete, accurate and prompt declaration - whether deliberately or through taking insufficient care - will be regarded as a breach of this Code.

The Code of Conduct document is attached to this report. The model document was last updated by the Scottish Federation of Housing Associations (SFHA) in April 2021, and this revised document was formally adopted by the Association on 30 September 2021.

Each Management Committee Member is required to sign page 12 of the Code of Conduct and complete (or leave blank as appropriate) and sign the Declaration of Interest Form enclosed with this paper.

2.0 Eligibility for Management Committee Membership

Under Rules 43 and 44 of the SFHA Charitable Model Rules (Scotland) 2020, Management Committee Members are reminded that there are qualifying criteria for serving on the Management Committee. Please note that you cannot remain, be elected, or be re-elected onto the Association's Management Committee if any of the criteria under Rule 43 apply.

Rule 44 also sets out when you are no longer regarded as a Member of the Management Committee. The details of the eligibility criteria are set out in Eligibility for Management Committee Membership form, which also needs to be completed and signed.

3.0 Completing the Annual Declarations

Enclosed in a separate envelope with your Management Committee papers are the following documents:

- 1. A personalised Declaration of Interest form (showing any declarations you currently have on file)
- 2. A blank page 12 (the signing page) from the Code of Conduct
- 3. An Eligibility for Management Committee Membership form
- 4. A reply paid envelope

Please either return these signed declarations to Eric Stoddart, Executive Support Officer, by 29 September 2022, or hand the completed forms to Eric at the meeting. Failure to complete and return the documents means that you will be unable to continue to serve as a Management Committee member.

Model code of conduct for governing body members

Appendix A Model Code of Conduct for Governing Body Members



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East Lothian Housing Association

Code of Conduct for Management Committee Members



Contents

- 1. Introduction
- 2. Who Our Code Applies To
- 3. How Our Code is Structured
 - a. <u>Selflessness</u>
 - b. <u>Openness</u>
 - c. <u>Honesty</u>
 - d. Objectivity
 - e. Integrity
 - f. Accountability
 - g. Leadership
- 4. Breach of this Code
- 5. Acceptance and Signature



1. Introduction

- 1.1. All members of Management Committee must sign this Code of Conduct when they are elected, co-opted or appointed, and on an annual basis thereafter. References throughout this Code of Conduct (the Code) to 'we', 'us' and 'our' mean East Lothian Housing Association (ELHA). The Code reflects our Vision for Healthy Happy Homes, and our Values which are to be Honest, Professional, Reliable and Friendly.
- 1.2 We attach the greatest importance to ensuring that high standards of governance and ethical behaviour are demonstrated by all of our people and in all of our activities.
- 1.3 Our Code of Conduct sets out the requirements and expectations which are attached to your role as a member of our Management Committee. You have a personal responsibility to uphold the requirements of our Code. You cannot be a member of the Management Committee¹ if you do not agree to adopt our Code of Conduct. To confirm that you understand its requirements and accept its terms, you must review and sign this Code annually.
- 1.4 As a Registered Social Landlord (RSL), we are required to adopt and comply with an appropriate Code of Conduct². Our Code is based on the Model Code of Conduct produced by the Scottish Federation of Housing Associations, which the Scottish Housing Regulator (SHR) has confirmed fully complies with its Regulatory Standards.
- 1.5 Our Code of Conduct is an important part of our governance arrangements; it is supported by the Role description which describes your responsibilities as a Management Committee member. You are responsible for ensuring that you are familiar with the terms of this Code and that you always act in accordance with its requirements and expectations. Management Committee Members must always ensure their actions accord with the legal duties of the RSL and with regulatory guidance. You must also ensure you are familiar with any policies which are linked to this code.
- 1.6 If there is a concern that a member of the Management Committee may have breached any part of this Code, the matter will be investigated in accordance with the Protocol that we have adopted. A serious breach of our Code may result in action being taken by the Management Committee to

¹ Our Rules state that the Management Committee can remove a member who fails to sign the Code of Conduct (Rule 44.5.2); it is a regulatory requirement that our Rules enable the Management Committee to take such action (SHR Regulatory Framework (2019) Constitutional Standard 19

² Scottish Housing Regulator (2019) Regulatory Framework, <u>Regulatory Standard 5.2</u>



remove the Management Committee member(s) involved.

1.7 This Code of Conduct was adopted by our Management Committee on 30 September 2021.

2. Who Our Code Applies To

2.1 Our Code of Conduct applies to all elected, appointed and co-opted members of our Management Committee and its sub-committees and to the governing bodies of all subsidiaries and members of the ELHA Group.

3. How Our Code Is Structured

- 3.1 Our Code of Conduct is based on the seven principles which are recognised as providing a framework for good governance. They demonstrate honesty, integrity and probity.³
- 3.2 Each principle is described, as it applies to the activities of ELHA and its Management Committee members, and supporting guidance is offered for each to provide more explanation of our Code's requirements. The guidance is not exhaustive and it should be remembered that ELHA and our Management Committee members are responsible for ensuring that their conduct at all times meets the high standards that the RSL sector is recognised for upholding.
- 3.2 The seven principles that you must adhere and commit to by signing this Code are:
 - A. <u>Selflessness</u>
 - B. <u>Openness</u>
 - C. Honesty
 - D. Objectivity
 - E. Integrity
 - F. Accountability
 - G. Leadership

³ Committee for Standards in Public Life (May 1995), Nolan Principles



A. Selflessness

You must act in the best interests of ELHA at all times and must take decisions that support and promote our strategic plan, aims and objectives. Members of the Management Committee should not promote the interests of a particular group or body of opinion to the exclusion of others.

- **A.1** I will always uphold and promote ELHA's aims, objectives and values and act to ensure their successful achievement
- **A.2** I will exercise the authority that comes with my role as a Management Committee member responsibly
- **A.3** I will accept responsibility for all decisions properly reached by the Management Committee (or a sub-committee or working group with appropriately delegated responsibility) and support them at all times, even if I did not agree with the decision when it was made.
- **A.4** I will consider and respect the views of others.
- **A.5** I will not seek to use my position inappropriately to influence decisions that are the responsibility of staff.
- A.6 I will not seek to use my influence inappropriately or for personal gain or advantage or for the benefit of someone to whom I am closely connected⁴ or their business interests.

⁴ See Appendix 1, p13-15 for definition of "closely connected"



B. Openness

You must be transparent in all of your actions; you must declare and record all relevant personal and business interests and must be able to explain your actions.

- **B.1** I will use my best endeavours and exercise reasonable skill and care in the conduct of my duties.
- **B.2** I will avoid any situation that could give rise to suspicion or suggest improper conduct.
- **B.3** I will declare any personal interest(s) and manage openly and appropriately any conflicts of interest; I will observe the requirements of our policy on the matter. I will keep my entry in the Register of Interests complete, accurate and up to date. I will make an annual statement to confirm my declarations are accurate.
- B.4 I will not accept any offers of gifts or hospitality from individuals or organisations which might reasonably create or be capable of creating an impression of impropriety or influence or place me under an obligation to these individuals or organisations. I will comply with ELHA's policy on Entitlements, Payments and Benefits.
- **B.5** I will ensure that, in carrying out my role as a Management Committee member, I am informed about and take account of the views, needs and demands of tenants and service users
- **B.6** I will ensure that ELHA is open about the way in which it conducts its affairs and positive about how it responds to requests for information.
- **B.7** I will not prevent people or bodies from being provided with information that they are entitled to receive.



C. Honesty

You must ensure that you always act in the best interests of the organisation and that all activities are transparent and accountable.

- **C.1** I will always act honestly and in good faith when undertaking my responsibilities as a Management Committee member.
- **C.2** I will use my experience, skills, knowledge and judgement effectively to support our activities.
- **C.3** I will ensure that decisions are always taken and recorded in accordance with our Rules and procedures.
- **C.4** I will ensure that ELHA has an effective whistleblowing policy and procedures to enable, encourage and support any staff or Management Committee member to report any concerns they have about possible fraud, corruption or other wrongdoing.⁵
- **C.5** I will report any concerns or suspicions about possible fraud, corruption or other wrongdoing to the appropriate senior person within the organisation in accordance with our whistleblowing policy.
- **C.6** I will comply with our policies and procedures regarding the use of our funds and resources⁶ and I will not misuse, contribute to or condone the misuse of these resources.
- C.7 We forbid all forms of bribery, meaning a financial or other advantage or inducement intended to persuade someone to perform improperly any function or activity. I will neither accept from nor give bribes or any other inducement to anyone. I will comply with our Fraud and Theft policy on bribery and will report any instances of suspected bribery or corruption within the organisation or any of its business partners.
- C.8 I will ensure that neither I nor someone closely connected to me receives or is seen to receive preferential treatment relating to any services provided by the organisation or its contractors/suppliers. I will declare all interests openly and ensure they are effectively managed to demonstrate this.

⁵ These concerns might include, but are not confined to, suspected fraud, dishonesty, breach of the law, poor practice, non-compliance with regulatory requirements, misconduct, breach of this code.

⁶ Resources include people, equipment, buildings, ICT, funds, knowledge, stationery, transport



D. Objectivity

You must consider all matters on their merits; you must base your decisions on the information and advice available and reach your decision independently.

- **D.1** I will ensure that the decisions that I take are consistent with our aims and objectives and with the relevant legal and regulatory requirements (including those of the Scottish Housing Regulator, the Office of the Scottish Charity Regulator, the Financial Conduct Authority and the Care Inspectorate).
- **D.2** I will prepare effectively for meetings and ensure I have access to all necessary information to enable me to make well-informed decisions.
- **D.3** I will monitor performance carefully to ensure that the organisation's purpose and objectives are achieved, and take timely and effective action to identify and address any weaknesses or failures.
- **D.4** I will use my skills, knowledge and experience to review information critically and always take decisions in the best interests of the organisation, our tenants and our service users.
- **D.5** I will ensure that the Management Committee seeks and takes account of additional information and external/independent and/or specialist advice where necessary and/or appropriate.
- **D.6** I will ensure that effective policies and procedures are implemented so that all decisions are based on an adequate assessment of risk, deliver value for money, and ensure the financial well-being of the organisation.
- D.7 I will contribute to the identification of training needs, keep my knowledge up to date, and participate in ongoing training that is organised or supported by us.



E. Integrity

You must actively support and promote our values; you must not be influenced by personal interest in exercising your role and responsibilities.

- **E.1** I will always treat my Management Committee colleagues our staff, our customers and partners with respect and courtesy
- **E.2** I will always conduct myself in a courteous and professional manner; I will not, by my actions or behaviour, cause distress, alarm or offence.
- E.3 I will publicly support and promote our decisions, actions and activities; I will not, by my actions or behaviour, compromise or contradict the organisation, its activities, values, aims or objectives. I will notify the Chair quickly if I become aware of any situation or event that I am associated with which could affect ELHA and/or its reputation
- **E.4** I will fulfil my responsibilities as they are set out in the relevant role description(s); I will maintain relationships that are professional, constructive and that do not conflict with my role as a Management Committee member.
- **E.5** I will comply with, support and promote our policies relating to equalities, diversity and human rights as well as uphold our whistleblowing and acceptable use⁷ policies.
- E.6 I will respect confidentiality and ensure that I do not disclose information to anyone who is not entitled to receive it, both whilst I am a member of the Management Committee and after I have left.
- **E.7** I will observe and uphold the legal requirements and our policies in respect of the storage and handling of information, including personal and financial information.

⁷ This relates to the use of ICT, social media and networking, facilities etc., and is specific to each individual RSL.



F. Accountability

You must take responsibility for and be able to explain your actions, and demonstrate that your contribution to our governance is effective.

- **F.1** I will observe and uphold the principles and requirements of the SHR's Regulatory Framework, and gain assurance that relevant statutory and regulatory guidance and ELHA's legal obligations are fulfilled.
- **F.2** I will ensure that we have effective systems in place to monitor and report our performance and that corrective action is taken as soon as the need is identified.
- **F.3** I will contribute positively to our activities by regularly attending and participating constructively in meetings of the Management Committee, its committees and working groups.
- **F.4** I will participate in and contribute to an annual review of the contribution I have made to our governance.
- **F.5** I will ensure that there is an appropriate system in place for the support and appraisal of our Senior Officer and that it is implemented effectively.
- **F.6** I will not speak or comment in public on our behalf without specific authority to do so.
- **F.7** I will co-operate with any investigations or inquiries instructed in connection with this Code whilst I am a Management Committee member and after I have left.
- **F.8** I recognise that the Governing Body as a whole is accountable to its tenants and service users, and I will demonstrate this in exercising my judgement and in my decision-making

G. Leadership

You must uphold our principles and commitment to delivering good outcomes for tenants and other service users, and lead the organisation by example.

- **G.1** I will ensure that our strategic aims, objectives and activities deliver good outcomes for tenants and service users. I will make an effective contribution to our strategic leadership.
- **G.2** I will ensure that our aims and objectives reflect and are informed by the views of tenants and service users.
- **G.3** I will always be a positive ambassador for the organisation.
- **G.4** I will participate in and contribute to the annual review of the Governing Body's effectiveness and help to identify and attain the range of skills that we need to meet our strategic objectives.
- **G.5** I will not criticise or undermine the organisation or our actions in public.
- **G.6** I will not criticise staff in public; I will discuss any staffing related concerns privately with the Chair and/or Senior Officer.
- **G.7** I will not harass, bully or attempt to intimidate anyone.
- **G.8** I will not use social media to criticise or make inappropriate comments about the organisation, its actions or any member of the Management Committee, staff or other partners.
- **G.9** I will not act in a way that could jeopardise our reputation or bring us into disrepute.⁸

⁸ This includes activities on social media, blogs and networking sites.

4. Breach of this Code

4.1 I recognise that each member of the Management Committee has a personal and individual responsibility to promote and uphold the requirements of this Code. If I believe that I may have breached the Code, or I have witnessed or become aware of a potential breach by another member, I will immediately bring the matter to the attention of the Chair.

5. Acceptance and Signature

I _____have read and understood the terms of this Code of Conduct and I agree to uphold its requirements in all my activities as a member of our Management Committee. I am aware that I must declare and manage any personal interests. I agree to review all relevant Registers regularly to ensure that all entries relating to me are accurate. I understand that, if I am found to have breached this Code of Conduct, action will be taken by the Management Committee which could result in my removal.

Signed _____

Date_____

Model code of conduct for governing body members

Appendix B Further Guidance for Governing Body Members



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Supporting Guidance to the Code of Conduct for Management Committee Members

This Guidance has been prepared for members of the Management Committee to support the adoption of our Code of Conduct. All members of the Management Committee must sign the Code of Conduct when they are elected, co-opted or appointed, and then on an annual basis thereafter. References throughout this Code of Conduct (the Code) to 'we', 'us' and 'our' mean East Lothian Housing Association (ELHA).

We attach the greatest importance to ensuring that high standards of governance and ethical behaviour are demonstrated by all of our people and in all of our activities. Our Code of Conduct sets out the requirements and expectations which are attached to your role as a member of our Management Committee. You have a personal responsibility to uphold both the spirit and the requirements of our Code.

Our Code of Conduct is an important part of our governance arrangements. It is supported by the Role description which describes your responsibilities as a Management Committee member and you are responsible for ensuring that you are familiar with the terms of the Code and that you always act in accordance with its requirements and expectations. Management Committee members must always ensure their actions accord with the legal duties of the RSL and with regulatory guidance. You must also ensure you are familiar with any policies which are linked to this code.

As a Registered Social Landlord (RSL), we are required to adopt and comply with an appropriate Code of Conduct⁹. Our Code is based on the Model Code of Conduct produced by the Scottish Federation of Housing Associations (2021), which the Scottish Housing Regulator (SHR) has confirmed fully complies with its regulatory requirements.

You cannot be a member of the Management Committee if you do not agree to adopt our Code of Conduct. To confirm that you understand its requirements and accept its terms, you must review and sign this Code annually. Our rules state that the Management Committee can remove a member who fails to sign the Code of Conduct (Rule 44.5.2). It is a regulatory requirement that our rules enable the Management Committee to take such action.¹⁰

Each year, following the AGM, Management Committee members will be asked to sign and date our Code of Conduct to confirm your commitment to the principles, requirements and expectations that it describes and to meet the requirements of our rules. A copy of our Code, showing your signature throughout your membership of the

⁹ Scottish Housing Regulator (2019) Regulatory Framework, <u>Regulatory Standard 5.2</u>

¹⁰ SHR Regulatory Framework (2019) Constitutional Standard 19

Management Committee, will be retained by us, in accordance with our Data Protection/Privacy policy.

Our Code of Conduct applies to all elected, appointed and co-opted members of our Management Committee and its sub-committees and to the governing bodies of all subsidiaries and members of the ELHA Group.

Breach of the Code

If a complaint is made or concern is raised that a member of the Management Committee may have breached any part of our Code, the matter will be investigated in accordance with the Protocol which has been approved by the Management Committee. The protocol forms part of our governance policies and is accessible in the Management Committee area of elha.com.

A potential breach will normally be formally investigated. It is the responsibility of the Chair to decide, in consultation with other office bearers, if an internal or an independent investigation should be conducted. A Management Committee member who is the subject of a complaint or concern about a potential breach of our Code is expected to take leave of absence whilst an investigation is carried out: (our Rules allow the Management Committee to require that this happens)¹¹. Whilst on leave of absence for this reason, a Management Committee member is not entitled to receive any papers or correspondence (other than in relation to the investigation) or to take part in any meetings in their role as a Management Committee member. The requirements of our Code of Conduct continue to apply throughout the term of the leave of absence.

A serious breach of our Code may result in action being taken by the Management Committee to remove the member(s) involved. This is a serious course of action which is provided for in our rules¹². It requires a majority of Management Committee members who attend a special meeting of the Management Committee to support a resolution to remove the member because of their failure to comply with the requirements of the Code or our rules, policies or standing orders. If a Management Committee member is removed as a result of such a resolution, or resigns, having been notified of the Management Committee's intention to consider such a resolution, they cannot be re-elected or appointed or co-opted to the Management Committee during the subsequent five year. A Management Committee member who has been removed cannot be elected, appointed or co-opted to the governing body of another RSL during the same period¹³.

¹¹ Rule 37.8

¹² Rule 44.5

¹³ Rule 43.1.5 / 43.1.5 /43.1.7

How the Code is structured

The Code is based on the seven principles which are recognised as providing a framework for good governance. They demonstrate honesty, integrity and probity.¹⁴

In the Code, each principle is described, as it applies to the activities of an RSL and its Management Committee Members. This guidance is offered to support the application of the Code of Conduct by providing some illustrations of the practical application of the Code's requirements. It is emphasised that the guidance is not exhaustive.

It must be remembered that Management Committee members and RSLs are always responsible for ensuring that their conduct at all times meets the high standards that the RSL sector is recognised for upholding.

The Principles of the Code

The seven principles of the Code are:

- A. <u>Selflessness</u>
- B. <u>Openness</u>
- C. Honesty
- D. Objectivity
- E. Integrity
- F. Accountability
- G. Leadership

The remainder of this guidance offers some illustrations of how each of the principles may be applied to your role as a Management Committee member. There are references throughout to the need for Management Committee members to 'be familiar' with the terms of policies and other documents. This does not mean that you need to know the detailed content of all the documents but rather you should be aware of their key principles and have ready access to them in the event that the detail is necessary.

A. Selflessness

This principle emphasises the importance of Management Committee members acting in our best interests at all times and taking decisions that will support delivery of our objectives. Although individual Management Committee members bring knowledge and experience to their role, you are not a representative for a specific interest or group: your experience and knowledge should inform your contribution to discussion but your decision-making should be influenced by our aims and objectives

¹⁴ Committee for Standards in Public Life (May 1995), Nolan Principles

and not individual or specific interests. In practice, this means that you must always make a conscious effort to see the bigger picture and not concentrate just on the issues that are important to you.

A1 refers to upholding our values, which are included at 1.1 in the introduction of our Code.

The principle contains a commitment to always support and uphold the Management Committee decisions and our actions (A3): if a Management Committee member were to actively undermine or publicly contradict or disagree with decisions and/or actions, this may constitute a breach. E3 of the Code contains a parallel commitment: if a decision is taken by the Management Committee that a member fundamentally disagrees with and cannot support, it may be that resignation should be considered.

This principle is not intended to prevent a Management Committee member from disagreeing with a proposal during a meeting or from recording their dissent from a decision; rather it is intended to ensure that no member of the Management Committee actively and/ or publicly undermines the organisation. In practice, this means, for example, that you should not question in public why a decision was taken or criticise the organisation. It is only if a Management Committee member actively undermines or disagrees with a decision or action that a breach of the Code may arise. A similar provision is contained in the Code of Conduct for staff.

A4 specifies that Management Committee members will always be respectful to others: this means, among other things, that you must uphold and be familiar with our policies relating to Equalities and Human Rights and Dignity at Work. This requirement relates to all of your engagements with Management Committee colleagues and staff, tenants and customers, partners and agents. In practice, this means listening to and considering other views and respecting opinions even if they are very different from your own. It also applies to wider conduct: E1, E2 and E3 are specific about the responsibilities of Management Committee members to ensure that they do not bring the organisation into disrepute.

The Code stresses that Management Committee members should not stray into operational matters or seek to use their influence (A6) inappropriately or for personal gain. This means that Management Committee members should always refer individual matters relating to themselves or someone they know or in which they have an interest to the relevant member of staff or to the Chief Executive for onward delegation.

B. Openness

This principle sets the framework for ensuring that, in all of our activities and in all your actions, transparency and openness are evident. In practice, this means that you must identify and declare all personal interests which are relevant to our work and to your role with us. You must be familiar with the process for declaring interests and you must make sure that the Register of Interests is accurate and up to date at

all times. You must ensure that you are well informed about our policy on declaring interests, which forms part of our EPB (Entitlements, Payments and Benefits) Policy (B3).

You must always be careful and cautious about how your actions may be viewed by others and take care to avoid anything which could compromise or embarrass you or us (B2). In practice, this means that you cannot accept gifts or hospitality that are not permitted by our Entitlements Payments and Benefits policy.

B5 reflects the requirements of SHR's regulatory standard 2 by emphasising the importance of Management Committee members being well-informed about the needs and priorities of tenants. In practice, this may include considering information from Tenant Scrutiny groups, monitoring tenant satisfaction and landlord performance data, offering/considering insight provided from individual Management Committee members' experiences of their landlord. Management Committee members should use this information to inform their consideration of the business that is brought to the Management Committee.

We are covered by the requirements of the Freedom of Information (Scotland) Act and the SHR's Regulatory Framework requires us to be open and accountable for what we do¹⁵. As a member of our Management Committee, you are responsible for ensuring that we comply with these legal and regulatory requirements: in practice, this means monitoring our compliance and ensuring that we communicate openly and respond effectively to tenants, customers, regulators, funders and partners.

The Management Committee should oversee a culture of openness throughout the organisation – in our communications, access to our website, engagement with tenants and customers and willingness to provide information and answer questions. In practice, this means working on the basis that information will be made available unless there is a good reason for it being withheld. At the same time, you must also ensure that confidentiality is respected (B6 and B7 require that information is made available but E6 also requires that confidentiality must be ensured). This means that it is important for **Management Committee**members to be involved in agreeing the policy framework that supports how we categorise information.

C. Honesty

This principle emphasises the importance of always acting honestly and in good faith in undertaking your role as a Management Committee member; it also supplements the principle of Openness. To uphold this principle, you should ensure that you are familiar with our rules, standing orders and scheme of delegation, as well as our governance policies and procedures (C3).

C4 requires you to be aware of the terms of our Whistleblowing Policy: in practice, this means that the Management Committee, collectively, must be assured that the policy is fit for purpose (SHR has issued Statutory Guidance on Whistleblowing) and

¹⁵ Regulatory Standard 2 (SHR Regulatory Framework 2019)

that there is regular training provided for Management Committee members and staff on its terms. Management Committee members must also ensure that there are effective procedures in place for whistleblowing allegations to be made and investigated, with adequate safeguards in place to protect complainants. Management Committee members have an individual duty to report any concerns that you may have about possible fraud, corruption or wrongdoing (C5 and C7). You must, therefore, be familiar with the terms of our Fraud and Theft policy. You are expressly forbidden to accept any gifts or other inducements which might create, or be capable of creating, a sense of obligation to another party.

C6 stresses your commitment to ensure that our funds and resources are used properly and for legitimate purposes. This means that decisions about what we do and how we act must fit with, amongst other things, our permitted purpose, and objectives, our business plan and the terms of our loans and grant-making authorities.

C8 further emphasises¹⁶ your responsibility to ensure that neither you nor someone closely connected to you is seen to benefit inappropriately from your role with us and to be very open in declaring all relevant personal interests. In practice, this means ensuring that you are not involved in any decisions which personally impact or affect you or someone you are close to.

D. Objectivity

This principle is about the need to ensure that you make decisions based on an objective consideration of the information that is presented to you in reports. In practice, this means that you must be satisfied that you have access to all of the information you need to fulfil your responsibilities, whilst – at the same time – being mindful of and respecting the distinct roles of Management Committee members (strategic) and senior staff (operational).

D1 reflects the provisions of Regulatory Standard 1 by committing Management Committee members to ensuring that decisions are consistent with all legal, constitutional and regulatory requirements. This means that Management Committee members must be familiar with these provisions. Reports should refer and draw attention to the relevant legal, regulatory and financial constraints/conditions, with Minutes recording that these have been adequately considered.

D2 is explicit about the importance of preparing adequately for meetings – our role description contains an indication of the time that is likely to be involved in meeting preparation. Preparation includes reading all of the reports and also accessing any additional information that may be available (e.g. supplementary reports) and which you feel is necessary. This might also involve the Management Committee requesting that specialist or independent advice is obtained (D5 and Regulatory Standard 4.1) – and individual members being aware of when it is appropriate and/or necessary to do so (D5).

¹⁶ A6 and B3 are also relevant

D6 describes the responsibility of Management Committee members to ensure that the organisation has an effective and robust framework for assessing and managing risk: this includes being satisfied about the delegation of authority, operation and reporting of e.g. the Audit and Risk sub-committee. It also relates to the operation of financial regulations and the effectiveness of financial planning, budget preparation, forecasting and reporting. Regulatory Standard 3 is relevant to this principle.

In order to be objective, Management Committee members must be well-informed about the organisation's business and operating environments as well as the sector and economic policy and strategy contexts. D7 commits Management Committee members to participate in regular training to keep their knowledge up to date. Of course, no one is expected to be an expert in everything but there is an expectation that each Management Committee member will help to identify their own ongoing training needs and the priorities for the Management Committee collectively – this will be an element of the annual review of the Management Committee's effectiveness (as required by Regulatory Standard 6.5.

E. Integrity

This principle focuses on the importance of always acting in our best interests and actively promoting our values, aims and objectives and reflects many of the other principles in the Code.

E1 and E2 echo A4: Management Committee members must be respectful and courteous in all that you do: in practice, this means being prepared to 'agree to disagree' when strong opinions are held and being tolerant of views and perspectives which might be very different from your own. It also means recognising and acknowledging that what's acceptable in terms of language and conduct change and being mindful that differences in cultures, faiths and beliefs can be very significant and sensitive.

E3 complements A3 in terms of publicly promoting and supporting us and our activities but it also includes a commitment to notify the Chair as soon as you become aware of anything that might compromise us or our interests. In practice, this might include being associated with, for example, a community council's opposition to a planning application that we have made or being involved in something that may become public and which could embarrass us.

E4 refers to the role descriptions that we have adopted: all Management Committee members must be familiar with the terms of their role description and, for office bearers, there will be more than one. In practice, this principle seeks to ensure that relationships are professional: amicable and constructive with respect for the boundaries between the strategic role of the Management Committee member and the operational responsibilities of senior staff.

E5 complements A4 and is a specific commitment to uphold our Equality and Diversity and Whistleblowing policies: this reflects the regulatory requirement for us to have a whistleblowing policy and the Regulatory Standard that requires 'clear procedures for employees and governing body members to raise concerns or whistleblow if they believe that there has been fraud, corruption or other wrongdoing within the RSL'¹⁷

E6 and E7 relate to confidentiality and the importance of maintaining it. This applies to the content of reports, discussions at Management Committee and committee meetings and all other business that you have access to in your role as a Management Committee member. Upholding this principle requires you not to discuss anything that is identified as being confidential with anyone who is not entitled to the information; it also means making sure that any papers are stored securely (e.g. by means of passwords on laptops or other devices, in a locked drawer) and that on-line discussions can't be overheard (e.g. if attending a virtual meeting). In applying this principle, you must also be mindful of our duties in respect of safeguarding personal information i.e. anything from which an individual can be identified.

F. Accountability

This principle is about the importance of taking personal responsibility for your contribution to our governance. In practice, this means being active in your role as a Management Committee member – asking questions, critically reviewing information and monitoring performance and participating in strategy and planning events (F3).

F1 is a specific commitment to upholding legal and regulatory requirements: in practice, this means that you should feel assured and satisfied, as far as you reasonably can, that we are compliant with our legal and regulatory obligations as well as our own internally set standards. Your assurance will come from your participation in our governance – the reports, discussions, external advice and audits that you are asked to consider and which form the evidence for the Management Committee annual Assurance Statement (F2).

As a Management Committee member, you are expected to participate in an annual review of the effectiveness of your own contribution (F4) and of our overall governance (G4). As well as being a principle of the Code, this is also a regulatory requirement (Regulatory Standard 6.3, 6.3).

F6 places a responsibility on each Management Committee member to be assured that there is an effective process in place to appraise the Chief Executive's performance: in practice, this also means ensuring that the Chief Executive is adequately supported as well as being held to account for the achievement of both corporate and individual objectives. Management Committee members must also be satisfied that the Chief Executive's annual appraisal is carried out effectively and that its outcome is reported to the Management Committee.

Our Scheme of Delegation identifies who is authorised to make public comments on our behalf; it is not normally appropriate for an individual Management Committee member to speak in public without prior agreement from the Chair. This includes, for example, accepting an invitation to contribute to a conference or event because of

¹⁷ Regulatory Standard 5.6

your role with us. The Code's principles also extend to social media activities (F7, G7).

F8 is a specific commitment to participate in and co-operate with any investigations that may be instructed relating to the Code, involving you either directly or as a witness. This obligation extends beyond your term of membership of the Management Committee which means that your co-operation may be requested when you are no longer a member of the Management Committee. It is unlikely that you would be asked to contribute to any such investigation more than two years after you have left.

As a RSL, we are accountable to our tenants and service users for our actions: F9 requires Management Committee members to ensure that the best interests of tenants and service users guide planning and decision-making. In practice, this means being informed and taking account of the views of tenants and service users in all aspects of your role and ensuring that reports contain sufficient information to give you assurance that proposals are similarly informed before you make a decision.

G. Leadership

The role of the Management Committee is to lead and direct the organisation to deliver good outcomes for our tenants and service users¹⁸. This section of the Code sets out some specific expectations about that part of your role. It also stresses the importance of Management Committee members leading by example and making a positive and active contribution to our governance (G1, G2).

G3 echoes A3 and E3 by specifying your responsibility to be positive in your support for us and our work. In practice, this means representing us positively both when acting on our behalf and in your wider activities.

G4 complements the individual focus of F4 by being explicit that the governing body should review the overall effectiveness of its governance arrangements: this forms part of our annual review process, which also includes a review of the range of skills, knowledge and experience that the Management Committee collectively needs to fulfil its responsibilities. Management Committee members have a responsibility to contribute to the process of identifying any gaps and the best means of filling them $(D7)^{19}$.

G5 supports G3 (and A3 and E3) by being explicit that you should not criticise us, our people or our actions in public. This does not mean that you cannot be critical or raise concerns – that is a key part of your responsibility as a Management Committee member – but you should always be constructive and objective in your challenge and criticism, which should be expressed at meetings and in discussions and with the relevant people, in accordance with our structures and procedures.

G6 is a specific commitment not to criticise or undermine (or appear to undermine) members of staff (individually or collectively) in public (including to e.g. tenants or

¹⁸ Regulatory Standard 1

¹⁹ Regulatory Standard 6.5

partners). Any concerns which you have should be raised directly and privately with the Chair or Chief Executive.

G7 echoes provisions in the Staff Code regarding bullying and harassment.

G8 supplements the principle at F7 by making specific reference to social media

activity: all of the provisions of the Code apply to your presence on all social media platforms.

As someone who is responsible for leading our organisation, it is essential that Management Committee members are not associated with anything that could compromise us or bring us into disrepute. G9 echoes the provisions that are set out at E3 and E4. In all that you do, you must be mindful of any potential negative impact on us and, if you become aware of anything that could affect us, you must bring it to the attention of the Chair quickly (E3). Model code of conduct for governing body members

Appendix C Model Protocol for Dealing with a Breach of the Code of Conduct



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ELHA Protocol for Managing an Alleged / Suspected Breach of Code of Conduct

1. Introduction

1.1 This protocol will be used by ELHA to deal with any alleged breaches of our Code of Conduct for Governing Body Members. It is based on the Model Protocol provided by SFHA.

2. Who is Responsible?

- 2.1 The Chair has delegated authority to deal with all potential breaches of the Code, unless the allegation relates to him/her. In that event, the Vice Chair should take on the responsibilities that the protocol allocates to the Chair. It may be necessary to ask other members of the Management Committee to take on responsibilities should the allegation relate to both the Chair and Vice Chair.
- 2.2 The Chair should consult with other office-bearers (or members of the Management Committee) to instruct, progress and conclude internal and external investigations carried out in accordance with this protocol.
- 2.3 The Scheme of Delegation identifies who has primary responsibility for overseeing the management of alleged breaches of the Code of Conduct.

Delegated Authority to Oversee Potential Breaches	Any two from the following (must include at least one Management Committee member
Management Committee	Chair, Vice-Chair, Secretary, Audit & Assurance Committee Convenor
Senior Staff	Chair, Vice-Chair, Chief Executive, Other SMT members

- 2.4 No one who is directly involved in a matter that gives rise to a concern that there may have been a breach of the Code of Conduct should be involved in reviewing or managing/conducting an investigation of the matter. Consequently, it may be necessary to ask other members of the Management Committee to take on the responsibilities that the Protocol allocates to the Chair and other office bearers.
- 2.5 The Chair may seek advice from our solicitors in exercising all of the responsibilities associated with this protocol.

3. What Constitutes a Breach?

- 3.1 A breach of the Code of Conduct is a serious matter. This Protocol is a process that will apply to managing and/or responding to alleged breaches of the Code of Conduct. Breaches can include:
 - Conduct by a Management Committee member during a meeting (which might involve a member being obstructive, offensive or disregarding the authority of the Chair or failing to observe Standing Orders)
 - Complaints that the conduct of a Management Committee Member has failed to meet the requirements of the Code of Conduct; is contrary to ELHA's Values, Rules or policies; threatens the reputation of ELHA; risks bringing the organisation into disrepute or undermines ELHA and/or its people
 - Inappropriate behaviour towards colleagues, staff, customers or partners
- 3.2 Some complaints and/or concerns may relate to relatively minor matters, whilst other may involve more significant issues. Consequently, different approaches are likely to be appropriate, depending on the details of individual circumstances, recognising that it may not always be appropriate to undertake a formal investigation in response to an isolated and/or relatively minor issue.

4. Initial Review to Determine if Further Investigation Required

- 4.1 When a complaint is received or a concern is raised, consideration should be given as to which is the most appropriate course of action. This may (but may not) require some initial review of the complaint or allegations before concluding on a specific approach. The review should be carried out by those members of the Management Committee appointed in accordance with 2.2 of this Protocol, with support from the Chief Executive if required.
- 4.2 It may be that such a review concludes that there is no substance to the concern or allegation. Depending on the circumstances, it may be appropriate to report the outcome of such a review to the Management Committee. This might be the case, for example, if an anonymous complaint is received which cannot be investigated because of a lack of information.
- 4.3 Anonymous complaints or allegations can be difficult to resolve but, in the event that anonymous information is received or made known, an initial review should be undertaken to establish whether there is the potential for any substance to the concern. If so, an investigation should be undertaken, although it is recognised that it may not be possible to conclude Page | 26

any such investigation satisfactorily.

- 4.4 Minor issues, actions or conduct at an internal meeting or event are unlikely to constitute a breach of the Code of Conduct that warrant investigation. The Chair (and other office bearers) should exercise their judgement in determining which of the courses of action set out in this Protocol is more appropriate.
- 4.5 Two routes are described in this Protocol: Route A and Route B.
- 4.6 SHR requires that alleged breaches of the Code which are to be investigated under either Route A or Route B must be regarded as Notifiable Events, in accordance with the terms of the SHR's Statutory Guidance. The Chair is responsible for ensuring that the necessary notifications are made to the Scottish Housing Regulator, and that the SHR's requirements (as set out in the relevant guidance²⁰) in terms of reporting the outcome of the investigation are met.

5. Route A

- 5.1 Route A is an internal and informal process to address potential minor breaches. This is intended to be a relatively informal process, used to address e.g. one-off discourtesy at an internal meeting, isolated or uncharacteristic failure to follow policy.
- 5.2 Alleged breaches that occur during the course of a meeting or other internal event (and which have not happened before) will, unless the Chair believes it to be serious, be dealt with by the Chair of the meeting, either during the meeting/event and/or within 24 hours of the meeting. In these circumstances, the Chair may ask the member to leave the meeting or a vote may be taken to exclude the member from the rest of the meeting.
- 5.3 After the meeting, the Chair or sub-committee Convenor will discuss such behaviour with the member and may require the member to apologise or take such other action as may be appropriate (Route A). Where the Chair regards such behaviour as being serious, it should be investigated in accordance with Route B as will repeated incidents of a similar nature.
- 5.4 It may be appropriate for the Chair to record the terms of the discussion in a letter to the Management Committee member e.g. to confirm the provision of training or support or to record a commitment to uphold a specific policy or to record an apology.
- 5.5 It is possible that a concern that it is initially agreed can be addressed via route A ends up being the subject of a formal investigation, if more

²⁰ Scottish Housing Regulator (2019) Notifiable Events guidance

significant issues emerge, or actions are repeated.

6. Route B

- 6.1 Route B will involve formal investigation of repeated breaches or an alleged significant/major breach. Investigations may be conducted internally or independently, according to the circumstances and people involved.
- 6.2 An investigation under Route B will usually be overseen by the Chair and another office-bearer or Management Committee member.
- 6.3 The Chair or office-bearer, in consultation with the other office-bearers, will decide whether to instruct an independent investigation or carry out an internal investigation.
- 6.4 In the event that the Chair or other office-bearer is the subject of a complaint, an independent investigation should be conducted, overseen by the Vice-Chair and another Management Committee member.
- 6.5 If the Chair is likely to be involved in an investigation (e.g. as a witness), it will be necessary for the office bearers to consider who should be involved in overseeing the investigation.
- 6.6 The Chief Executive can support the implementation of the Protocol (unless involved in the issue, in which case the role should be assigned to another senior member of staff).
- 6.7 Our scheme of delegation identifies who has primary responsibility for overseeing the management of alleged breaches of the Code of Conduct (see section 2.3)
- 6.8 Allegations of a potential breach should normally be made to the Chair or, where the complaint relates to the Chair, to another office-bearer. Where a complaint is made to the Chief Executive, the matter should immediately be notified to the Chair.
- 6.9 Alleged breaches may be the subject of written complaints or allegations; they may also be witnessed by someone. However the alleged breach is identified, the Chair and Secretary should ensure that there is always a written statement of the complaint or allegation that is used as the basis for the investigation. If no written complaint is made, the statement of the matter should be prepared by someone unconnected to the event/situation (e.g. a verbal complaint made by a Management Committee member should be recorded by someone who was not present when the issue arose – this could be a member of staff).
- 6.10 The Management Committee member who is the subject of the complaint/allegation that is to be investigated will be notified in writing of the

alleged breach within seven working days, either of occurring or of receipt of the complaint. A Management Committee member who is subject to an investigation should take leave of absence until the matter is resolved. Rule 37.8 of the 2020 Model Rules contain the provisions to secure this. The letter will inform the Management Committee member of the nature of the potential breach, the arrangements for the investigation and will advise that leave of absence will be in place for the duration of the investigation. Management Committee members are expected to co-operate with such investigations²¹.

- 6.11 An alleged breach of the Code of Conduct which is being dealt with via Route B will be notified to the Management Committee, normally by the Chair or Secretary, within seven working days, either of occurring or of receipt of the complaint. The notice (which should be confidential) will not describe the detail of the complaint and will set out the proposed arrangements for investigation, including who will conduct the investigation and which members of the Management Committee are responsible for its oversight.
- 6.12 The appointment of an external Investigator (when it is decided to be the appropriate response) should be approved by the Management Committee members responsible for overseeing the investigation.
- 6.13 An internal investigation (when it is decided to be the appropriate response) will be carried out by at least two and not more than three Members of the Management Committee, who are not responsible for overseeing the investigation. In selecting the Management Committee members, we will seek to ensure that the investigators represent the profile of the Management Committee.

7. Investigation Under Route B

- 7.1 The conduct of an investigation should remain confidential, as far as possible, in order to protect those involved (witnesses, complainant(s)) and the Management Committee member(s) who are the subject of the complaint.
- 7.2 All investigations will be objective and impartial. Investigations will normally be investigated by an independent person, unless it is decided that an internal investigation is appropriate.
- 7.3 Investigations should not usually take more than six weeks to conclude.
- 7.4 The investigator(s) will be supported by the Chief Executive (or other senior member of staff if the Chief Executive is involved in the complaint). The Chair and other office-bearer, with any support they feel necessary, will brief the

²¹ Code of Conduct F7

agreed advisor/investigator and then consider their recommendations at the end of the investigation, before reporting to the Governing Body.

- 7.5 All investigations will be the subject of a written brief which sets out the Management Committee's requirements and which includes the statement of the alleged breach (scope, timescale, reporting requirements, access to information etc.). The brief may refer to any action previously taken that is relevant.
- 7.6 All investigations will include at least one interview with the Management Committee member who is the subject of the allegation, who will be invited to provide any relevant information. The interview(s) may be conducted face to face or remotely (by telephone or video call). Management Committee members may be accompanied during an interview by a friend (at their request), as a companion to provide support and not to represent. It is not appropriate for another Management Committee member to fulfil this role nor is it appropriate for the RSL to meet any costs (other than reasonable expenses as provided for in the relevant policy) in respect of a companion's attendance.

8. Considering the Outcome of the Investigation

- 8.1 The advisor/investigator will normally present their report to the Management Committee. Before doing so, the report will be reviewed by those overseeing the investigation to ensure that the Brief has been met and that the report is adequate to support the Management Committee's consideration and decision making.
- 8.2 The Management Committee member whose conduct is being investigated will not be party to any of the discussions relating to the investigation.
- 8.3 The report will be considered at a meeting of the Management Committee, which may be called specifically for this purpose. It is the responsibility of the Management Committee to consider the report and findings from the investigation and to determine:
 - Whether there has been a breach
 - How serious a breach is
 - What action should be taken
- 8.4 The Management Committee will report the findings of the investigation and the proposed action to the member concerned within seven days of the meeting at which the report of the investigation was considered.

9. Action to Deal with a Breach

- 9.1 If, following investigation, a breach of the Code is confirmed, action will be taken in response. This action will reflect the seriousness of the circumstances. It may take the form of some or all of the following:
 - A discussion with the member concerned (which may be confirmed in a subsequent letter)
 - advice and assistance on how their conduct can be improved
 - the offer of training or other form of support
 - a formal censure (e.g.in the form of a letter setting out the conclusions, expressing concern and specifying that there must be improvement / no repetition etc)
 - a vote to remove the Member from the Management Committee
- 9.2 Where, it is concluded that a serious breach has occurred, the Management Committee may require the member to stand down from their position in accordance with the Rules.
- 9.3 If the Management Committee proposes to remove a member, following investigation, the member will have the right to address the full Management Committee before their decision is taken at a special meeting called for that purpose. Any such decision must be approved by a majority of the remaining members of the Management Committee, in accordance with Rule²² (44.5)
- 9.4 A record of the outcome of an investigation will be retained in the Management Committee member's file at least 12 months.
- 9.5 The outcome of any investigation will be notified to the Scottish Housing Regulator, in accordance with the requirements of the Notifiable Events Statutory Guidance.

10. Definitions

- 10.1 ELHA will regard the following actions as a "serious breach" of the Code of Conduct (this list is not exhaustive):
 - Failure to act in our best interests and/or acting in a way that undermines or conflicts with the purposes for which we operate.
 - Support for, or participation in, any initiative, activity or campaign which directly or indirectly undermines or prejudices our interests or those of our service users, or our contractual obligations.
 - Accepting a bribe or inducement from a third party designed to influence the decisions we make.
 - Consistent or serious failure to observe the terms of the Code of Conduct.
 - Serious inappropriate behaviour towards a colleague, member of staff, tenant, customer, partner or stakeholder

²² SFHA Model Rules (2020)

11. Approval and Review

11.1 This protocol was approved by the Management Committee of ELHA on 30 September 2021. It will be reviewed as and when the Scottish Federation of Housing Association's (SFHA) issue any updates to the Model.

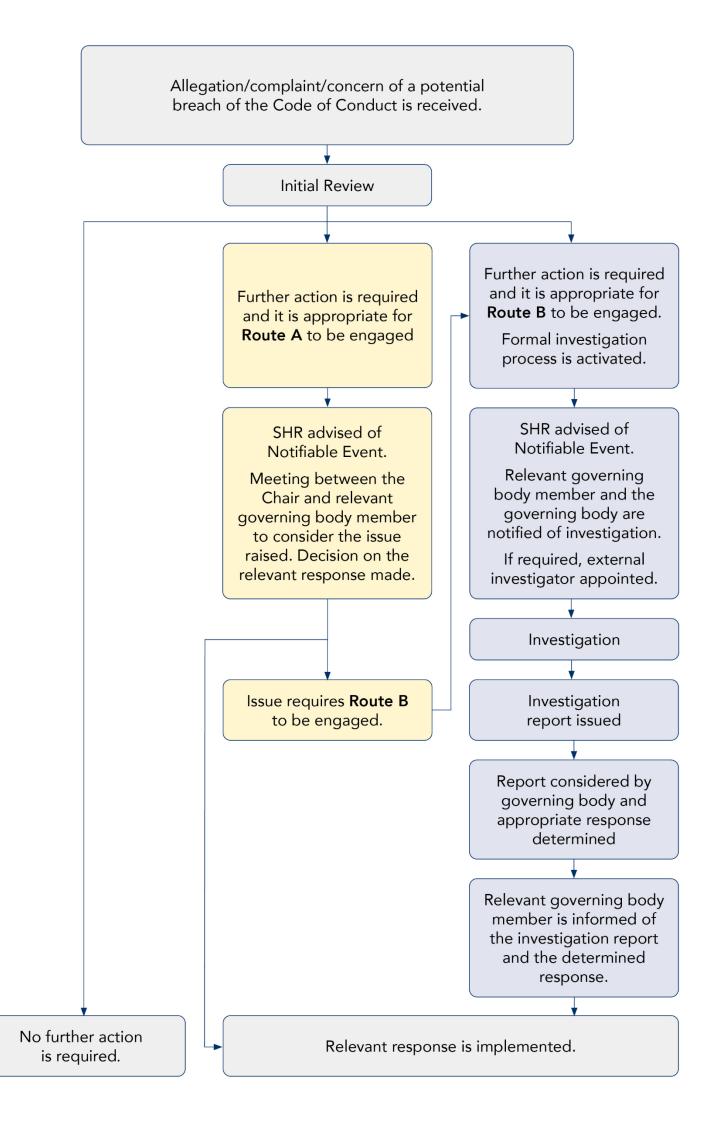
Model code of conduct for Governing Body Members

Appendix D Flowchart Summarising Protocol Process



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Secretary's Report – for homologation

1.0 Membership

No new membership applications have been received.

2.0 Use of Seal for Homologation

Membership certificate issued to Paul Hillard, 44 West Holmes Gardens, Musselburgh, EH21 6QW.

Recommendation

The Management Committee is asked to homologate the use of the seal.

Agenda Item 4.1 Policy Document

ELHA POLICY

Date Issued	February 2007		
Department	Corporate		
Last Review Date	September 2022		
Title	Sustainability Policy		
Objective	To summarise ELHA's aims and objectives in terms of sustainability within the organisation		
Responsible	Chief Executive		
Next Review Date	September 2027		

CONTENTS

1.0 INTRODUCTION

- 1.1 The Association understands the importance of environmental issues, the need to preserve natural resources, and the need to reduce greenhouse gas emissions. We are committed to creating a sustainable organisation by striving to ensure that we make a positive contribution to the protection of the environment and to sustainable development.
- 1.2 This policy aims to:
 - Reduce the environmental impact of our activities by initiatives such as energy saving, waste management and recycling
 - Strive to avoid and mitigate pollution to air, land and water from all operational activities
 - Comply with the requirements of environmental legislation, statutory regulations and official codes of practice that relate to our activities
 - Ensure that we have a positive impact on communities and that we take steps to create sustainable communities where people want to live
 - Raise awareness of environmental issues with staff and stakeholders and work with other businesses to encourage performance improvement in environmental issues through purchasing and procuring services

1.3 In order to achieve this, we need to review the current landscape of the sector and recent developments within it. These include the Sustainability Reporting Standard for Social Housing (SRS) which was launched in November 2020. The Standard was set up in response to concerns that ESG (Environmental, Social and Governance) investment in social housing, the

4.1 Sustainability Policy Document

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Agenda Item 4.1 Policy Document

way of measuring the performance of an organisation in terms of its environmental and social impacts and risks, and the quality of governance, was being inhibited by the absence of a common reporting standard. Although sustainability reporting is not currently mandatory, it is likely that this will become so in the medium-term future.

To allow this to be achieved, we will adopt the following six key principles to reporting on sustainability

Set our goals before we start

- Identify the issues and choose reporting indicators
- Anticpate potential data collection issues
- Analyse the data critically
- State key observations
- Communicate our findings appropriately

Other key developments that will impact on us and which will require consideration include the change required to achieve Zero Direct emission Heating in all new build dwellings by 2026, the prevention of fitting new gas boilers from 2030, the objective of meeting EESSH 2 by 2032 and Net Zero by 2040.

In order to undertake this review, we will set out the milestones which require to be met as part of our annual Business Plan and allocate the resources required to achieve these.

2.0 IMPACT ON THE ENVIRONMENT

2.1 Development of new housing sites

The Association develops new housing in partnership with Castle Rock Edinvar Housing Association / Places for People Scotland. We will ensure that we comply with the sustainability standards outlined in the Places for People Design Guide and the Sustainable Housing Design Guide for Scotland.

2.2 Energy

We will:

 Carry out an ongoing energy audit of our office to identify where savings can be made

4.1 Sustainability Policy Document

Agenda Item 4.1 Policy Document

- Identify how staff and Management Committee members can contribute towards reducing energy consumption
- Ensure that energy is used efficiently in the office, monitor consumption and use energy efficient equipment where practical
- Provide information to tenants on energy efficiency
- 2.3 Water

We will make sure that water is used efficiently in the office.

2.4 Waste & recycling

We will try to recycle as much office waste as possible such as:

- Recycling of confidential waste
- Recycling of glass, cans and other paper products
- Recycling of printer ink and toner cartridges

Where practical, we will provide information to tenants on recycling and will work with East Lothian Council on making recycling facilities available for all tenants.

2.5 CO2 Emissions

We will monitor Carbon Dioxide emissions and set annual targets to reduce these.

3.0 SUSTAINABLE COMMUNITIES

3.1 Transport

We will try to minimise the impact of traffic on the local environment in all of our developments. Where practical, we will also promote the use of clean transport, public transport and environmentally responsible operation of vehicles.

We will encourage our staff to switch to electric vehicles.

3.2 Inclusive communities

All ELHA's developments will seek to minimise the impact of new developments on the character of existing settlements.

We will seek to provide balanced communities in all of our communities, for example by:

4.1 Sustainability Policy Document

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Agenda Item 4.1 Policy Document

- Allowing for mixed tenure housing
- Creating employment opportunities, community facilities and education opportunities
- Ensuring ease of access to transport
- 3.3 Fuel Poverty

We will be innovative in our approach to combating fuel poverty. We will do this by providing energy efficient housing to reduce tenants' energy costs. We will endeavour to ensure that <u>all</u>our <u>stock homes</u> meets the <u>Scottish</u> <u>Housing Quality Standard for energy efficiencyEnergy Efficiency Standard for</u> <u>Social Housing (EESSH) 2 by 203220</u>.

3.4 Employment Opportunities

Where practical, we will include training and employment opportunities when procuring services, to assist the local economy.

4.0 RAISING AWARENESS

4.0

4.1 Suppliers and Contractors

Where possible, we will aim to use local contractors and suppliers in order to support the local economy. We will encourage them to meet the same standards as those we set ourselves.

We will aim to use architects and other designers who have recognised experience of environmentally responsible and energy efficient building design.

We will ask consultants and contractors to provide a copy of their own Sustainability policy or ask them to agree to adopt the Association's policy as part of the appointment process to our select list of contractorswhere appropriate.

4.2 Buying Products

We will develop a purchasing policy that includes the purchase of fair trade or ethical products where appropriate. We will procure goods and supplies that have a better environmental performance, avoiding chemicals wherever possible.

4.3 Staff Training

The staff "Green Team" will meet regularly to discuss our practice, identify areas for improvement and set and monitor sustainability targets.

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4.1 Sustainability Policy Document

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We will promote staff and Management Committee awareness by providing training and information on sustainability issues as appropriate. We will also include sustainability issues in induction training.

4.4 Communication Wwith Tenants and Other Stakeholders

We will encourage tenants to adopt energy and water saving techniques in their homes, for example through articles in our news<u>flashes</u>letters and the tenants' handbookon elha.com.

5.0 MONITORING & EVALUATING

- 5.1 We will aim to continuously improve environmental performance. We will do this by:
 - Regularly reviewing activities and policy
 - Setting new targets to reduce any environmental impacts caused by operational activities
- 5.2 The Management Committee and our stakeholders will monitor the progress of our sustainability aims through the submission of annual reports on the progress against the targets set and reviewed regularly by our "Green Team".

6.0 POLICY REVIEW

6.1 The Chief Executive will review this policy every five years. Any amendments required will be submitted to the <u>Housing & Property Services Sub-</u><u>Management</u> Committee for approval.

Sustainability Policy Review

Report by Duncan Mackay, Director of Asset Management – for approval

1.0 Introduction

The Association's Sustainability Policy was last reviewed in August 2017 and has now been reviewed as part of the regular policy review cycle.

2.0 Policy Review

At the time the Policy was previously reviewed, the landscape around sustainability within the sector was very different to that which pertains today. There is now a much greater focus on not only the sustainability of a housing provider as an individual business, but also the homes and other properties which it manages, all in the wider context of climate change and the need to engender and support sustainable communities in an equitable manner.

The reviewed policy goes some way to recognising this while noting the main issues which face the Association as a housing provider, not least of which is the quality of the homes which may be built in future, as well as existing homes and their impact on the environment now and in the future.

It begins to set out how the Association may be able to start to measure, monitor and manage these impacts and points towards the need for a long term strategy that will be required to meet largely externally set goals while remaining within constrained resource availability.

The revised **Policy Document** is attached to this report, with proposed changes having been tracked.

The policy is next scheduled for review in August 2027, however, the Association is starting to develop a wider approach to ESG Policy (Environmental, Social and Governance), and this is likely to feature in the 2023/24 Group Business Plan Action Plan. It is possible that developments in this area may lead to this policy being superseded before the next planned review.

Recommendation

The Management Committee is asked to approve the reviewed Sustainability Policy.

Flexible Working Policy Amendment

Report by Martin Pollhammer, Chief Executive – for approval

1.0 Introduction

The Flexible Working Policy is not yet due for its periodic review however, following a recent Flexible Working Request from a member of staff, it was highlighted that the policy needed to contain clearer guidance on who processed / approved Flexible Working Requests. The current policy is based on EVH's model policy, however it was felt that it did not fully explain the Association's process and requirements clearly.

2.0 Changes to the Model Policy

The Executive Support Officer (HR) has reviewed the current policy, and updated the document to make it clearer to follow. The main amendment that was suggested was adding in wording to explain that:

- All requests received by Managers must be passed to SMT for discussion and approval at their weekly meeting (these cannot be approved solely by Managers)
- All letters that confirm the Flexible Working Requests and detail formal contract variations must be drafted and issued to the appropriate person, by the Executive Support Officer
- If any meetings are required to discuss the Flexible Working Request or offer alternative arrangements, these must be agreed by SMT and carried out by the Manager once agreed
- If Flexible Working Request are rejected, this is done so with SMT's agreement and letters specifying the business reasons for rejection are drafted and issued to the appropriate person, by the Executive Support Officer

As the changes are minor and not part of a formal five year review, the Policy Document has not been presented with this report, but is available on request.

Recommendation

The Management Committee is asked to agree the suggested changes to the Flexible Working Policy.

Comments & Complaints Policy Amendments

Report by Karen Barry, Director of Housing – for approval

1.0 Introduction

The Association has registered with the Financial Conduct Authority (FCA) to provide the regulated activities of Debt Adjusting and Debt Counselling. Such activities come under the jurisdiction of the Financial Ombudsman Service, requiring the Comments and Complaints Policy, which currently reflects the Scottish Public Services Ombudsman's Model Complaints Handling Procedure for Social Landlords, to be aligned with FCA Guidance.

2.0 Amendments to the Policy

The recommended additions to the Policy, which are self-explanatory and tracked on the attached **Policy Document**, refer to FCA Guidance, their definition of a complaint and how they will monitor compliance through the submission of annual reports.

Recommendation

The Management Committee is asked to approve the recommended additions to the Comments & Complaints Policy.

ELHA POLICY

Date Issued	March 2013		
Department	Corporate		
Title	Comments and Complaints Policy		
Objective	To ensure that comments and complaints are used to drive service improvements; that we deal with all complaints appropriately within our timescales and that we resolve complaints wherever possible		
Responsible	Chief Executive		
Last Review Date	February 2021		
Next Review Date	February 2026		

1.0 POLICY STATEMENT

- 1.1 Our Vision is to provide "Healthy Happy Homes". We recognise that we will not always get things right and we value feedback from customers. Effective handling of comments and complaints can improve the quality of services we deliver to our customers and help foster a culture of continuous improvement throughout the Association.
- 1.2 Anyone who receives, requests or is affected by our services can make a comment or complaint.
- 1.3 We will make it easy for customers to make a comment or complaint and ensure that effective records enable accurate and meaningful monitoring and reporting of outcomes, particularly where a comment or complaint has led to a change in a process or policy.
- 1.4 We will respond to a complaint on our Facebook page by signposting the customer to our Complaints Handling Procedeure.
- 1.5 We will investigate complaints and resolve them as closely as possible to the point of frontline service delivery. We will ensure that the person making the complaint is kept fully informed throughout the complaint handling process.
- 1.6 Where complaints are raised about more than one service area we will ensure a single co-ordinated response is made.

- 1.7 If a customer expresses dissatisfaction but does not want to complain, they will be encouraged to submit their complaint in line with the Complaints Handling Procedure. This will ensure feedback on the outcome of the complaint is communicated to the customer.
- 1.8 If a customer insists they do not wish to complain the issue will be recorded as an anonymous complaint to ensure completeness of our complaints data and allow us to fully consider the matter. This will also provide us with an accurate position regarding complaints for analysis and learning purposes.
- 1.9 If a customer is unable or reluctant to make a complaint, we will accept complaints brought by third parties as long as the customer has given their personal consent.
- 1.10 We will only normally consider complaints that are raised within six months of when the customer first became aware of the issue about which they are making a complaint. This timeframe also applies where a customer wishes to escalate their complaint because they are unhappy with the response to their initial complaint.
- 1.11 This Policy reflects the Scottish Public Services Ombudsman (SPSO) Model Complaint Handling Procedure for Registered Social Landlords (RSLs) which we have fully adopted.
- 1.12 However, as we provide a Money & Home Energy Advice Service which includes the regulated activities of Debt Adjusting and Debt Counselling, this Policy is aligned with the Financial Conduct Authority (FCA) Guidance 'DISP1 – Treating Complaints Fairly'. Complaints about debt advice will be dealt with in line with the procedures set out in the Guidance.

2.0 **DEFINITIONS**

- 2.1 Our definition of a complaint is: 'Any expression of dissatisfaction by one or more members of the public about our action or lack of action, or about the standard of service provided by or on behalf of us'.
- 2.2 A comment may be positive or negative and will often be expressed as an opinion or suggestion, for example "That should not have happened" or "You need to improve...." or "All of your tenants should be told about this excellent service"
- 2,3 The FCA describes a complaint as 'any oral or written expression of dissatisfaction, whether justified or not from, or on behalf of a person

about the provision of, or failure to provide a financial service, claims management service or a redress determination which:

- a) alleges that the complainant has suffered (or may suffer) financial loss, material distress or material inconvenience; and
- b) Relates to an activity of that respondent or of any other respondent, with whom that respondent has some connection in marketing or providing financial services which comes under the jurisdiction of the Financial Ombudsman Service'.
- 2.43 A "Significant Performance Failure" is defined by the Scottish Housing Regulator (SHR) as something that a landlord does or fails to do that puts the interests of its tenants at risk, and which the landlord has not resolved. The issue may be raised with us in the first instance and referred to the SHR only if we fail to deal with the matter effectively.

3.0 LEGAL AND REGULATORY FRAMEWORK

- 3.1 The Public Services Reform (Scotland) Act 2010 places a statutory duty on Registered Social Landlords to comply with the SPSO Model Complaint Handling Procedure published for the housing sector.
- 3.2 The Scottish Housing Regulator will monitor compliance with the model Complaint Handling Procedure.
- 3.3 The Financial Conduct Authority will monitor compliance in relation to complaints about our Money & Home Energy Service, through the submission of annual reports.
- 3.43 The Scottish Social Housing Charter came into effect on 1st April 2012 and places a duty upon RSLs to make it easy for tenants and other customers to make complaints and provide feedback on services, using that information to improve services and performance, and letting people know what they have done in response to complaints and feedback.
- 3.54 This policy complies with the requirements of the Equalities Act 2010 and seeks not to consciously or unconsciously discriminate or to have an adverse effect upon any of the nine protected characteristic groups outlined in the Act.
- 3.65 This Policy also complies with the requirements of the Data Protection Act 2018.

4.0 COMMENTS

- 4.1 Negative comments will usually be recorded as complaints and dealt with through our Complaints Handling Process.
- 4.2 Positive comments and suggestions from tenants, applicants and other service users are also welcomed, as they can provide informal feedback on the standards we achieve, provide opportunities to improve existing services, and may also provide 'early warning' of issues that could evolve into complaints, allowing us to take early action.
- 4.3 We will record positive comments in the same way as negative comments and complaints and include them in our monitoring and reporting systems to ensure that all customer feedback is considered and acted upon where appropriate.

5.0 MONITORING AND REPORTING

- 5.1 We will monitor how comments and complaints are handled, how well we meet our target timescales and what changes we have made in response to complaints. Regular reports will be considered by our Business Management Team and Audit & Assurance Committee.
- 5.2 We will publish the outcome of complaints and the actions we have taken in response, on elha.com every quarter and annually in our performance report to tenants. The number of complaints and praise received is also reported on our P365 microsite on elha.com.
- 5.3 We will also collate responses received from the surveys or_comment cards we send out with our E-news or newsletters and provide feedback to tenants on these comments where appropriate.

6.0 POLICY REVIEW

6.1 The Chief Executive will ensure that this policy is reviewed by the Management Committee every five years or following a review and amendments by SPSO to the model Complaint Handling Procedure.

Date Issued	September 2022
Department	Housing
Title	Quality Assurance Framework (Money & Home Energy Advice Service)
Objective	To ensure the provision of high quality Debt Advice through standards, supervision and continuous monitoring
Responsible	Director of Housing
Next Review Date	September 2027

1.0 Introduction

- 1.1 Quality Assurance is the process of verifying whether a product or service meets the required specifications and customer experience. It is not an additional activity, but the most important part of all our roles because we are responsible for the quality of what we deliver. It helps us to take responsibility for our actions as Leaders, Managers and Advisers and assists our Advisers to carry out their roles safely and effectively.
- 1.2 Quality Assurance activities provide assurance that our customers are getting the right advice, at the right time, in a way that meets their needs. It improves outcomes for customers, identifies developments of individuals and helps to identify training.
- 1.3 This Quality Assurance Framework sets out the approach that East Lothian Housing Association will take to ensure that the Money & Home Energy Advice Service delivers what our customers need. It can be seen as a set of processes which are put in place with the goal of meeting our charitable objectives and our vision of Healthy Happy Homes.
- 1.4 Our tenants are facing challenging times due to increasing living costs, especially fuel costs. A key priority for the Association is that our customers can be confident that the advice and support they receive from us will be of a high quality and that they will be treated with dignity and respect.
- 1.5 We have a Money & Home Energy Advice Policy which sets out the parameters of the Service, the aims and objectives and our expectations of staff involved in providing the Service. This is supported by staff procedures. We also have a Vulnerable Customer Policy which pays due regard to treating vulnerable customers fairly, taking extra precautions when delivering services to ensure that vulnerable customers are not disadvantaged in anyway.

2.0 Framework Aims

- 2.1 We believe that it is important that those customers who seek Debt Advice have the assurance that the service they receive from us, and the Adviser they engage with, operates to the highest standard.
- 2.2 This Framework therefore aims to ensure:
 - Practice is of a high quality, effective, accountable and evidence based
 - Customers' needs are understood and met
 - Strong governance arrangements are in place
 - The Service is continuously reviewed, adapting and learning where required
 - Compliance with the National Occupational Standards (NOS) which are the minimum basis for training and/or qualifications content for debt activities.

3.0 Key Principles

- 3.1 The following key principles are essential to all Quality Assurance measures:
 - Culture a positive culture towards Quality Assurance that is 'blame free' recognising the importance of learning from mistakes in order to improve the experience for the person and sharing information where things have gone well to create a learning organisation
 - Commitment ensure Quality Assurance activities are an accepted and important part of day to day business and are given due prominence at all levels of the organisation with a commitment to regular activity to maintain momentum
 - Clarity ensure everyone understands their role and responsibilities in relation to Quality Assurance throughout the organisation
 - Consistent ensure that the Quality Assurance activity follows an annual programme with a schedule of activities that provides information to support the Associations priorities

Agenda Item 4.4 Appendix 1

 Continuous - ensure systems are in place to share learning from Quality Assurance activity, continually improving the practice of individuals and the Service as a whole, actively identifying areas for development, putting actions in place to make improvements which are then reviewed and evaluated

4.0 Standards, Staff Training & Resources

4.1 We comply with the National Occupational Standards however the Association currently provides a Type I Housing Information & Advice Service in accordance with the Scottish National Standards for Information and Advice Providers (SNSIAP). SNSIAP is a Quality Assurance Framework for agencies involved in the provision of information and advice and incorporates organisation standards, performance indicators, competencies for advisers and good practice guidance. At the time of writing this document, the Association is committed to working towards achieving the Standards at Types I, II (Casework) and III (Representation) in Money and Welfare Benefits Advice. Links to the Guidance and Standards required can be found here:

https://www.ukstandards.org.uk/

https://www.slab.org.uk/app/uploads/2019/06/SNSIAPguidance.pdf

- 4.2 Appropriate staff will ensure they are familiar with, and actively promote the National Occupational Standards. They will also ensure that they are fully conversant with this Quality Assurance Framework and all relevant policies and procedures, for example (the list is not exhaustive):
 - Money & Home Energy Advice
 - Vulnerable Customers
 - Domestic Abuse
 - Complaints
 - Rent Arrears
 - Tenancy Sustainment
 - Tenant Participation
 - Equalities & Diversity
 - Communication

- 4.3 Our Advisers will have the appropriate qualifications to carry out Debt Advice and will carry out regular refresher training to ensure this remains up to date.
- 4.4 The Housing Manager, with our Advisers, will identify and agree training needs at the annual appraisal and through supervision meetings. In addition, the Housing Manager will circulate details of courses and agree their suitability with our Advisers. Any external training will be from accredited agencies wherever possible and relevant.
- 4.6 Our Advisers will be registered with Money Advice Scotland, with access to free online support at all times. Technical support for highly complex cases will be accessed via external agencies such as the Child Poverty Action Group, Money Advice Scotland, Changeworks and Energy Advice Scotland.
- 4.7 The Adviser will also participate in external forums such as the East Lothian Financial Inclusion Network and The SHN Welfare Benefits Forum to learn and share good practice.
- 4.8 All case information will be held in a secure database, which is password protected in a very limited access area of our IT system. Our Advisers will follow all relevant protocols to ensure data is protected.

5.0 Quality Assurance Activity

- 5.1 It should be recognised that Quality Assurance activities are not just about completing audits, but the continuous collection of intelligence and data that informs the Association about the quality of practice, the impact it has on the customer and effectiveness of processes and policies. Audits add additional layer to the process and allows us to be assured and provide confidence to the Management Committee.
- 5.2 The Housing Manager will monitor the competence of our Adviser's casework by auditing 10% of cases each month, by random selection, to determine if our Advisers are competent in maintaining the required service standards, is working with the prescribed procedures and not experiencing a workload too great or complex for their role. The Housing Manager will evidence that a review has been completed and include any recommendations they feel are appropriate to progressing the case.
- 5.3 Concerns about competence or compliance will be dealt with as a performance issue, otherwise, lessons learned will be discussed to assess the bearing these might have on future service delivery.

5.4 The Housing Manager will contact the customer immediately if it is established that incorrect advice has been provided.

6.0 Customer Feedback

- 6.1 Customer feedback will be sought from all service users as well as from those that do not engage with the Service following referral. The outcomes of such will be used to shape service delivery. For those that do not engage, we will seek to find out why, and whether there are any barriers to engaging that we need to address.
- 6.2 We will make it easy for customers to make a comment or complaint and ensure that effective records enable accurate and meaningful monitoring and reporting of outcomes, particularly where a comment or complaint has led to a change in a process or policy.
- 6.3 Quarterly analysis of complaints (including case numbers, trend analysis and case studies), will be considered by the Business Management Team. The results will also be reported to the Audit & Assurance Committee and publicised on elha.com. An annual report will also be submitted to the Financial Conduct Authority.

7.0 Review

- 7.1 The Housing Manager will review the results of satisfaction surveys on a quarterly basis, though any negative feedback will be considered at the point of receipt and discussed with the Adviser. The results from the satisfaction surveys will be reported annually to the Audit & Assurance Committee.
- 7.2 The Housing Manager will provide the Director of Housing with a quarterly report which will include the outcome of feedback and a file audit activity report on findings and any action that has been required.
- 7.3 An Annual Service Review will be carried out by the Director of Housing and will include consideration of data and feedback collected over the year to inform discussion about future provision. A summary of this, and the previous years' outcomes, will be reported to the Audit & Assurance Committee.

8.0 Review of Framework

8.1 The Director of Housing is responsible for reviewing this Framework every five years, or sooner if events, including customer feedback, require an earlier revision. Any changes will be presented to the Management Committee for approval.

Quality Assurance Framework Money & Home Energy Advice Service

Report by Karen Barry, Director of Housing – for approval

1.0 Introduction

The Association registered with the Financial Conduct Authority to provide the regulated activities of Debt Adjusting and Debt Counselling. Doing so, required a Quality Assurance Framework to be developed – see **Appendix 1** attached to this report.

2.0 Quality Assurance Framework

The Quality Assurance Framework sets out the approach the Association will take to ensure a high quality, effective and accountable Money & Home Energy Advice Service that delivers what customers need, at the right time. It ensures strong governance arrangements are in place and that the Service is continuously reviewed, adapting and learning where required.

Recommendation

The Management Committee is asked to approve the Quality Assurance Framework

Vulnerable Customer Policy

Report by Karen Barry, Director of Housing – for approval

1.0 Introduction

The Association has registered with the Financial Conduct Authority to provide the regulated activities of Debt Adjusting and Debt Counselling. Doing so, required a Vulnerable Customer Policy to be developed.

2.0 Vulnerable Customer Policy

The Financial Conduct Authority defines a vulnerable customer as 'someone, who due to their circumstances, is especially susceptible to harm particularly when a firm is not acting with appropriate levels of care'.

The **Policy Document** attached to this report details how the Association will be proactive in identifying vulnerable customers, and how it will take extra precautions when delivering the Money & Home Energy Advice Service to ensure vulnerable customers are treated fairly and are not disadvantaged in any way.

Recommendation

The Management Committee is asked to approve the Vulnerable Customer Policy

ELHA POLICY

Date Issued	September 2022
Department	Housing
Title	Vulnerable Customer Policy (Money and Home Energy Advice)
Objective	To ensure the fair treatment of vulnerable customers
Responsible	Director of Housing
	0 1 1 0007

Next Review Date September 2027

1.0 Introduction

- 1.1 We recognise that all our customers can be potentially vulnerable. There is a misconception that vulnerability is about older people or those suffering from diagnosed illnesses. The reality is that most people at some stage in their lives are vulnerable.
- 1.2 The Financial Conduct Authority (FCA) defines a vulnerable customer as:

'Someone who, due to their circumstances, is especially susceptible to harm particularly when a firm is not acting with appropriate levels of care.'

- 1.3 We want our vulnerable customers to experience outcomes as good as those for other customers, and we will treat everyone fairly when delivering our services.
- 1.4 We also want our customers to take responsibility for their choices and decisions, however we know that characteristics of vulnerability may result in customers having additional or different needs, which may limit their ability or willingness to make decisions or choices, or to best represent their own interests.

2.0 Policy Aims

- 2.1 We aim to:
 - Pay due regard to the interests of our customers and vulnerable customers, and treat them fairly
 - Be proactive in identifying vulnerable customers
 - Take extra precautions when delivering our services to ensure that vulnerable customers are not disadvantaged in any way

3.0 Legal & Regulatory & Framework

- 3.1 This Policy complies with:
 - The FCA 'Guidance for Firms on the Fair Treatment of Vulnerable Customers' issued under Section 139a of the Financial Services and Markets Act 2000
 - The requirements of the Equality Act 2010 and seeks not to consciously or unconsciously discriminate or to have an adverse effect upon any of the nine protected characteristic groups outlined in the Act
 - The Data Protection Act 2018
 - The Scottish Housing Regulator's Social Housing Charter Indicators which support the requirements of the Scottish Social Housing Charter, and in particular, the following outcomes:

Equalities	Social landlords perform all aspects of their housing services so that every tenant and other customer has their individual needs recognised, is treated fairly and with respect, and receives fair access to housing and housing services
Communication	Social landlords manage their businesses so that tenants and other customers find it easy to communicate with their landlord and get the information they need about their landlord, how and why it makes decisions and the services it provides
Tenancy sustainment	Social landlords ensure that tenants get the information they need on how to obtain support to remain in their home; and ensure suitable support is available, including services provided directly by the landlord and by other organisations
Tenant Participation	Social landlords manage their business so that tenants and other customers find it easy to participate and influence their landlord's decisions at a level they feel comfortable with

- 3.2 We also have separate policies which relate to vulnerable customers and their needs:
 - Money & Home Energy Advice Policy
 - Tenancy Sustainment Policy
 - Domestic Abuse Policy
 - Rent Arrears Policy
 - Equalities and Diversity Policy

- Customer Care Policy
- Communication Policy
- Tenant Participation Policy

4.0 Vulnerability Groups

- 4.1 Though we recognise that certain groups of customers may be vulnerable, for example, the elderly or young people (perhaps considered inexperienced), we are aware that there are many situations and circumstances which may lead any customer to become vulnerable. These groups may include, but are not restricted to customers with:
 - Communication difficulties, for example, English not being their first language or dyslexia
 - A reduction in physical or mental capacity
 - Physical or mental illness, severe or long term
 - A sudden diagnosis of serious illness to the customer or close family member
 - Circumstances such as financial difficulties, bereavement, caring responsibilities, or redundancy

5.0 Identifying a Vulnerable Customer

- 5.1 We will ensure that our staff are trained to identify vulnerable customers, and to provide the additional level of assistance required to achieve a good outcome, however it is not always possible to recognise these characteristics. Risk factors that can help identify a vulnerable customer include four key drivers: health, life events, resilience, and capability. See Appendix 1 for more information.
- 5.2 We will be proactive and aim to identify any vulnerabilities prior to, and at the start of a tenancy, and through regular contact throughout the duration tenancy.
- 5.3 We will keep a record of vulnerability to ensure that the Service provided is tailored to the needs of the customer and ensure that awareness of this extends to all appropriate staff within the Association. It is important that we maintain a consistent level of service, and that a vulnerable customer receives adequate care irrespective of which staff member they liaise with. Any such note on our system will describe the reasons for the assessment and be respectful.

6.0 Dealing with a Vulnerable Customer

- 6.1 As soon we think we may be engaging with a vulnerable customer we will take care to adhere to the requirements set out in this policy. Staff will follow the guidelines set out at Appendix 1.
- 6.2 Though we refer to vulnerable customers throughout this Policy we will not use this label in our interactions with customers.
- 6.3 We will ensure that our service is accessible and will always adapt how we deliver it to meet the needs of the customer for example:
 - Advice is available through our office, via elha.com, through home visits or via the Near Me app
 - We will provide information in Plain English and large print if required
 - We have a Hearing Loop in our offices for those with hearing difficulties
 - We are members of Happy to Translate and subscribe to Language Line, which enables us to access instant translation services from any telephone, 24 hours a day
 - On elha.com, we subscribe to Browsealoud for those who are visually impaired or have literacy problems, provide a text re-size function for those with vision impairment, subscribe to Google Translate for translations of text and operate Live Person, where customers can 'chat' with staff online
 - For people who may not be able to manage their tenancy or communicate effectively online, we offer a Friends & Family Service, which can be enabled by default where a Power of Attorney is in place, or on request from a tenant. This enables a friend or family member to be given a second login to be able to help to manage the tenant's My Home account on their behalf. We maintain a full and robust audit trail of all transactions processed through this service
 - Offer information about advocacy and specialist support services in East Lothian and, if appropriate, with the agreement of the customer, make a referral to an organisation for third part representation
- 6.4 There may be times when our staff come across challenging situations, and we will offer practical and emotional support to staff where appropriate.

7.0 Monitoring & Evaluation

7.1 We carry out surveys to measure satisfaction with the Money & Home Energy Advice Service provided and will seek to understand the customers experience. We will continually review these and will provide an annual report on satisfaction levels to our Audit & Assurance Committee, which is responsible for the monitoring of the Money & Home Energy Advice Service.

Agenda Item 4.5 Policy Document

7.2 We monitor complaints in line with the Scottish Public Services Ombudsman's Model Complaints Procedure and our Complaints Policy is aligned with the requirements of the Financial Services Ombudsman. Quarterly and annual reports are considered by our Business Management Team, and submitted to our Audit & Assurance Committee for information. All reports are published on elha.com.

8.0 Policy Review

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8.1 The Director of Housing is responsible for reviewing this policy every five years, or sooner if events, including customer feedback, require an earlier revision. Any changes recommended will be submitted to the Management Committee for approval.

Appendix 1

1.0 Characteristics of Vulnerability

Not all customers with characteristics of vulnerability will be vulnerable, but they may be more likely to have additional needs which, if not met by the Association, could limit their ability to make decisions or to represent their own interests,

Characteristics associated with the four drivers of vulnerability:

Health	Life Events	Resilience	Capability
Physical disability	Retirement	Inadequate (outgoings exceed income) or erratic income	Low knowledge or confidence in managing finances
Severe or long term illness	Bereavement	Over-indebtedness	Poor literacy or numeracy skills
Hearing or visual Impairment	Income shock	Low savings	Poor English language skills
Mental/health condition or disability	Relationship breakdown	Low emotional resilience	Poor or non- existent digital skills
Addiction	Domestic abuse		Learning difficulties
Low mental capacity or cognitive disability	Caring responsibilities		No or low access to help or support
	Other circumstances that affect people's experience of financial services e.g. leaving care, migration or seeking asylum, human trafficking or modern slavery, convictions		

2.0 Guidelines when dealing with vulnerable customers

As soon as think we may be engaging with a vulnerable customer, staff should take care to adhere to the requirements set out in this policy and must remain aware of the following guidelines:

- Remain patient and empathetic; do not rush the customer, interrupt or appear impatient
- Allow customers to arrive at their own decisions and process the information sufficiently
- Ensure the customer is able to hear and understand what you are telling them, ask them to explain their understanding of what you are telling them, and include questions as frequently as possible to ensure they are aware of and understand what is being discussed
- Allow the customer to explain thoroughly; do not assume you already know what their requirements or needs are, and do not finish off their sentences which often implies you are rushing them to progress the conversation
- Listen carefully to the customer and remain conscious of any absence of understanding, hints at unawareness, or forgetfulness of topics already discussed
- Clarify that the customer is comfortable with the standard and method of communication and offer to provide details in an alternative format such as via email or post for clarity
- Before acting, ask the customer if there is anybody else they need to speak to about any decision