## Appendix 1: SD&P HA&I Delivery Plan 2021/22 Year-end Progress



2. Supported individuals, families and carers living independently and with dignity



More affordable and suitable housing options

Danfarra and Indicators	2020/21	2021/22						0
Performance Indicator	Value	Status Value T		Target	Short Trend	Long Trend	Note	Owner
% of council dwellings that meet the Scottish Housing Quality Standard	79.18%		18.17%	86.15%	•	•	Target Not Met An increase in SHQS failures due to the Electrical Installation Condition Reports (EICRs) programme not being completed as planned by the end of March 2022. The programme has been delayed due to COVID impact on internal and external resource availability to deliver the programme as planned. We have since secured additional resource to deliver the programme as early as possible. To ensure the programme continues to accelerate all our housing stock to full compliance in terms of EICRs we are undertaking proactive communications with tenants to minimise any access issues.	Alan Young
Percentage of council houses that are energy efficient	82.84%		83.7%	100%	•	•	Target Not Met  Work continues incrementally each year to increase the number of homes meeting the energy efficiency standard for social housing EESSH. Compliance continues a positive trend and 22-23 capital programme will continue to improve those homes not meeting the standard.	Alan Young

Performance Indicator	2020/21	2021/22						Owner
	Value	Status	Value	Target	Short Trend	Long Trend	Note	Owner

Action	Status	Progress	Due Date	Note	Owner
Ensure the Council's Housing stock progresses towards the achievement of the energy efficiency standard for social housing.		100%	31-Mar-2022	Whilst work has progressed well and monthly completions increasing towards targets. Programme has been impacted by effects of COVID on access, labour and materials availability.	Alan Young
Deliver the HRA Capital Investment programme for 2021/22		100%	31-Mar-2022	Main work streams for 21/22 progressed well considering impact and restrictions of COVID.	Alan Young
Ensure the Council's Housing stock maintains compliance with the Scottish Housing Quality Standard and reduce the number of properties held in abeyance.		100%	31-Mar-2022	Main work streams progressed well, however, issues with adequate resources in UPVC, Kitchens, Bathrooms and SNA although this has been improving throughout the year. Building Services are the main delivery team and have procured additional contractor support to help delivery of programmes noted above. It is recognised that compliance level is not where we want it to be, in the main due to low level of EICR compliance (see SHQS PI above) compliance level will increase as EICR's are completed and progress continues with EESSH work. Officers continue to engage with owners to encourage participation in door entry projects to incrementally reduce those properties in abeyance.	Alan Young

Risk	Description	Current Assessment	Target Assessment	Date Reviewed	Note	Owner
Failure to meet citizen expectation and service standards	Risk of citizen dissatisfaction due to us not doing what we say we will when we say we will or not completing required works first time.	Impact	Impact	31-Mar-2022	Customer service improvement plan actions have been completed. Customer satisfaction increased in 2021 / 2022 to 87.7% from 3162 surveys completed.  No change to risk matrix at year end	Martin Feeney
Failure to deliver medical adaptations in agreed target timescales	This is monitored to ensure target timescale of 60 days average for housing medical adaptations is adhered to ensure satisfaction with the service and support those in need of this service.	Impact	Impact	31-Mar-2022	Good in-year progress and cleared many legacy applications, however overall average days number will still be high due to older jobs completing.  No change to risk matrix.	Alan Young



5. Efficient and effective frontline services that improve the everyday lives of residents



A continuously improving Council delivering best value

Dougla was a sea Tandian kawa	2020/21	2021/22						Owner
Performance Indicator	Value	Status	Value	Target	Short Trend	Long Trend	Note	
Percentage of repairs appointments kept	94.87%		89.72%	93%	•	•	Marginally missed target. During 2021-22 28,730 appointments were made with 25,807 within their appointment slot. Resource shortages due to Covid contributed to appointment failures.	Martin Feeney
% of properties that require a gas safety record which had a gas check and record completed by the anniversary date	97.7%	<b>&gt;</b>	100%	100%	•	•	Target achieved.	Martin Feeney
Percentage of reactive repairs carried out completed right first time	89.76%		86.49%	90%	₽	•	Marginally missed target Right First Time target due to ongoing issues from covid restrictions, backlog of repairs and resourcing issues.	Martin Feeney
Average length of time taken to complete emergency repairs	6.14		5.81	4	•	•	Despite missing target an improvement has been made compared to the previous year. There were 5959 emergency repairs completed in 2021-22. Performance impacted by resource issues including high levels of absence particularly due to covid and isolation requirements. We continually work with services to ensure all emergency repairs are correctly categorised and resources directed correctly.	Martin Feeney

Performance Indicator	2020/21	2021/22	021/22						
	Value	Status	Value	Target	Short Trend	Long Trend	Note	Owner	
Average time taken to complete non- emergency repairs	6.76		10.16	7	•	•	As expected, target not met due to the volume of non-essential repairs reported which could not be complete whilst Covid restrictions were in place between March 2020 and 26 April 2021. When restrictions lifted we prioritised those backlog over new non urgent repairs reported in 2021-22. This resulted in average days to complete repairs increasing compared to previous years.	Martin Feeney	

Action	Status	Progress	Due Date	Note	Owner
Successfully implement the IHMS into service delivery across all building services teams		100%	31-Mar-2022	Building Services full IHMS support team in place with IHMS Change Officer, Senior Job Scheduling Planner and all Job Scheduling Planner posts now filled. This is providing the resource and support to deliver improvements in the use of the QL system. Improvement initiatives have been successfully implemented as planned in 2021/22, a new action will be included in the 2022/23 delivery plan to monitor the improvements already in place and those still required to be delivered in 2022/23.	Martin Feeney
Introduce project management approach to ensure continued implementation of the building services improvement plan (Phase 1)		100%	31-Mar-2022	Phase 1 of the revised structure is being implemented and satisfactory progress is being made. The overall action will run into 2022/23 to allow for recruitment of all posts included in phase 1 and a new action will be introduced to monitor progress and deliver associated actions in the 2022/23 plan.	Martin Feeney
Review, develop and test new financial costing / charging model for Building Services work		100%	31-Mar-2022	The new recharge model has been introduced from April.  Development, performance and progress will continue to be monitored and reviewed on a monthly basis.	Martin Feeney
Develop the plan to address the outstanding council house repairs (due to COVID-19), Inform tenants and undertake repairs within agreed timescales.		100%	31-Mar-2022	Action completed for outstanding repairs reported during in lockdown periods. Additional system functionality "Locator plus" application is now live. The level of repair orders closed due to no access reduced in quarter 4 compared to quarter 3 and the right first time repair performance also improved although target was not achieved. Additional resource have been assigned to ensure timescales are improved on enquiries and complaints and the number of outstanding complaints did reduce significantly.	Martin Feeney

Risk	Description	Current Assessment	Target Assessment	Date Reviewed	Note	Owner
Failure to implement improvement plan to ensure Building Services are fit for purpose	The implementation of the improvement plan will enhance the effectiveness, efficiency and best value of Building Services	Impact	Impact	31-Mar-2022	Good progress made in 2021/2022 with a number of key actions within the improvement plan completed.  No change to risk matrix at year end.	Martin Feeney
Failure to implement IHMS system across building services	The effective implementation of the IHMS system will delivery efficiency, improve case tracking, capture customer satisfaction and improve service delivery.	Impact	Impact	31-Mar-2022	All vacancies have been filled including IHMS and Change Officer, Senior Planner and vacant Job Scheduling Planner posts. A comprehensive improvement action plan has been developed with various workgroups setup to implement improvement required.  No change to risk matrix for year end.	Martin Feeney
Failure to demonstrate robust financial and productivity systems within building services	The development of new costing model will mitigate against this financial risk. Process change and review will improve the system for charging of works	Impact	Impact	31-Mar-2022	Regular finance meetings including Chief Officers from SD&P, H&E and Resources (Chief Finance Officer) supporting the service to achieve robust financial management is in place. Regular focused meetings in place to discuss and monitor improvements in data, systems, processes, workforce and productivity. A new financial charging model aims to provide increased visibility and streamline processes.  Current risk matrix amended with likelihood reducing from 3 to 2 and no change to impact.	Martin Feeney

Action Status						
	Overdue					
	Completed					

PI Status		Long Term Trends	Short Term Trends		
Significantly Missed Target		Improving		Improving	
Narrowly Missed Target	-	No Change		No Change	
Met or Exceeded Target	-	Getting Worse	4	Getting Worse	

Risk Status							
Alert							
High Risk							
Warning							
ок							

## Appendix 2: Quality Standards - Year-end Progress



SD&P HA&I Quality Standards

Performance Indicator	2020/21	0/21 2021/22						
	Value	Status	Value	Target	Short Trend	Long Trend	Note	Owner
Annual review and assessment of ISO 9001:2015 successfully completed ensuring continuing suitability and conformance with no major non-conformance issues identified.	100%		0%	100%	•	•	We were unable to maintain the ISO accreditation in 2021/2022 due to covid. We will reapply for the accreditation at appropriate date to be confirmed.	Martin Feeney

Performance Indicator	2020/21	1 2021/22							
Va		Status	Value	Target	Short Trend	Long Trend	Note	Owner	
Average time taken to complete medical adaptations	75.7 123.25		87.4 107.84	60	•	•	Target not met.  Performance in 2021/22 continued to be affected by the previous restrictions in activity due to Covid-19 and the backlog that this created.  Activity in terms of carrying out medical adaptations has now resumed. The number of medical adaptations completed increased from 119 in 2020/21, to 313 in 2021/22, with the number of households waiting for adaptations to be completed reducing from 134 at the end of 2020/21, to 49 at the end of 2021/22.  However, completing a large number of legacy applications which had been on the list for some time, affected the overall average days taken to complete medical adaptations which was 107.84 days. This remains above our target but was an improvement from 123.25 days in 2020/21.  Both internal and external resources are being utilised to increase completions and further improve performance during 2022/23.	Alan Young	

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PI Status	Long Term Trends	II Short Term Trends

Significantly Missed Target	1	Improving	4	Improving
Narrowly Missed Target	-	No Change		No Change
Met or Exceeded Target		Getting Worse	4	Getting Worse