TRUST HOUSING ASSOCIATION LIMITED

Audit and Performance Committee Meeting
held on the 27 May 2026 at Norton House Hotel, Newbridge.

Present at meeting:

Board Members	**Officers in Attendance**
Ali Ross	Jackie McIntosh, CEO
Ian Mitchelmore	Zoe Purdie, Director of Finance & People
David Knight	Neil Ferguson, Director of Business Development & Digital
Mary Niven	Ian Davie, Director of Assets & Sustainability
Graham Curran	Jenny Wallace, Director of Customer Experience
Laura Bornatici	Annette Brown (Governance & Business Support Manager, Minute Taker)
	Auditors in Attendance
	Martin Ritchie (TIAA) via Teams

ALI ROSS IN THE CHAIR

Agenda Item	**Detail**
1.	**Chair's Opening Remarks**
1.1	Ali Ross, Chair, of the Audit & Performance Committee, welcomed committee members, the Executive Team and Martin Ritchie from TIAA to the meeting.
1.2	The committee agreed to the meeting being transcribed in addition to a formal minute being taken.
2.	**Apologies & Declarations of Interest**
2.1	Apologies were noted for Steve McGowan.
2.2	There were no declarations of interest recorded.
3.	**Previous Minute of the Audit and Performance Committee Meeting of 3 February 2026.**
3.1	The following amendments were noted in relation to the minutes from the 3 February 2026. • Item 6 – title and decision should refer to Q3 not Q2 • Item 7 – decision should refer to audit plan for 26/27 not audit report for 26/27 • Item 14 – date of next meeting should be 27 May Norton House, not 2nd Feb New Mart Road.
3.2	Subject to the above amendments the minutes from the Audit & Performance Committee held on the 3 February 2026 were proposed by Ian Mitchelmore and seconded by David Knight.

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3.3 3.4	**Decision: The minutes were approved as a true and accurate record of the meeting.** **Action: Company Secretary to update minutes from 3 February 2026 as per the amendments above.**
4. 4.1	**Action Tracker** The committee reviewed the action tracker and noted that business continuity scenario session for board members will now take place in October as part of the board away days.
5. 5.1	**Matters Arising** There were no matters arising from the previous minutes.
6. 6.1 6.2 6.3 6.4 6.5 6.6	**Q4 – 2025/26 Performance Report** Neil Ferguson, Director of Business Development & Digital, presented the Q4 Performance Report to the committee noting good performance across many areas, including – emergency repairs, arrears, medical adaptations, valid EPC certificates, employee absence rates and average days to let. Ali Ross, Chair, echoed that the report demonstrated really good performance across the organisation with more green indicators than normal. The committee discussed the following exceptions: **Average Days to Complete Non-Emergency Repairs**: Slight decline compared to the previous quarter. However, still performing well above Scottish averages, but slightly short of internal targets. It was noted that there are no associated increases in complaints and this is set against an exceptional performance for emergency repairs and right first time. **% of properties with 2 valid EICR certificates in the past 5 years.** The organisation has now met and surpassed the 60% valid EICR target, which had been a focus across previous quarters. This was described as a major achievement, particularly because it had been regularly discussed and tracked over multiple meetings. **Damp & Mould Inspections** Average completion times have increased, but it was noted that this is due to a change in reporting methods implemented after Trust's 25/26 targets were set, which now includes works order completion, not just inspection. In terms of benchmarking where Trust are in relation to other RSL's this remains unclear across the sector as the data is still emerging. The committee discussed the issues that tend to cause damp and mould cases and the total number of damp and mould reports raised (125) versus

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	how many are found not to have any damp and mould or condensation related issues (15).
6.7	A committee member proposed tracking the total number of days it takes from the ticket being raised to completion if follow up inspections were required, as this would help to track Trust's performance and the contractor's performance. The Executive Team advised that this data should be readily available.
6.8	**Rent Loss % due to empty properties** Rent loss has increased slightly in Q4 but remains within target. The main drivers of the increase include a higher number of void properties being managed in the quarter and delays in nominations from local authorities, particularly at West Lodge Gardens, linked to reduced capacity/resources at the council. Despite these pressures, the team maintain a strong overall performance achieving very good turnaround times.
6.9	**Lets v's Terminations** There continues to be a high number of tenancy terminations, mainly due to deaths and later living customers moving into long-term care. All of these factors are difficult to predict and create ongoing pressure on void levels. Despite these challenges the team are achieving good turnaround times with the average days to let at less than 7 days. The now permanent voids team is seen as a key contributor to sustained performance in this area.
6.10	**Welfare Benefits Advice Financial Gains** The welfare benefits team have had another strong annual performance delivering £4.3 million in financial gains for customers in the year. This represents an increase of £300k year-on-year, highlighting continued improvement. The committee noted a slight dip in Q4, but this was attributed to the timing of cases and when claims are processed and awarded. The committee commended the small team of 2.5 FTE for delivering consistently.
6.11	**% satisfied with standard of home when moving in** This indicator remains within target but has dropped slightly in Q4. This change is not seen to be a major issue and is being closely monitored.
6.12	**Number of complaints made** Complaints increased by 22 in the quarter, but this is still within the normal range, and there is no evidence of a systemic issue or emerging trend. Overall volumes have historically been relatively low for the size of the organisation. It was noted that there has been a slight shift and there is now a balance between general needs and later living complaints, rather than being dominated by one area.
6.13	**% Stage 2 Complaints Responded to in Full within Timescale** Complaint handling performance remains strong overall with Stage 2 handling slightly down but still above target. The team continue to focus on ensuring that all complaints are logged (to avoid artificially low numbers) and that the transition to a new system (Rubixx) has not adversely affected reporting levels.

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6.14 6.15 6.16 6.17 6.18	Post complaint satisfaction surveys have been introduced and early results show very low satisfaction at approx. 10–15%, reflecting responses mainly from dissatisfied customers. **Gas Safety Certificates Not Completed on Time** A committee member referred to the gas performance indicator and suggested that it be revisited as it seems strange to look at a blank page in a performance report. The Executive Team advised that this measure was required as part of the 'big 7' for the regulator but it could be amended to show the number of certificates **completed on time**, opposed to **not completed** on time. The committee agreed that the indicator be amended to "Gas Safety Certificates Completed on Time" **Action: Executive Team to update gas performance indicator to Gas Safety Certificates Completed on Time.** The committee discussed the mandatory training indicator. The Executive Team explained that this will never be 100% due to employee turnover, bank staff and completion rates. **Decision: The Committee noted the Q4 Performance Pack**
7. 7.1 7.2 7.3 7.4 7.5 7.6	**Internal Audit Update** Zoe Purdie, Director of Finance & People, introduced the Internal Audit update to the committee which covers the follow up report, from TIAA. Zoe advised that there were 14 recommendations. 9 are now complete with 4 outstanding. 3 of the outstanding recommendations are in progress and the remaining 1 is reliant on the implementation of a new finance project. Ali queried the recommendations with a completion date of April 2026 i.e. catering and Care & Support quality assurance. Zoe advised that the completion dates will be updated to more realistic dates. Martin Ritchie (TIAA) advised that the dates included in the follow up report were agreed in February and some may have moved on since then, the purpose of the report is to provide assurance that progress is being made. In terms of Trust in relation to other RSL's, Martin confirmed that Trust is in a very good position. It was noted that the catering completion date in the follow up report should be March 2027. **Action: Director of Finance & People to update the catering recommendation completion date in the TIAA follow up report to March 2027.** The committee noted that TIAA's annual report will be presented to the August Board meeting.

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7.7	The committee asked Martin for his views on any new and emerging risks in the RSL sector. Martin advised that the big risk is AI, which is already on the Trust risk register.
7.8	A committee member referred to the new risk that focuses on new build developments and suggested that it would be helpful to have an audit of Trust's processes. The committee agreed that an internal audit of new builds should be added to the 27/28 audit plan.
7.9	**Action: Director of Finance & People to add an internal audit of new build development processes to the internal audit plan for 2027/28.**
7.10	**Decision: The committee noted the updates.**
7.11	**Martin Ritchie left the meeting**
8.	**Health & Safety Update Q4 2025/26**
8.1	Ian Davie, Director of Assets & Sustainability, presented the Health & Safety report for Q4. The following points were highlighted:
8.2	• 12 reported staff incidents. • 365 tenant accidents, near misses, 17 lower than the same quarter in the previous year.
8.3	The committee noted that a significant proportion of incidents relates to fire-related incidents (e.g. alarms, burns/scalds) and violence and aggression towards employees. The committee discussed the incidents of violence and aggression and acknowledged this as a concern. The Executive Team emphasised that employees are well supported following incidents and explained that sometimes there are limitations in managing customer behaviours.
8.4	The committee discussed the presentation of data in the report suggesting that the inclusion of whole numbers alongside percentages would help provide additional context and 'normalise the data'.
8.5	**Action: Director of Assets & Sustainability to include whole numbers alongside percentages in the H&S report to provide additional context.**
8.6	The committee noted that the business continuity training session will now take place in October and the Fire Risk Assessment (FRA) programme is ongoing, providing assurance on compliance.
8.7	The committee discussed the outstanding actions relating to the November 2025 BCP scenario planning day and in particular the creation of a new appendix with critical contact information and a non server version of the crisis management plan and he cyber incident response procedure. The Executive Team advised that both actions are now complete with the documents now stored on whatsapp groups.
8.8	**The committee noted the report.**

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9.	**Risk Register**
9.1	Zoe Purdie, Director of Finance & People introduced the risk register and explained that the Executive Team and Leadership Team carried out an in depth review resulting in the addition of 4 new risks including: an AI risk, a supplier risk, a new build development risk and an employee relations risk and the proposed removal of 5 risks.
9.2	The committee discussed the risks that had been suggested for removal and the committee agreed to the removal of the first 4 risks but requested that the business continuity risk remain until October, until after the board continuity exercise had taken place.
9.3	As a result, the committee agreed to the addition of the 4 new risks (AI, suppliers, new build developments and employee relations) and the removal of the following 4 risks: 1. Reintroduction of SHAPS DB pension deficit payments – this is now a confirmed reality 2. Overhead cost not representing value for money – this is no longer considered a financial risk. Trust is now delivering a 10% operating margin and can therefore adequately sustain the level of current overhead. 3. Failure to recruit and retain talent – this is no longer an issue for Trust. 4. High prolonged long-term employee absence – Long-term absence has reduced significantly from the Covid position when this risk was added to the register.
9.4	**Decision: The committee agreed to the addition of 4 new risks, the removal of 4 risks and the decision to retain the BCP risk on the risk register until the after the board business continuity session in October.**
9.5	**Decision: The committee agreed to recommend the amendments to the Board for approval.**
9.6	It was noted that the AI risk is a new risk and will evolve over time. Graham Curran agreed to share a paper by Deloitte on AI Governance with committee members as optional reading.
9.7	**Action: Graham Curran to share a Deloitte report on AI Governance with the committee for optional reading.**
9.8	The committee noted one amendment in terms of the date on the new build risk (risk 12) which currently reads July 05 but should read March 2027.
9.9	**Action: Director of Assets & Sustainability to update risk 12 to the correct date of March 2027.**

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9.10	The committee debated the implementation of the Security Operations Centre (SOC), which strengthens cyber monitoring and response capability, and how this impacts the cyber risk score. While the committee agreed that the SOC is a significant mitigation, there was hesitation about reducing the overall cyber risk rating with some having a view that it may be more appropriate to remain a “red” risk regardless of controls in place. Overall, the committee agreed that investment in a SOC improves resilience and response but does not remove the underlying exposure and the risk should remain a red risk. **Decision: The committee agreed that the cyber risk would remain a red risk.**
10. 10.1	**Any Other Business** None
11.	**Date of Next Meeting – Thursday 6 August 2026 (in person, New Mart Road, Edinburgh)**