Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
AN- Assurance and		10111 4				
	g to Annual Assurance Statements and Lec			1		
AN1.4	Development of an annual procedure for self- assurance process – to be updated with quarterly meetings and Working Group member details	SK	07/10/19	Yes	07/10/19	No
AN1.6	Develop format for self-assurance action plan improvements	SK & LL	08/10/19	Yes	08/10/19	No
AN3.8	All relevant quarterly HSSC reports will contain benchmarking information as standard out with standalone benchmarking report	JF/AMacf	13-Dec	Yes	21/01/20	No
AN3.10	Develop a stand-alone Evictions Policy	JF	13-Dec	Yes	21/01/20 Approved	No
AN3.10	Develop a stand-alone Evictions Procedure	JF	13-Dec	Yes	18/02/20	No
AN3.23	Liaison process to be set up with WDC & Blue Triangle to ensure adequate and timely transfer of information (improvement)	AMacf	29-Nov	Yes	24/01/2020	No
AN3.23	CHA to carry out its own 6 monthly H&S inspections at the HMO's. Although no legal requirement to do so, this will bolster our own knowledge and ensure we can be satisfied that 'all is well'	AMacf	29-Nov 29-May	Yes	10/08/20 and 6 monthly thereafter - diarised	No
AN3.24	Include H&S responsibilities included in new HMO lease with WDC	JF	13-Dec	Yes	Jan 20	No
AN4.6	Health and Safety Registers to be completed in full and in a user friendly format	AMacf	10-Dec	No- Partial	Dec-19 (Asbestos register completed). Water management register o/s – scheduled for end May-20, re-	No

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
CH - Each landlord m	ust involve tenants, and where relevant, other s	service users	. in the prepa	ration and	scheduled for end of July 2020, work plan in place to achieve this.	nce
information.	, , , , , , , , , , , , , , , , , , , ,		,		, , , , , , , , , , , , , , , , , , , ,	
CH1.4	To create separate benchmarking reports	SF/SS	28-Feb	Partial	In progress – will commence from Apr-20. Complaints report to MC May- 20	No
CH2.1	To regularly review and agree our approach to tenant scrutiny with tenants. Include as a standard agenda item	SF	22-Oct	Yes	22-Oct	No
CH2.2	Ensure programme in place in advance of new scrutiny year	SF	30-Nov	Yes	12-Dec	No
CH2.2	Ensure programme includes review of previous decisions in relation to scrutiny – what has been adopted	SF	15-Jan	Yes	15-Jan	No
CH2.9	To publish our tenant scrutiny responses	SF	15-Jan	Yes	Tenant Panel agreed on 15/01/20. MC ratified 28/01/20	No
CH3.3 and 4.8	Feedback form will be issued with each charter report and on the website	SF	Oct-19	Yes	25-Oct	No
CH3.2	SHR landlord report on ARC results to be issued to and considered by governing body/committee and any agreed action plan	SK	Oct-19	Yes	29-Oct	No
CH4.6	In regards to Gypsies and traveling community - explain why this part of the charter does not apply to us	SF	Oct-19	Yes	25-Oct – on front page of charter report	No

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
CH4.7	3-monthly review by Senior Staff of Charter report – review of improvements delivered/commitments made and include Feedback from tenants (Charter report content)	SF/SS	Jan-20	Yes	First meeting held in 28-Feb-20 and all areas covered. Meeting and outcomes recorded – SF. Next meeting postponed-CV19. Next scheduled 25- Aug	No
	ust have assurance and evidence that it cons n and review of internal and external policies					king all of its
EH1.1	Information in different formats procedure to	, 			Complete 21-Feb-	
	be updated annually	SF/SS	13-Dec	Yes	20	No
EH2	Systems, forms and reporting mechanisms etc. will be amended before the end of the financial year to include monitoring in line with equalities characteristics as required by the SHR	All	Oct-19	Yes	25-Oct and ongoing	No
- who is on its governing - the date when they fire	ilable, including online, up-to-date details of: ng body rst became a member/office holder mber of the RSL and of the governing body, a					
OC1.4	We will publish information about joining the GB, including the specific skills and knowledge we have identified we need, in advance of our Annual General Meeting (AGM). Will be added to AGM checklist	LL	30-Apr-20	No	Ongoing – will complete after lockdown LL added to AGM checklist for rescheduled date of 17.09.20	No
OC2	We will establish a central location for all job descriptions/roles	SK/LL	13-Dec	Yes	24 Jan-20	No

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
SC1 Comply with and su	ubmit information to us (SHR) in accordance	oo with our o	uidanaa an Na	otifiable av	ionto (NE)	
SG2.9	CHA's procurement practices to be rolled out	se with, our g			Ongoing –	
362.9	to our subsidiary in the upcoming year –	LL	28-Feb-20	No	scheduled for Jun-	No
	Improvement				20 Delayed. Now	
	·				scheduled to be	
					complete by Oct	
					2020	
TS1 - Each landlord must	make information on reporting significant	performance	failures, inclu	ding SHR	leaflet, available to it	s tenants.
TS2.7	Performance comparisons in handling				Due Mar-20 –	
	complaints with that of other landlords	SF	13-Dec	Yes	rescheduled to	No
	reported to MC				submit year-end	
					results to May-20	
					MC. Achieved.	
TS3.4 and 3.5	Tenant Panel has not yet scrutinised				Scheduled 15-Apr	
	complaints handling procedures/performance	SF	30-Apr-20	No	and will be done in	No
	- future topic and/or standard agenda item				line with new SPSO	
					guidance issued in	
					Feb-20 – postponed	
					until after lockdown	
Regulatory Standard 1				_		
	and directs the RSL to achieve good outc					
	s the RSL's strategic direction. It agrees and o	oversees the c	organisation's b	usiness pla	n to achieve its purpos	se and
	nants and other service users.					
1.1.7	Improvement to be discussed in regards to			_	To be rescheduled	
	how tenants are involved in and consulted	SF/SS	Feb-20 -	Partial	Postponed until	No
	about the organisation's strategy and plans		May20		after lockdown	
	for the future					
1.1.7	Include Business Plan feedback form on web	SF/SS	13-Dec	Yes	13-Dec	No
1.1.1	illiciade dusilless Flati leeaback form on web	3F/33	13-Dec	1 68	13-Dec	INU
1.4 All governing body mer	mbers accept collective responsibility for their dec	isions.	1		·	

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
1.4.6	Annual GBM reviews to explicitly include reference to collective responsibility and decision-making. Stand-alone question in appraisal to be added	KT/SK	15-Dec	Yes	02.12.19	No
1.5 All governing body memb	pers and senior officers understand their respective in	roles, and worl	king relationship	s are constru	uctive, professional and	effective.
1.5.3	Draft Induction Policy for MC approval	SK	Oct-19	Yes	29-Oct	No
1.5.4	Induction feedback form to be devised and procedure for ongoing monitoring and support for new members in line with good practice	SK	30-Nov	Yes	21-Nov	No
1.6 Each governing body me ahead of their primary duty to 1.6.4	mber always acts in the best interests of the RSL are the RSL. Development report template will be rolled out across the organisation including subcommittee reporting.	nd its tenants a	and service users	Yes	Jan-20 Normal practice	r other interest No
1.6.8/1.7.3	Background information on candidates for AGM elections to be provided to shareholders in advance of meeting	LL	Jun-20	No	Ongoing – will be organised prior to rescheduled AGM LL added to AGM checklist for rescheduled date of 17.09.20	No
1.7 The RSL maintains its inc subsidiary of another body).	dependence by conducting its affairs without control	, undue refere	nce to or influence	ce by any oth		stituted as the
1.7.3	Induction Policy to be devised	SK	Oct-19	Yes	29-Oct	No

			Target		Date Actioned/	Material
Standard/Section	Improvement	Who	Date	Completed Yes/No	Completed/ Further Info	(Yes/No)
Regulatory Standard 2						
<u> </u>	and accountable for what it does. It understa				nd priorities of its te	enants,
	holders. And its primary focus is the sustai					
	s, service users and other stakeholders informa	ation that meets	s their needs al	bout the RS	L, its services, its per	formance and
its future plans			1			
2.1.4	Finalise Communication Strategy and Action Plan	SF	13-Dec	Yes	Achieved - May-20 MC. Action plan formulated for MC in Aug-20	No
	needs, priorities, views and aspirations of tenants, s	ervice users and	d stakeholders.	The governin	g body takes account o	f this
information in its strategies,						
2.4.2	All survey information to be brought together in one place – communications/surveys	All staff	Dec-19	Yes – folder set up.	Jan-20	No
2.4.9	File note/minute to be created after all tenant/service user involvement	SF/SS	Dec-19	Yes	Fully functional on 28-02-2020	No
3.1 The RSL has effective finensures security of assets, t	urces to ensure its financial well-being, while mancial and treasury management controls and pro- he proper use of public and private funds, and acce	cedures, to achie	eve the right bal	ance betwee		The RSL
3.1.7	Tenant consultation on VFM statement to be organised (tenant conference)	LL	06-Nov	Yes	06-Nov	No
3.1.7	Add VFM question on Rent Policy Review consultation leaflet which goes out to all tenants	JF	02-Dec	No	Direct question omitted in error–full info on VFM included in consultation leaflet/ residents' assoc. consultation and tenant conference as well as TSS. Will be included in rent	No

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
					affordability study programmed for Jun- 20. TSS survey delayed until lockdown lifted to ensure responses offer fair reflection of rents without any negative influence as a result of the pandemic lockdown and associated financial hardships.	
3.1.13	Next review of Treasury Management Policy to include Corporate Social Responsibility/ethical investment statement/policy	LL	05-Nov	Yes	05-Nov	No
3.2 The governing body fully u understands the associated ris	nderstands the implications of the treasury manages	gement strategy	it adopts, ensu	res this is in	the best interests of the	RSL and that it
3.2.5	Reference to maximum borrowing per Model Rules to be included in Loan Portfolio Return/Report to MC	LL	Jun-20	No	Ongoing Omitted in error in report June 2020. An IYR is scheduled to be completed when the portal opens so this will be mentioned in the MC update report	No
	on and complies with any covenants it has agree ion to mitigate and manage them.	d with funders.	The governing b	ody assess	es the risks of these not	being complied
3.5.4	15 minute training slot to be dedicated to quarterly sub-committee meetings	SS	Jan-20	Yes	All S-C's by Mar-20	No

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
					i di dici iiiio	
	es that employee salaries, benefits and its pensionly, but which is affordable and not more than is n			sufficient to e	ensure the appropriate of	quality of staff to
3.6.2	Benchmarking staff costs in year ahead through SHN/SHR/Other Peer Groups	LL	Jan-20	Partial	SHR benchmarking through Budget complete. Others in progress LL looking at benchmarking options – rescheduled for first Qtr. Management accounts end June (FCSSC Sept 2020)	No
3.6.6	Severance Policy to be developed	SK	Oct-19	Yes	25-Oct	No
4.1 The governing body ensure appropriate to its strategic role	s decisions on good quality information and a es it receives good quality information and advice and decisions. The governing body is able to evi	from staff and, v	vhere necessar		ependent advisers, that	
4.1.8	Plan to have more group training sessions within West Dunbartonshire RSLs and mix with other Board members	SK/KT	31-Mar-20	Yes	02.12.19 And ongoing. Faifley HA & DPHA	No
	nges and holds the senior officer to account for th	eir performance	in achieving the	RSL's purp		
4.2.3	Comparisons with Scottish Average and local HA's made via reports to MC and tenants — more benchmarking required via Scottish Housing Network — what is our overall position (upper, mid, lower quartile?)	SS	Feb-20	Partial	Ongoing – local results gathered. BP performance table to 31-Mar will include	No
					benchmarking – May-20 – rescheduled Sep-20 MC approval	

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
4.3 The governing body identi mitigation, internal control and	fies risks that might prevent it from achieving the F audit.	RSL's purpose a	nd has effective	strategies a	and systems for risk mar	nagement and
4.3.2	Annual training session on these SHR reports (thematic studies, intervention reports etc.) to increase GB and staff awareness and improve mitigation strategies	SK	Mar-20 (changed to May)	Partial	Scheduled for May- 20 MC Meeting. SHR information distributed to MC for reference – May 2020	No
4.3.12	Set up/manage a register of where things have gone wrong/things have gone well in past for future reference (register currently in place not maintained)	SK	Feb-20	Yes	20-Feb-20	No
otherwise. It has arrangement relation to regulatory requirem	udit function. The governing body ensures the effective sin place to monitor and review the quality and effective should be standards of Governance and Finant ace to ensure that the functions normally provided	fectiveness of ir cial Manageme	nternal audit acti nt. Where the R	vity, to ensu SL does not	re that it meets its assur	ance needs in
4.5.6	Ensure staff withdraw from meetings whilst report is being presented to ensure GB are able to ask questions	SS	Jan-20	Yes	28-Jan-20	No
4.6 The governing body has for auditor.	ormal and transparent arrangements for maintainir	ig an appropriat	e relationship w	ith the RSL'	s external auditor and its	sinternal
4.6.3	External audit overdue (recommended no more than 7 years)	LL	Jan-20	Yes	Complete – tender exercise carried out in May/June 2020 and Committee awarded contracts for period 2020-23.	No
4.6.4	MC to be offered opportunity to take part in tender assessment	SK/LL	Jan-20	Yes	LB and KT participated in IA	No

Updated 14.08.2020

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
			1		and EA tender	
					and EA tender	
Regulatory Standard 5						
	affairs with honesty and integrity.					
	promotes the standards of behaviour and conduct it e	expects of govern	ning body memb	pers and staf	f through an appropriate	e code of
	rning body members' performance, ensures complian					
5.2.5	Include CHA values and the Code of Conduct feature in the annual GBM reviews/staff appraisals	SK/KT	15-Dec	Yes	02-Dec-19	No
5.6 There are clear proced other wrongdoing within the	dures for employees and governing body members to be RSL.	raise concerns o	or whistle blow it	f they believe	e there has been fraud,	corruption or
5.6.7	Ensure annual appraisals and reviews used to remind GBMs and staff of the whistleblowing procedures	SK/KT	15-Dec	Yes	02-Dec-19	No
with contractual obligations	are only made in accordance with a clear policy which s. Such payments are monitored by the governing books and the second secon					
alternatives to severance,		01/	0-1-40		00.0-4	NI -
5.7.1	Severance Policy to be put in place	SK	Oct-19	Yes	29-Oct	No
	lyment is accompanied by a settlement agreement the		use this to limit p	public accou	ntability or whistleblowir	ng. The RSL
Has taken brolessional leo		L.				
	al advice before entering into a settlement agreement		Oct 10	Voc	20 Oct	No
5.8.2 5.8.3	Severance Policy to be put in place	SK	Oct-19	Yes	29-Oct	No

Regulatory Standard 6

The governing body and senior officers have the skills and knowledge they need to be effective.

6.3 The RSL ensures that all governing body members are subject to annual performance reviews to assess their contribution and effectiveness. The governing body takes account of these annual performance reviews and its skills needs in its succession planning and learning and development plans. The governing body ensures that any non-executive member seeking re-election after nine years' continuous service demonstrates continued effectiveness.

Standard/Section	Improvement	Who	Target Date	Completed Yes/No	Date Actioned/ Completed/ Further Info	Material (Yes/No)
6.3	Formal Annual Review Policy to be devised	SK	15-Dec	Yes	Approved by MC 17.12.19	No
6.3.2	Annual GB review could be more detailed in terms of a direct question on view of composition and capability and also a direct question on intention to seek re-election	SK/KT	15-Dec	Yes	02.12.19	No
	as diverse a membership as is compatible with its con	stitution and ac	tively engages it	s membersh	ip in the process for filling	ng vacancies
on the governing body. 6.4.4	One to one sessions with Chairperson to be offered – include review of MC application form	SK/KT	29-Nov (MC Meeting)	Yes	02.12.19	No
	satisfied that the senior officer has the necessary skil					nior officer's
6.7.4	rmance, ensures annual performance appraisal, and Details of Senior officer's training and	requires continu SK/KT	Aug-20	No No	Scheduled Sep-	No
	development to be added to senior officer's appraisal report from Chairperson	J. 41.1.	7.0.9 _5		2020	
The RSL ensures that a	dering organisational or constitutional chang any organisational changes or disposals it ma es that disposals, acquisitions and investments fit with	akes safeguar h the RSL's obje	d the interests	s of, and beness plan, a	enefit, current and fund that its strategy is su	stainable. It
	ount of appropriate professional advice and value for		ei as pail oi a bi		gy or on a case by case	Dasis.
7.7	To devise a Sustainability Policy	SK	29-Nov	Yes	Jan-20	No