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|  | **Scrutiny Task and Finish Review**  **Internal Transfers**  **May 2022** |

**Introduction**

The review of PFH’s Internal Transfers policy was identified and selected for a resident led scrutiny review due to an upcoming policy review. This is the first scrutiny review since 2019, and the first time adopting the task and finish model. Part of this review included the group evaluating the effectiveness of using this approach in delivering scrutiny at PFH.

The review was undertaken using a task and finish approach over 12 weeks. Residents were recruited to the Scrutiny Task and Finish (STAF) review by written invitation to all residents who had either previously engaged with scrutiny at PFH or had expressed recent interest. 33 residents were contacted, 8 expressed interest and subsequently joined the review.

Scrutiny Review Team; David S, David W, Elaine E, Ann E, Ann G, John H, Katrina G, Dr A

Staff members involved with the project were Katie Burton as the Review Lead and Kate-Marie Foster as the Scrutiny Coordinator.

**The Scope**

Ahead of the first meeting the group received an advanced reading pack which contained key documentation (tabled below) relating to the review that the Lead Officer felt appropriate, this gave the group some insight prior to the first meeting.

During the first meeting the group received a presentation from the Lead Officer about the current policy, considerations and were able to ask further questions to broaden the groups understanding. During this meeting, the residents agreed the scope by identifying the following questions that they wished to answer as part of the review.

• When requesting a transfer, is the waiting time reasonable?

• Is the internal transfer policy widely publicised as an option available to all residents?

• Does the policy (and points) consider the complex needs of resident’s individual circumstances?

• Are the points weighted correctly to fairly assess individual circumstances?

• How is it decided which list to allocate to (general waiting list or internal transfer list) and who is involved in the assurance of fair allocations?

**What We Did**

The table below lists all the documentation and scrutiny activities that took place in order to deliver the project and answer the questions the group had identified.

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| **What was reviewed** | **How & When** |
| Corporate Plan | Provided in an advance reading pack 07/03/2022 |
| Internal Transfer Policy |
| Internal Transfer Assurance Form |
| Internal Transfer Points |
| Internal Transfer Application Form |
| Resident Handbook Information (Internal Transfer Chapter) |
| Performance Information relating to Internal Transfers | Presentation delivered on 22/03/2022 by Katie Burton copy of presentation provided at the meeting |
| Background information on reasons of residents moving out – reporting period to include most recent year and historical information where possible | Requested during Scope and Planning Meeting 22/03/2022 - Circulated 29/03/2022 |
| Length of time residents have been waiting for an internal transfer |
| Complaints Themes / Performance - Information on no. complaints relating to IT’s |
| New Residents Feedback - Look at information of feedback relating to residents who have IT |
| Other organisations Internal Transfer policies to benchmark against. |
| Customer Journey Mapping – Experiences of 18 residents, 8 of whom had successfully transferred, 10 who were on the waiting list. | Requested during Scope and Planning Meeting 22/03/2022 Presentation and report delivered on 17/05/2022 by Kate-Marie Foster |
| Shadowing an Area Co-Ordinator undertaking an internal transfer assessment and gain feedback about the process from them | Requested during Scope and Planning Meeting 22/03/2022 EE gave feedback to the group about the shadowing experience on 10/05/22. |

**Project Timetable**

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|  | **Date** |
| Scope and Planning Meeting | 22nd March 2022 |
| Check in Meeting (Updates and Gaps) | 10th May 2022 |
| Additional Group Meeting (Residents Only) | 17th May 2022 |
| Review and Agree Findings | 24th May 2022 |
| Draft report circulated for final comments | 30th May 2022 |
| Final Report Completed | 10th June 2022 |
| Report to Resident Committee | August 2022 |
| Report to Board of Trustees | September 2022 |
| 6 Month Follow Up | March 2023 |

**Resident Engagement**

Residents who are directly impacted by the policy were engaged throughout the review. This included.

* + - 2 residents in the STAF group who had previously internally transferred.
    - 18 residents contributed to the Customer Journey Mapping
    - 2 residents who were having internal transfer assessments shadowed by a member of the STAF group member.

**Findings**

PFH has undertaken 21 internal transfers in the last 12 months, costing an estimated £1,400 per property this includes average time spent doing transfer applications, assessments, paperwork, system inputting work, shortlisting, time spent on viewings, along with surveyor time and associated void works, approximately an annual cost of £28,350 to the association. In addition to this in the last 12 months there has been £32,081 void loss on properties that have become vacant because of an internal transfer.

There are strategic ambitions in place that are impacted by the internal transfer policy; reduce overall loss by 5%, reduce resident turnover by 2% and reduce sheltered resident housing turnover by 5% by 2024.

Residents can find out about the internal transfer policy in the Resident Handbook which is issued to all residents. It is also available on the website in an electronic version of the handbook and has its own page under the Resident Zone tab.

PFH eligibility for an Internal Transfer are as follows;

“If a resident wishes to transfer then they should normally have been a resident with PFH for at least 12 months before we will consider any request, unless there is a severe medical need or need for an Urgent Management Transfer.

“Residents who are requesting a transfer should have kept their licence satisfactorily and have kept their property in a clean and reasonable condition”.

“Residents should also have a clear rent account and owe no other housing related debt to PFH”.

To understand other organisations policies particularly around eligibility, lists and points, we benchmarked against 13 other organisations in varying sizes and locations. The results demonstrated a mix of approaches, with some information not clearly specified in the policy. 9 of the benchmarked organisations held separate lists, but didn’t specify in their policies how they selected which list to use. There was a mix of eligibility criteria, some organisations having very restrictive criteria including not allowing moves from one sheltered to another, others a very broad policy of the eligibility being that they must have been a resident for 1 year only with no other qualifying criteria.

The group reviewed the reasons for moves from April 2020 – March 2022. As per the table below, this demonstrated only 14 residents had moved elsewhere within PFH’s operating area within this period, though it was unclear if those residents had tried to transfer before moving.



Waiting times of those that had successfully internally transferred during the period of April 2020 – March 2022 on average was 43.8 weeks.

Two complaints had been received during the period of April 2020 – March 2022 relating to the internal transfer process. One resident complained about the complications on her rent account following an internal transfer, was told different information on different occasions and it was not clear to them what their responsibility was. Another resident complained about the transfer process, their partner was very depressed in their property and they had been waiting 4 years to move. New residents have moved into the area (from the main waiting list) in less need than them in their opinion.

All residents receive a satisfaction survey approximately 6-8 weeks after they have moved in, unfortunately this is not separated between internal transfer moves, so the group were unable to compare data and experiences using this data. PFH are looking to separate this for future use.

Customer Journey Mapping was undertaken by the Customer Experience Manager on behalf on the scrutiny group. This was presented on 10th May. As part of this work, several errors were identified on applications including inconsistency of points allocation, narrow requirements, no review of application and incomplete paperwork/record keeping. As part of the report that was shared with the group, several recommendations were included that would be taken forward as part of this discovery and it was up to the group to also include or build up these in their final report should they wish. The group are aware that steps have already been taken to address these issues internally.

There were two scenarios for the customer journey mapping. Scenario 1 - Residents who had applied for an Internal Transfer and are currently on the waiting list – 12 residents were contacted with 8 contributing. Scenario 2 - Residents who had successfully internally transferred within the last 2 years - 14 residents were contacted with 10 contributing.

The customer journey mapping demonstrated a dip in satisfaction around the assessment and waiting stage. Issues identified at this stage included;

- Not all applicants thought they had had a formal assessment, particularly if they had been on the waiting list longer.

- Lack of clarity and information on the chance of a move, that they are told there are lots of people on the list and it could be years

- Lack of understanding about how the waiting list works with regards to points, and when an allocation is made to the main waiting list or internal transfer list

- Lack of any paperwork confirming they were on the list / next steps

- Not all residents felt their situations had been handled with empathy or understanding and was very much about the process not the person

- A feeling of being undervalued by PFH when advising residents of other Housing providers +they could move to and when observing general waiting list applicants move into properties that would have suited them.

- Conflicting information from different members of staff

- Concerns that some residents were being treat unfavourably

- One resident shared they were unable to apply for an internal transfer when they needed it due to not being in their property for a year, they wanted to move as the flat wasn’t suited to their health due to needing a wheelchair inside their home but had to wait.

The customer journey mapping also demonstrated a dip in satisfaction around the approval/sign up / follow up stages. Issues identified at this stage included;

- Lack of clear explanation and actual breakdown of rent responsibility

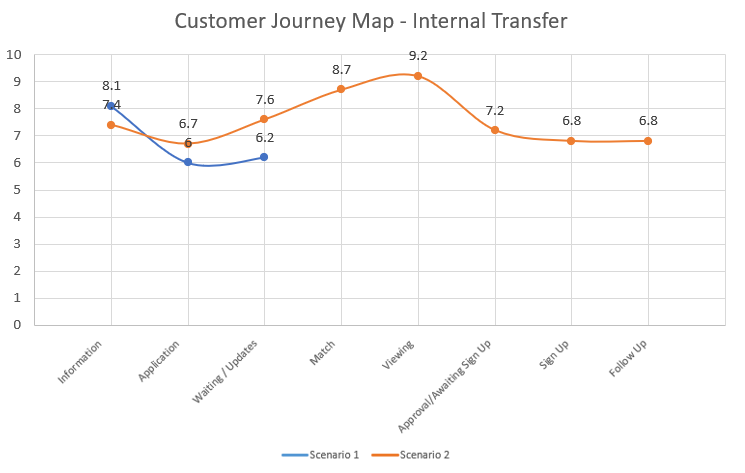
- Advance months’ rent payment is being perceived as mandatory and for some residents has had a significant negative impact.

- Repairs outstanding during sign up without an explanation of when they were being addressed

- Complications with smart meters / pay as you go meters and the additional stress this put on the residents to sort out

- Outstanding repair issues 6+ months on

- Outstanding rent account issues 10+ months on



The group identified they wished to shadow an Area Coordinator undertaking an application assessment. Due to the nature of the 12-week approach, this did limit this activity to only 2 opportunities. The group member who undertook this activity was able to shadow 2 complex internal transfer home assessments, the group member felt the Area Coordinator undertook this with great professionalism, empathy, and efficiency.

The group felt that understanding and responding to the individual, complex and often broad circumstances was important, particularly around social, health and welfare conditions for example mental wellbeing, periodic bouts of fatigue, periodic chronic pain, early dementia, and so forth, or, social harassment, anxiety disorder, depression, substance misuse, long term illness and so forth. This also links to the Aids and Adaptation Policy review that PFH have commenced in May 2022 which the group felt would further support residents.

The group felt after reviewing all the scrutiny activities, to truly improve the resident experience of the internal transfer policy that PFH should look to keep good communication, instil fairness – ensuring any policy and procedure is transparent and applied with consistency and they felt with implementing their recommendations it would support these principles.

**Recommendations.**

1. Increase qualifying period of applying for an internal transfer from 12 months to 18 months. The group feel this would give the individual a better judgment on accepting on a property in the first instance, give them more time to adjust being in their property and prevent someone using the property as a stepping stone to another property. The only exception to this would be if there was a medical need
2. All Internal Transfer applicants who wish to move due to medical reasons should have a supporting letter from a GP / Medical professional regarding their move clearly stating how a move would improve their wellbeing. The group accepts the resident may incur a charge to obtain a letter, however they feel this is acceptable should the individual actively wish to move.
3. Combine the internal transfer waiting list and the main waiting list as one. It is felt this is fairer and would remove the issue around no clear policy on which list to use when there is an allocation. The current points system would put internal transfer applicants at a disadvantage due to generally being more suitably housed than main waiting list applicants, therefore this needs to be considered when PFH combine the lists, potentially looking at average points to boost internal transfer applicants to match non-residents.
4. The assessment stage needs redesigning to be more person centred getting to understand the reasons behind the residents wish to move and their individual requirements so PFH can make good matches and advise them on their options accordingly and should conclude with a recommendation from the officer. This also could be an opportunity to look at how that resident could be supported to remain independent in their own home should they wish to instead of move, either through aids and adaptations or signposting to other services and agencies.
5. A full review of existing internal transfer applications to be undertaken using the principles of recommendation 4 including checking circumstances, points, area choices and associated paperwork ensuring clear record keeping
6. An annual review of internal transfer applications to be introduced to give residents the opportunity to update their circumstances / requirements should they wish the remain on the list.
7. A confirmation letter to be introduced as part of the process that includes area choices and other requirements they’ve requested and how many properties match those requirements. This should also include detail confirming what they have been allocated points for, and next steps.
8. Residents should sign a ‘statement of truth’ as part of the application stage, the group felt this confirmed pertinent facts stated by the applicant and demonstrates the PFH values the truth.
9. Ensure clarity in the policy and associated resident literature that there isn’t any disadvantage to those residents who are in receipt of Housing Benefit whose account may be in arrears due to the pay Housing Benefit it paid.
10. Build in annual reporting of the reasons residents wish to transfer so PFH can use this insight to shape services and future policy

**Conclusion**

In conclusion, we refer to the original scope questions we set at the beginning of the scrutiny;

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| **Question(s)** | **Conclusion** |
| When requesting a transfer, is the waiting time reasonable? | Some of the scrutiny activities demonstrated residents had been on the waiting list for many years, but their circumstances had changed, therefore they no longer wished to move. This skewed the ability to understand if resident’s waiting times were reasonable or not.  The group felt by implementing the recommendations from the review residents would have a better understanding of the likelihood of moving which is the better outcome. |
| Is the Internal Transfer (IT) policy widely publicised as an option available to all residents? | The group felt the policy is accessible, and the customer journey mapping had demonstrated how easy residents found it to apply. |
| Does the policy (and points) consider the complex needs of resident’s individual circumstances? | The group felt the points system covered differing needs and circumstances as best it could. They felt this would be strengthened by implementing the recommendation of resident’s obtaining a supporting letter from their GP or medical professional that detailed how a transfer would improve a resident’s health and wellbeing. This also would support staff in accurately pointing the application. |
| Are the points weighted correctly to fairly assess individual circumstances? | As per the groups recommendation the internal transfer list and main waiting list should be combined. As part of this process the points should be reviewed to ensure transfer applicants are not at a disadvantage due to generally being more suitably housed. |
| How is it decided which list to allocate from (general waiting list v IT list) & who is involved in the assurance of fair allocations? | The group have recommended that the lists are combined to make this fair.  In terms of assurance of fair allocations, the group were satisfied that there were enough measures in place to make this fair. This included the assessment and approval being undertaken by two different members of staff. There is also external audit and allocation reports to the Board of Trustees. They also felt the introduction of an annual review would further support fair allocations in ensuring applications were up to date and occupancy points had been allocated appropriately. |

**Task and Finish Model Evaluation**

During the last final meeting the group were asked to evaluate the task and finish approach;

* 85% of the group felt the 12-week project gave the group enough time to review the subject effectively and thoroughly
* 100% of the group found the project plan a useful tool with keeping on track of scrutiny activities?
* 29% of the group felt the timing was right between meetings

This feedback was built upon during the meeting and agreed to a slightly different timetable for the next scrutiny review including more meetings earlier on in the project for residents only. The group felt it was important to set predetermined dates ahead of the launch so residents could sign up fully aware of the commitment. All members of the review said they would be very interested in future scrutiny opportunities.