

Report To:	Management Committee Meeting
Agenda Item:	5.1 Minute of Management Committee Meeting of 19 August 2026 held at Golden Jubilee Hotel Pineview office and on MS Teams
Prepared By:	Joyce Orr, Director
Date Issued:	16 September 2026
Meeting Date	23 September 2026 at 6.15pm – Pineview office and MS Teams

1. Sederunt				
P = In Person, T = On MS Teams				
Present: Morven Baigent (MB) Richard Bolton (RB) Linda Devlin (LD) Daniel Martyn (DM) Helena McNulty (HM) Kirsty O'Neil (KO) Lyndsey Robinson (LR) Callum Scouller (CS) Anna Welsh (AW)	P P P T P P T P P	Apologies Received: Kenny McGinty (KM) Absent: Nanre Kums Yusuf (NY) Leave of Absence: Laura Nahar (LN) Observers: None	In Attendance: Isobel Ferguson, SFC SO (IF) Ben Keenan, HSO (BK) Lucy Neilson, PrimoAdvisory (LN-PA) Joyce Orr, Director (JO) Staff Apologies: Karen Byrne, HSM (KB) External Speakers: None	
Meeting started 6.15pm.				
All papers issued in advance of meeting unless detailed in minute.				
Chair welcomed everyone to the meeting and asked attendees to do a quick introduction as this was the first meeting since the AGM and CS and LN were new.				

2. Declaration of Interest
Chair gave reminder of confidentiality and collective responsibility and reminded committee and staff to declare any interest as appropriate. LN-PA declared her membership of Wheatley Homes East Board, and Indigo House Consultancy. Chair advised that Nanre Kums Yusuf (NY) had stepped down at the AGM as a co-optee in accordance with Rules. As NY is not yet a shareholding member of the Association the Chair requested that Committee approve a new co-optee appointment for NY. Decisions Made: ✓ Approved appointment of NY as co-optee, with offer of casual vacancy as occurs.

3. Decisions/Approvals Report – noted as issued

4.1	Post AGM Signing and Decisions Requirements	Lead	Due By										
The Chair advised no Decision Time comments and passed to IF to present.													
4.1.1. Post AGM Meeting Format, Timetable and Reporting Arrangements													
<u>Decisions Made:</u>													
✓ Meetings to be the second last Wed of Aug, Sept, Nov, Jan, Feb, Apr, May, Jun, at 6.15pm, with quarterly in person meetings Aug, Nov, Feb and May. Strategy day to be second last Fri in Mar, and AGM last Tues in Jun.		-											
4.1.2. Committee and Office Bearers Positions													
<u>Decisions Made:</u>													
<table><tr><th>Member</th><th>Office Bearer Position</th></tr><tr><td>Linda Devlin</td><td>Chairperson</td></tr><tr><td>Lyndsey Robinson</td><td>Joint Vice Chairperson</td></tr><tr><td>Morven Baigent</td><td>Joint Vice Chairperson</td></tr><tr><td>Joyce Orr, Director</td><td>Secretary</td></tr></table>		Member	Office Bearer Position	Linda Devlin	Chairperson	Lyndsey Robinson	Joint Vice Chairperson	Morven Baigent	Joint Vice Chairperson	Joyce Orr, Director	Secretary	-	
Member	Office Bearer Position												
Linda Devlin	Chairperson												
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Joyce Orr, Director	Secretary												

4.1.3. External Representation by Pineview Committee Members <u>Decisions Made:</u> ✓ No specific reps agreed – member to advise of any interest in future. Director remains member rep for SFHA as per SFHA policy. 4.1.4. 2026 – 2027 Signing Requirements and Banking Signatories IF confirmed all committee signing requirements met other than for member on leave of absence, which will be pursued before return. Committee considered Banking Signatories. <u>Decisions Made:</u> ✓ Approved Bank Signatories and confirmed committee signing is by office bearers and only to approve any change to staff operational signatories. ✓ Approval to add SHO as signatory once in post for min 1 year. ✓ LN signing requirements to be pursued before return from leave of absence.	- IF IF IF	2027 Oct 26
4.2 Regulatory Compliance and Draft AAS 2026	Lead	Due By
The Chair introduced item and passed to JO to present. JO apologised for the report being issued a day late. JO advised the purpose of the report was to facilitate committee discussion on their assurance and their position regarding the PHA assurance process and the 2026 Pineview annual assurance statement (AAS). JO advised on comments in Decision Time which would be considered as report gone through. 2. SHR Letter on Annual Assurance Statements for 2026 – Data on Homes Committee considered the SHR letter and considered the specific assurance being sought in respect of comprehensive, good quality and up to date information on the construction, components and condition of homes. Committee considered the actions of Pineview to achieve the outcome sought. <u>Decisions Made:</u> ✓ Committee confirmed their agreement with the factors at section 2.3 of the report and confirmed that these factors give committee assurance on the SHR highlighted Data on Homes matter. Committee confirmed agreement with the member comment that the independent evidence, backed by internal checks, provides strong assurance. 3. SHR Publication “Preparing Annual Assurance Statement: a thematic review – 2026” Committee considered the 2026 SHR thematic review publication and the recommendations given to the sector. Committee considered the Pineview position measured against the SHR recommendations, and the actions of Pineview to ensure compliance in areas highlighted. <u>Decisions Made:</u> ✓ Committee confirmed their agreement with the factors at section 3.3 of the report and confirmed that these factors give committee assurance on Pineview meeting the recommendations within the SHR report. Committee confirmed agreement with the member comment that financial assumptions and supporting evidence provide assurance for this requirement also. 4. 2026 Pineview Regulatory Compliance Self-Assessment Committee considered the self-assessment work undertaken during the year to date and previously, and the summary of reporting elements for the 2026 position. Committee noted the delay in reformatting evidence documents as	- -	

declared at paragraph 4.6, with staff proposal to complete by the 23/09/2026 CoM meeting in order to allow committee to review the evidence bank again before finalising the 2026 AAS. Committee confirmed their understanding that the decision on compliance assurance must always be made by the committee. Committee also noted the March 2026 updated SFHA self-assurance toolkit and the importance of being familiar with and considering this. <u>Decisions Made:</u> ✓ Committee confirmed their agreement with the regulatory compliance self-assessment position as detailed at section 4. of the report. ✓ Reformatting of evidence documents work to be complete by 23/09/2026.	- JO	23/09/26
5. Annual Assurance Statement 2026 – Committee Responsibility and Draft AAS Committee considered and confirmed their understanding of their responsibility, noting that staff can work to provide compliance information and give opinion, but that assurance decisions cannot be delegated and must be made by committee. Committee confirmed their understanding that the AAS is from them to tenants, SHR and other stakeholders. Committee noted the requirement for them to consider matters and reach a collective judgement on compliance assurance, and to consider materiality when determining this and whether any matters require to be disclosed as non-compliant. Committee considered the proposed draft AAS as discussed with the Customer Forum at their 12/08/2026 meeting, and customer consultation. Committee discussed that as the Chairperson will not be at the 23/09/2026 committee meeting, Vice Chair LR will chair the meeting and sign the final approved AAS on behalf of the committee as per SHR confirmed position. <u>Decisions Made:</u> ✓ Committee determined the draft 2026 AAS for consultation on website. ✓ Final AAS, following any consultation feedback, to be determined at 23.09.2026 CoM meeting and signed by the Chair of that meeting.	JO JO	01/09/26 23/09/26
6. Regulatory Compliance Self-Assurance Process Review for 2026/2027 Committee considered the work they had undertaken over the past year on reviewing the Pineview assurance processes. Committee considered the recommendation from Linda Ewart that (due the amount of assurance work, the evidence bank, and with the regular reporting being comprehensive, compliance based and with an improvement / enhancement focus), the committee consider stopping the 3 yearly “deep dive”. The recommendation suggested that the PHA emphasis should be on maintaining the current focus and cycle of regular reporting with an annual review of consolidated evidence and identification of any gaps. Committee considered the further associated recommendation from the Director that the committee consider incorporating the self-assurance compliance evidence review into ongoing meetings by spreading the review throughout the year on an ongoing basis rather than considering it all at the one time. Committee considered that as there are 7 regulatory standards, the ongoing process could take the form of reviewing the compliance evidence for one or two regulatory standards at meetings throughout the year, with a concluding overall assessment review each year when considering the AAS. <u>Decisions Made:</u> ✓ Committee decided to implement the recommendation to stop the 3 yearly “deep dive” and instead have the emphasis on maintaining the current focus and cycle of regular reporting with an annual review of consolidated	JO	18/11/26

evidence and identification of any gaps. Business Plan and any associated documents to be updated. ✓ Committee were supportive of the recommendation for a programme of ongoing review with one or two regulatory standards being considered at meetings throughout the year, and a concluding overall assessment review each year when considering the AAS. The Director was instructed to bring a proposed review timetable to the 23.09.2026 CoM meeting for consideration. 7. Matters for committee to confirm Committee were requested to confirm various matters and confirmed their responses as follows: ✓ Satisfaction with the updates and referencing provided within the report. ✓ Understanding of the SHR Annual Assurance Statement Guidance. ✓ Satisfaction with the assurance focus of the committee reports, discussions and decisions throughout the reporting year. ✓ Confirmation that they have seen and considered appropriate evidence to support their level of assurance. ✓ Confirmation that the approach at Pineview allows them “to reach an objective and evidence-based judgement on compliance, ensuring sufficient evidence and information, and where necessary independent assurance.” ✓ Confirmation of their assessment of compliance and their assurance. ✓ Confirmation of there being no identified areas of material non-compliance. ✓ Approval of the draft assurance statement for consultation with feedback to the Sept CoM. ✓ Approval of the recommendations for the Pineview Regulatory Compliance and Annual Assurance Statement process moving forward. ✓ Committee to declare immediately if they do not feel assured. Committee confirmed all matters noted and no additional queries to raise.		JO	23/09/26
		CoM	Ongoing
5.	Minutes of Previous Meeting(s) / Matters Arising	Lead	Due By
5.1 Minute of the Management Committee Meeting of 17/06/2026 The Chair advised no Decision Time comments and committee confirmed nothing to raise at meeting. Minute approved, with no changes and no matters arising outwith agenda. Proposer: KO Seconder: HM Chair of meeting to sign minute: LD			
5.2 Decision Tracker Report The Chair advised no Decision Time comments and passed to JO. JO advised on items highlighted red, and advised other items were either complete, not due yet or part of this meeting. Committee confirmed all matters noted and no queries to raise.			
5.3 Minute of the AGM Meeting of 23/06/2026 The Chair advised no Decision Time comments and committee noted draft minute to be presented to members at 2027 AGM for amendment/approval.			
6.	Reports Requiring Decision/Approval/Discussion	Lead	Due By
6.1 Management Accounts to 30/06/2026 The Chair passed to LN-PA to present outcomes for Q1. LN-PA apologised for the report being a day late and advised on some changes to the management account reporting to allow committee to focus more on the core outcomes and performance rather than having lots of operation detail to go through.			

LN-PA advised that overall, performance for the quarter to 30 June 2026 is ahead of budget, with a positive surplus variance. LN-PA advised that this is common at Q1 outcomes and that spend will catch up over the year and positive variance will reduce. Cash reserves remain strong and the cashflow projection indicates no liquidity issues anticipated over the next twelve months. LN-PA advised that due to a correction to the b/fwd. 2025-26 figure for 'Deferred Income " HAG' due within 1 year on SOFP, there is a knock on effect to 'increase in creditors' on SOCF, and 'interest cover' on Ratio Analysis. Overall net assets on SOFP and overall closing cash on SOCF are not changed by this update. LN-PA advised that figures have been updated, with management accounts updated and will be uploaded to Decision Time. Committee noted ratio and benchmarking outcomes and noted no financial covenants for loans. Committee confirmed all matters noted and no additional queries to raise. Decisions Made: ✓ Approved management accounts, with declared changes for Q1, with website to be updated. ✓ Approved retention of reporting variance at £3.5k for 2026/27 reporting.	IF/JO -	02/09/26
6.2 Treasury Management Q1 Report The Chair passed to LN-PA to present Q1 report. Committee noted cash and loan position as at 30/06/2026, with no forecast liquidity issues and no loan covenant concerns. LN-PA advised there were no treasury management or policy compliance issues, current or forecasted. Committee noted the positive reinvestment of matured deposits to 27/07/26. Committee noted inflation published at 2.9% July 2026, with prediction to rise further, and bank base rate held at 3.75%. Committee noted that the Association's cost inflation remains greater than CPI, with same across sector. Committee confirmed all matters noted and no additional queries to raise. Decisions Made: ✓ Approved ongoing continued delegation to Director and PA to action decisions and implement operational matters including investments.	JO/PA	Ongoing
The Chair advised LN-PA that she was welcome to stay for the rest of the meeting or leave. LN-PA thanked committee for their time and consideration of reports and left the meeting.		
6.3 Risk Management Quarterly Review The Chair passed to JO to present report. JO explained the quarter review proposals. Committee considered the review of Risk 75 cyber security and planned actions. Committee noted no proposed changes to risk scoring at this quarterly review. Committee confirmed all matters noted and no additional queries to raise. Decisions Made: ✓ Approved Risk 75 Cyber Security amendment to planned actions, with risk register to be updated. ✓ References throughout risk register to be updated to reflect new Financial Services provider and seniority and responsibility of SFCSO. ✓ Business Plan, website and Decision Time to be updated.	JO JO JO	30/09/26 30/09/26 30/09/26
6.4 Business Planning General Report The Chair passed to JO to present report. JO apologised for the report being issued a day late and advised on the follow on KPI updates that had been issued and uploaded to Decision Time.		

6.4.1 KPIs and Pls to 30/06/2026 – committee noted the outcomes. It was noted and that the tenant satisfaction survey (TSS) outcomes came from the 2025/26 TSS and the outcomes would remain until the next triennial survey. It was discussed that whilst some performance is outwith target, there is nothing of particular concern at this time. JO updated that the alternative format for reporting on the performance indicators is still bedding in, and therefore the uploading of monthly outcomes to the resource library has been delayed, and it is anticipated that this will be resolved by October/November. JO advised on proposal to ask committee to review which indicators are classified as 'Key' and that a proposal on this will be brought to the Sept or Nov 2026 CoM meeting for committee consideration. Committee confirmed all matters noted and no additional queries to raise. Decisions Made: ✓ Approved delay to uploading monthly outcomes. ✓ Approved that a proposal on 'key' classification for performance indicators be brought to the Sept or Nov 2026 CoM meeting. 6.4.2 Strategic Goals Delivery Plan to 30/06/2026 – committee noted outcomes report. It was recognised that as it is early in the reporting year a number of targets are in progress. It was noted, as with the KPIs, that the TSS targets not met at 31/03/2026 will remain unmet until the next TSS in 2028. JO highlighted targets that could have been met in the quarter but were not: > repair satisfaction – there is no concern at this stage as just below target. > the % of estate inspections met – this is an area requiring improvement that the SHO is to resolve urgently to ensure performance is met moving forward. It was noted that staff absences had impacted but not to the degree not met. Committee confirmed all matters noted and no additional queries to raise. Decisions Made: ✓ SHO to deliver improved estate management inspection outcomes and report progress at next quarter reporting (Sept outcomes to Nov CoM). 6.4.6 Pension Update – JO updated that TPT confirmed that Annual Financial Assessment will be delayed with an extended return date of 30/09/2026. JO advised that all other sections within report were for noting and updates and asked if committee had any queries. Committee confirmed all matters noted and no additional queries to raise.	SMT JO	Oct/Nov 26 18/11/26
6.5 Membership and Committee The Chair passed to IF to present report. Membership – IF advised on the 5 share membership applications for decision. Committee updated on learning and development, with LD and KO giving feedback on the Drumcog equalities session 17/08/2026, and the wider benefit of attending this event. LD and KO advised on the PHA assurance gained from attending training. KO advised on the EHRC's revised statutory Code of Practice came into effect on 5 August 2026 – uploaded to Resource Library. It was noted that LD and LR were booked to attend the 25/08/2026 Flexible Workplace Accreditation Digital Roadshow: Spotlight on Housing event. JO advised that 4 places (for the price of 3) had been booked for GWSF annual conference (24/11/26), with LR and JO attending with other committee members to consider taking places before the places are filled by staff. Committee were reminded of, and encouraged to make use of, the SHARE E-Learning platform both for learning and to ensure best value from membership.		

Committee confirmed all matters noted and no additional queries to raise. Decisions Made: ✓ Approved five shareholding membership applications. ✓ Committee to advise on attending GWSF Annual Conference by Sept CoM.		IF CoM	23/09/26
7. Policy Reviews		Lead	Due By
The Chair reminded committee of the new format for policy reviews and passed to JO to present. JO advised on the review of the policies for this meeting and the proposed changes for committee to consider for approval. Committee confirmed all matters noted and no additional queries to raise. Decisions Made: ✓ Approved reviewed F.07 Fraud and Bribery Policy ✓ Approved reviewed G.10 Committee Member Recruitment Policy ✓ Approved reviewed G.13 Committee Succession Planning Policy ✓ Revised policies to be implemented by 30/09/2026, with staff advised, policy folder updated, Decision Time resource library updated, and PHA website updated as appropriate.		JO	30/09/26
8. Items for Update / Noting		Lead	Due By
The Chair reminded members that reports in this section are important for committee updating/noting/feedback but are only intended for meeting discussion if committee raise queries, or if there are necessary staff updates since the time of writing the report. The Chair advised no unanswered queries on Decision Time and asked staff to present any updates to the meeting as appropriate. 8.1 Housing Services Assurance Report JO apologised for report being issued a day late on 13/08/2026. JO highlighted LR queries and staff replies re adaptation funding and customer forum feedback on void visit. JO and BK updated on upstream homelessness prevention fund grant application submitted for Drummog; Councillor meeting re environmental matters; protests in Glasgow and racist link to a PHA tenancy termination; and Pineview legionella risk being minimal. BK advised of community clean up event due 27/08/2026 and that PHA staff will be involved in this and committee also welcome. Committee confirmed all matters noted and no additional queries to raise. Decisions Made: ✓ HS to take details of PHA bulk and associated costs to councillor meeting and to feedback on councillor meeting in the Sept HS Report. ✓ Any committee member wanting to take part in community clean up event to contact BK for more details. 8.2 Staffing and Health and Safety Quarterly Report Committee were updated on staffing and recruitment with one of the current temporary housing assistants having secured promotion in another RSL. Committee confirmed all matters noted and no additional queries to raise. 8.3 Complaints and Compliments Quarterly Report IF explained updated reporting format and committee provided supportive feedback for format to be used and expanded. Committee confirmed all matters noted and no additional queries to raise.		KB/BK CoM	23/09/26

8.4 Gifts, Hospitality and Donations Report Committee confirmed all matters noted and no additional queries to raise.			
8.5 Tenant/Customer Participation Action Plan Update Committee confirmed all matters noted and no additional queries to raise.			
8.6 Welfare Reform Action Plan Update BK apologised for late issue of report (14/08/26). Committee noted LR comment in Decision Time re CAB service being a benefit to tenants. Committee confirmed all matters noted and no additional queries to raise.			
8.7 Equality Action Plan Quarterly Update Committee confirmed satisfaction with revised layout of the action plan. Committee confirmed all matters noted and no additional queries to raise.			
9.	Correspondence		
Committee and staff confirmed nothing additional to that already issued.			
10.	A.O.C.B.		
At Chairperson’s discretion the following was discussed and determined. ➤ Office festive closure December 2026 - to be as previous years with staff using annual leave for the two days between public holidays. ➤ Staff festive night out - £500 contribution from PHA. ➤ Strategy day 2027 – Health & safety session to be part of the day.		IF IF IF/JO	19/03/26
11.	Date of Next Meeting(s)		
Wednesday 23/09/2026 - Management Committee Meeting - PHA Office and MS Teams			

Proposer: K O'Neil

Seconder: L Robinson

Signed by Chair of

Meeting who approved: L Devlin

Date Approved: 23 September 2026