## Housing Ombudsman Complaint Handling Code: Self-assessment form 31 December 2020 for Network Homes

| Compliance with the Complaint Handling Code |  |     |    |
|---|--|-----|----|
| 1   | Definition of a complaint  | Yes | No |
|   | Does the complaints process use the following definition of a complaint?   |     | V  |
|   | "An expression of dissatisfaction, however made, about the standard of service, actions or lack of action by the organisation, its own staff, or those acting on its behalf, affecting an individual resident or group of residents".  |     |    |
|   | Our policy states:   |     |    |
|   | A complaint is defined as 'a communication expressing dissatisfaction with the service provided by us and/or our service partners'. This includes complaints about:  |     |    |
|   | a delay in providing a service   |     |    |
|   | • a failure to provide a service   |     |    |
|   | a mistake made in the way we provided a service  |     |    |
|   | • the failure to act in a proper way   |     |    |
|   | • the provision of an unfair service   |     |    |
|   | Marked as "no" as it does not use the exact definition. This will be used in an amended Complaints policy due 31 March 2021.   |     |    |
|   | Does the policy have exclusions where a complaint will not be considered?  | √   |    |
|   | Are these exclusions reasonable and fair to residents?   | V   |    |
|   | Evidence relied upon:  |     |    |
|   | Complaints policy document. This explains what most common elements fall outside of our complaints process and is available online or upon request.  |     |    |
|   | Generally, concerns outside of our Complaints Policy would include (but not limited to) matters linked to ASB, Service Charge disputes and general matters of policy. However, residents can complain if they feel we have not followed our own policies in respect of how each element/concern is dealt with. Typically, this would be due to delays or lack of action. |     |    |

|   | When we consider a concern falls outside of our complaints policy, a clear explanation is provided to the resident as to why their concerns fall outside of the complaints policy, and the relevant team would take charge to provide a response/take action in line with principles/policies in place.  We consider this the fairest/balanced and reasonable way of dealing with such matters and will invite further comment from the Residents Panels in January. |           |      |
|---|--|-----------|------|
| 2 | Accessibility  |           |      |
|   | Are multiple accessibility routes available for residents to make a complaint?   | <b>√</b>  |      |
|   | Is the complaints policy and procedure available online?   | √         |      |
|   |  |           |      |
|   | Do we have a reasonable adjustments policy?  | V         |      |
|   | We have the basis of a rudimentary reasonable adjustments policy in relation to complaints (10.3 in our Complaints Policy). Will amend to make more robust when completing our next Complaints Policy review due for 31 March 2021.  |           |      |
|   | Do we regularly advise residents about our complaints process?   | 1         |      |
| 3 | Do we regularly advise residents about our complaints process?   | V         |      |
| 3 | Is there a complaint officer or equivalent in post?  | 1         |      |
|   | Does the complaint officer have autonomy to resolve complaints?  | 1         |      |
|   | Does the complaint officer have authority to resolve complaints?    Does the complaint officer have authority to compel engagement   | 2/        |      |
|   | from other departments to resolve disputes?  | V         |      |
|   | If there is a third stage to the complaints procedure are residents  | N/A       | N/A  |
|   | involved in the decision making?   | IN/A      | IN/A |
|   | We have opted for a two stage complaints process.  |           |      |
|   | Is any third stage optional for residents?   |           | V    |
|   | Does the final stage response set out residents' right to refer the  | V         | ,    |
|   | matter to the Housing Ombudsman Service?   |           |      |
|   | Do we keep a record of complaint correspondence including correspondence from the resident?  | $\sqrt{}$ |      |
|   | At what stage are most complaints resolved?  |           |      |
|   | The mat stage are most complainte received:  |           |      |
|   | The majority of complaints (73%) are resolved at Stage 1.  |           |      |
|   |  |           |      |
|   |  |           |      |

| 4 | Communication  |          |  |
|---|--|----------|--|
| • | Are residents kept informed and updated during the complaints process?   | 1        |  |
|   | Are residents informed of the landlord's position and given a chance to respond and challenge any area of dispute before the final decision?                       | V        |  |
|   | Are all complaints acknowledged and logged within five days?  Our internal target is to log all complaints within two working                                      | V        |  |
|   | days.  Are residents advised of how to escalate at the end of each stage?  | <b>√</b> |  |
|   | What proportion of complaints are resolved at stage one?   |          |  |
|   | 73% of complaints are resolved at Stage 1 (01 Jan 2020 – 31 Dec 20202)   |          |  |
|   | What proportion of complaints are resolved at stage two?   |          |  |
|   | 96% of complaints are resolved at Stage 2<br>(01 Jan 2020 – 31 Dec 20202)  |          |  |
|   | What proportion of complaint responses are sent within Code timescales?  |          |  |
|   | <ul> <li>Stage one – 759     Stage one – 74 (with extension*)</li> <li>Stage two – 167     Stage two – 4 (with extension**)</li> </ul>                             |          |  |
|   | *91% of Stage 1 responses (with extension) were issued within agreed extension timeframe.  |          |  |
|   | **98% of Stage 2 responses (with extension) were issued within agreed extension timeframe.   |          |  |
|   | Our internal target is for Stage 1 complaints to be responded to within ten working days and for Stage 2 complaints to be responded to within twenty working days. |          |  |
|   | Where timescales have been extended did we have good reason?   | V        |  |
|   | We will always provide an explanation as to why an extension is needed. Usually this will be due to obtaining information from a                                   |          |  |

|   |   | 1         |    |
|---|---|-----------|----|
|   | 3 <sup>rd</sup> party, investigating complex issues or obtaining input from   |           |    |
|   | multiple teams/people etc.  |           |    |
|   |   | ,         |    |
|   | Where timescales have been extended did we keep the resident  | $\sqrt{}$ |    |
|   | informed?   |           |    |
|   |   |           |    |
|   | In the evet that we are unable to provide a complaint response  |           |    |
|   | we will inform the resident in good time, provide a clear reason  |           |    |
|   | for the delay and confirm a new timeframe when we expect to be  |           |    |
|   | in a position to issue our response.  |           |    |
|   | What proportion of complaints do we resolve to residents'   |           |    |
|   | satisfaction?   |           |    |
|   |   |           |    |
|   | (Based on complaints not escalated to stage 2) 73% of   |           |    |
|   | complaints were resolved to residents' satisfaction at Stage 1.   |           |    |
|   |   |           |    |
|   | (Based on complaints not escalated to the Ombudsman) 96% of   |           |    |
|   | complaints were resolved to residents' satisfaction at Stage 2.   |           |    |
|   |   |           |    |
|   |   |           |    |
| 5 | Cooperation with Housing Ombudsman Service  |           |    |
|   | Were all requests for evidence responded to within 15 days?   |           | √* |
|   |   |           |    |
|   | *Dispensation/extension granted by Ombudsman due to team  |           |    |
|   | size, new working conditions (WFH) and team numbers   |           |    |
|   | changing/new team members joining team so the target we are   |           |    |
|   | working to is 40 days – which we are 100% compliant with.   |           |    |
|   |   |           |    |
|   | Agreement still in place although working back down to fall in line   |           |    |
|   | with 15 working day timeframe 31 March 2021.  |           |    |
|   |   |           |    |
|   |   | 1         |    |
|   | Where the timescale was extended did we keep the Ombudsman  | V         |    |
|   | informed?   |           |    |
| 6 | Fairness in complaint handling  | 1         |    |
|   | Are residents able to complain via a representative throughout?   | 1         |    |
|   | If advice was given, was this accurate and easy to understand?  | $\sqrt{}$ |    |
|   |   |           |    |
|   |   |           |    |
|   |   |           |    |
|   |   |           |    |
|   | How many cases did we refuse to caselate?   |           |    |
|   | How many cases did we refuse to escalate?   |           |    |
|   | Answer: 2 (less than 1% of complaints raised)   |           |    |
|   | Allower. 2 (1655 than 170 or complaints faiseu)   |           |    |
|   | What was the reason for the refusal?  |           |    |
|   |   |           |    |
|   | Policy regarding ASB     Descend bloomer and independent of the control of t |           |    |
|   | Reasonable redress applied compensation no extra  |           |    |
| 1 | award.  |           |    |

|   | (HOS referral rights provided for both).   |     |  |
|---|--|-----|--|
|   | Did we explain our decision to the resident?   | V   |  |
| 7 | Outcomes and remedies  | · · |  |
|   | Where something has gone wrong are we taking appropriate steps to put things right?  | V   |  |
| 8 | Continuous learning and improvement  |     |  |
|   | What improvements have we made as a result of learning from complaints?  |     |  |
|   | We have promoted an environment to challenge and push for change to improve all aspects which impact our residents lives. This includes (but not limited to) the implementation of feedback tools for all contractors and continuous improvement across all areas within Network Homes. We have also formed a number of teams to focus on better communication with residents and ensuring feedback is acted upon.   |     |  |
|   | Following any determination in favour of a resident the Complaints Team has provided a detailed drill down of the determination to ensure that at all stages of the process those involved understand how we could have improved the service provided in an attempt to stop the matter being raised as a complaint. We also focus on all elements post a complaint being logged up to the point of the determination being issued. Again, this is to make sure lessons are learnt as part of a "cradle to grave" holistic review of the specific case/complaint. |     |  |
|   | We have also set up a wider group consisting of ETL/SMT to look at holding regular "lessons to be learnt" sessions. This is in its infancy, but we believe this will add to the above and set sound foundations to embedding learning across Network Homes.  |     |  |
|   | How do we share these lessons with:  |     |  |
|   | a) residents?  |     |  |
|   | Our Complaint responses provide feedback on where lessons are to be learnt to ensure we don't make the same mistakes again. Quarterly Complaints Report also provides examples of lessons learnt and you said, we did exercises.   |     |  |
|   | b) the board/governing body?   |     |  |
|   | An update on complaints performance, including lessons learned is reported at every meeting of our Customer Services Committee. We are open and transparent with providing   |     |  |

|   | oviding feedback on lessons learnt on against Network Homes.  |          |  |
|---|---|----------|--|
| c) In the Annual F                                  | Report?   |          |  |
| •   | udsman determinations and lessons learnt<br>nancial statements and annual report to   |          |  |
| Has the Code made a complaints?                     | difference to how we respond to   | <b>V</b> |  |
| What changes have we                                | e made?   |          |  |
|   | nsured that residents are able to raise their media – previously residents would be plaints team/mailbox.   |          |  |
| advice from the Ombu                                | cious effort to encourage residents to seek<br>dsman service in the event they are unsure<br>idance outside of that provided by                               |          |  |
| · · · · · · · · · · · · · · · · · · ·               | Complaints and Compensation Policies to Complaint Handling Code.  |          |  |
| ensure it is in line with Code. This will likely in | our Habitual Complainants Policy to<br>the spirit of the Complaints Handling<br>volve members from our Resident Panels<br>ment groups. Due to be completed 31 |          |  |
| January 2021, when w                                | self-assessment to our Resident Panels in<br>e will also seek their views on how best to<br>ts in the next self-assessment, due by 31                         |          |  |