

**Report to:** Board  
**Report by:** CEO/Tony Price Board Member Responsible for Complaints (MRC)  
**Subject:** Annual Complaints Performance and Service Improvement Report April 2025 (2024/25 Q1-Q4)  
**Item Number:** ##  
**Date:** 6/5/25

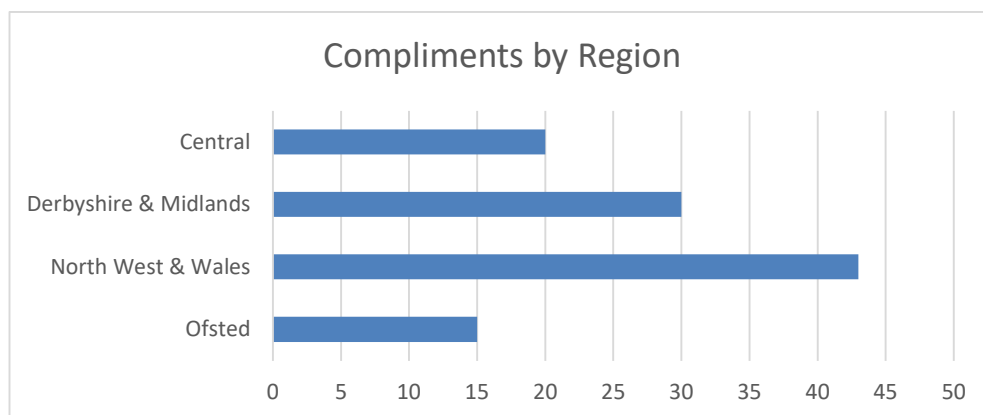
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**1. Introduction.**

- 1.1. The complaints and feedback policy were reviewed and updated in March/April 2025 in line with the RSM Internal audit recommendations carried out in January 2025. Two minor amendments were actioned to ensure compliance against the audit.
- 1.2. There have been 108 complaints and 286 compliments received during the period 1 April 2024 to 31 March 2025. (Q1-Q4)
- 1.3. Data analysis shows that the number of complaints has decreased and the number of compliments as a percentage has increased significantly.

**2. Compliments**

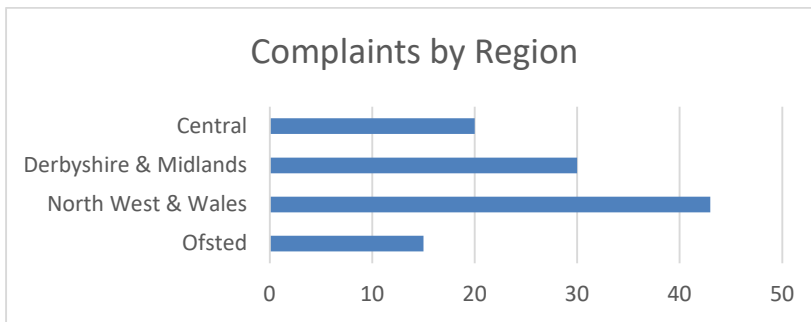
- 2.1. There were 287 compliments received across all regions including central. Training and awareness campaigns, run alongside promotional events with our internal comms team, has increased by 46% against last year’s data.
- 2.2. The charts below show the breakdown by region and by project. There has been a notable increase in compliments received in the Northwest & Wales and Stok.



2.3. The most common themes for compliments were categorised as staff member followed by support provided.

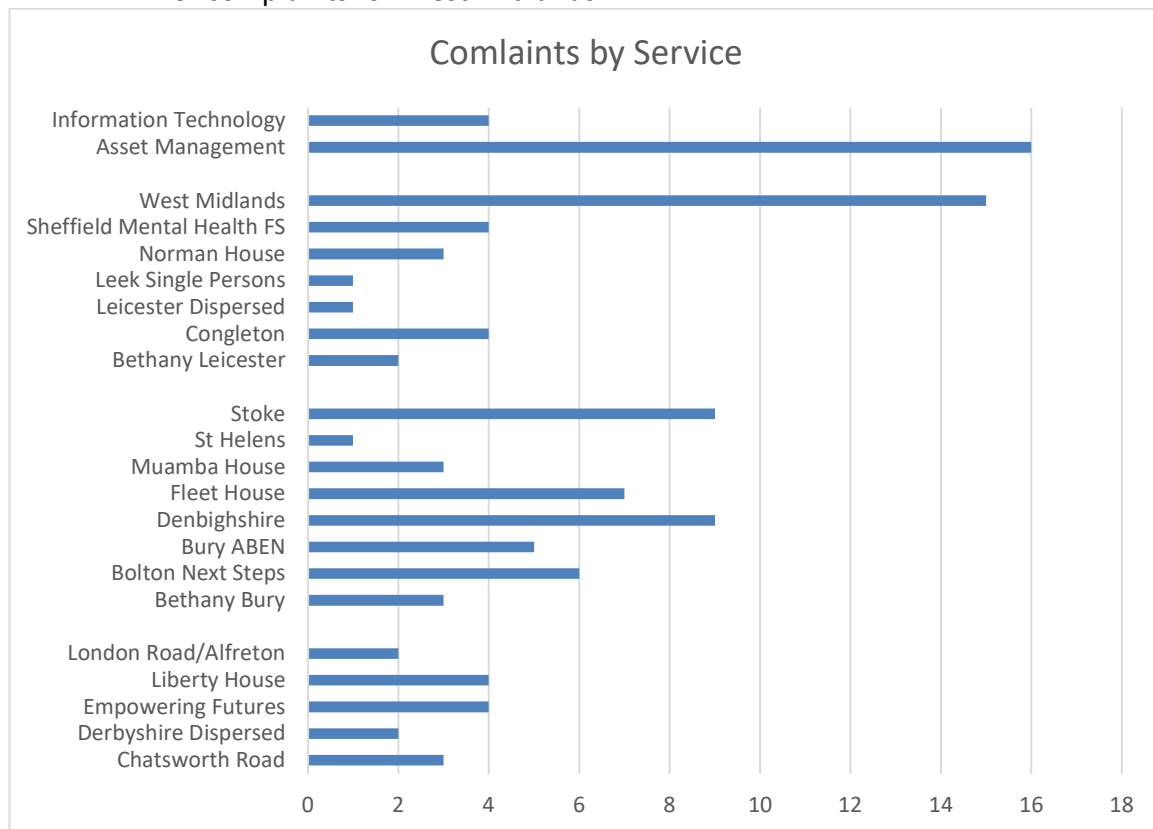
**3. Complaints**

3.1. From the 108 complaints received the chart below shows the breakdown of complaints by region.

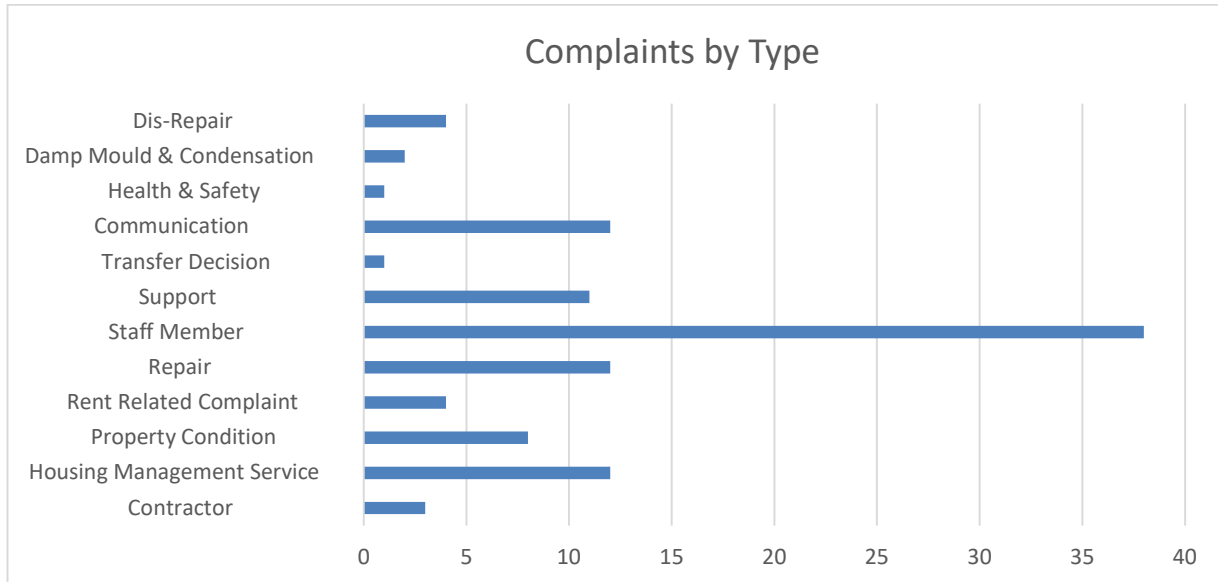


3.2. All Regions saw a decrease of 10% or more in complaints compared to 2023/24.

3.3. The chart below shows the breakdown of complaints by service. The data indicates that a higher proportion of complaints were captured for Asset Management and at larger accommodation-based services including Stoke, where the superior landlord was SAHA. The data also shows a high proportion of complaints for West Midlands.

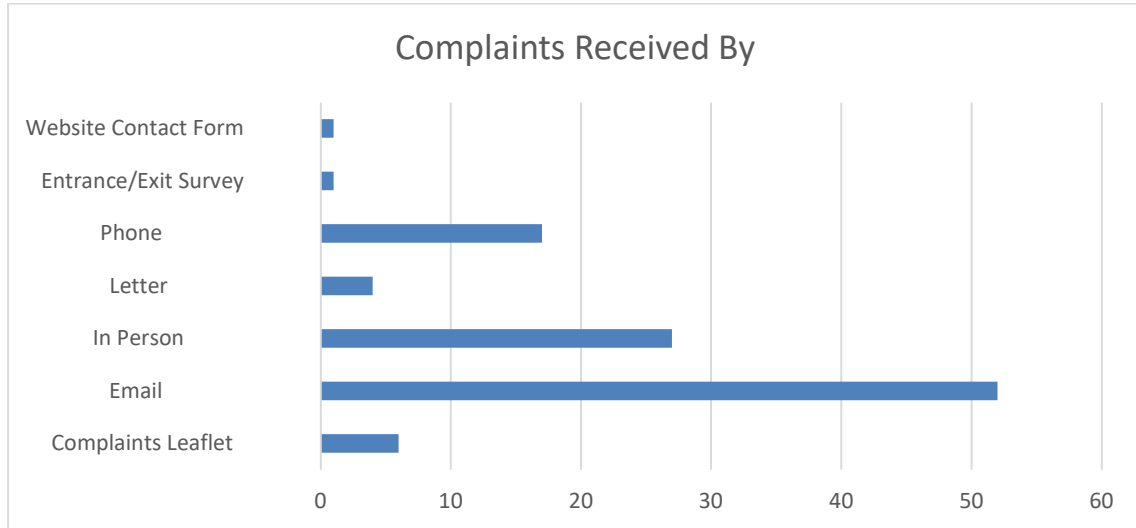


3.4. The chart below shows the breakdown of data by complaint types.



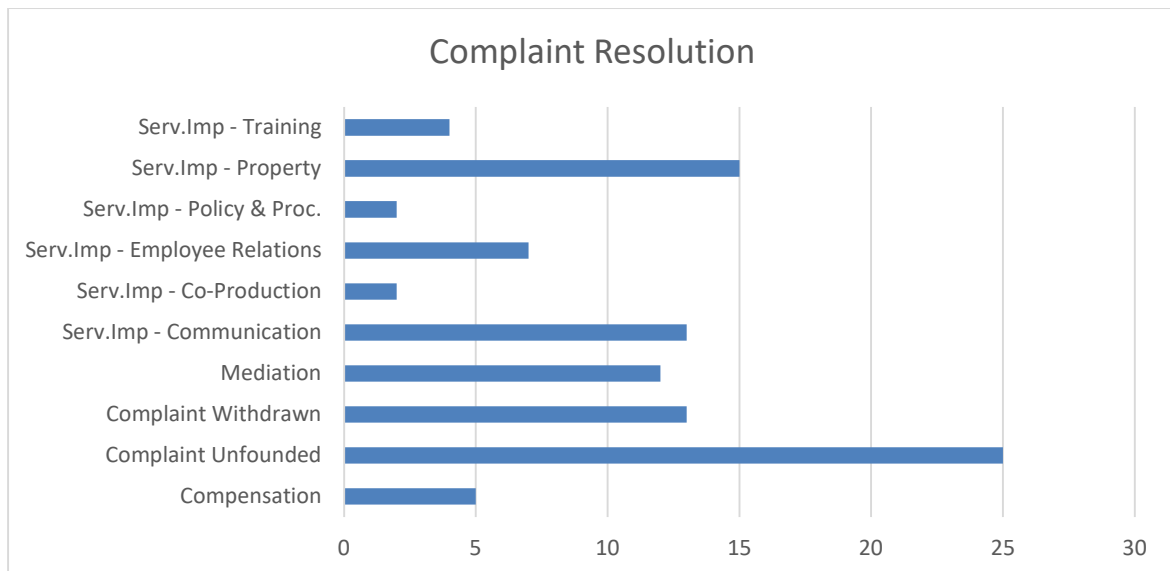
- 3.5 The data shows staff related complaints was the highest type of complaint received with an increase of 22% compared to 2023/2024. Themes for staff related complaints were under investigation with the quarterly working group assisting with remedies and solutions for improvement although a vast majority were closed unfounded.
- 3.6 Repair and Communication related complaints have significantly decreased year to date from previous analysis.
- 3.7 There was an opportunity to cross reference entrance & exit surveys to understand themes indicating areas of improvement for operations and housing/asset teams.

**4. How complaints have been received**



4.1 Reporting complaints in person and via email were the top methods used but a variety of methods remain equally available and utilised. The new website was introduced in December 2022, but figures recorded do not reflect this option being utilised. This will need further investigation with the Customer Services Team.

**5. Resolving complaints**



5.1 Complaint unfounded was the largest outcome response to complaints recorded. Service improvement (communication) and Complaint Withdrawn were the top resolution outcomes where a complaint was progressed under the new policy.

- 5.2 Data suggests that only 3 complaints escalated beyond regional manager status and 1 to the Housing Ombudsman Service. Issues have been identified with the administration of complaint stage on closure. This will be addressed in Q1 working group. The majority of complaints were resolved at first stage response which is a positive indicator.
- 5.3 Complaints were resolved within an average of **13.94** days showing an increase on the average of **7.59** days in 2023/24. However, this is still within the target of 15 days for completion.
- 5.4 73% of complaints were resolved within the 15 days policy target. All 27% of complaints that were closed out of target recorded a Delay Reason. This is a significant improvement compared to 2023/24 data where 51% of complaints closed out of target did not have a Delay Reason recorded.
- 5.5 On audit the quality of records has vastly improved compared to 2023/24 following the introduction of a dedicated Complaint Officer and regular data audits. However, there are still areas that can be improved. A key action area noted in the RSM audit and inherent issue with the Omni system and lack of automated safeguards available to alert staff/managers when policy is not being adhered to through workflows. The option to add mandatory fields and suitable workflows will be discussed with Omniledger following the implementation of Pyramid G2 in July 2025.

#### 5.6 **Ombudsman Complaint Handling Code Compliance**

The Housing Ombudsman Complaint Handling Code states that we must publish an Annual Complaints Performance Report, a Self-Assessment Report and the Self-Assessment Form on our website. We must also then submit a return and provide links to the above documents to evidence compliance with the HO Handling Code. Adullam complied with the above for 2023/24 with all documents made available on the website, and a submission made to the Housing Ombudsman on 17/06/2024. This was within the HO submission deadline of 30/06/2024.

#### 5.7 **Housing Ombudsman Complaint – Case ID - 202423469**

On 11<sup>th</sup> November 2024 we received an email from the Housing Ombudsman regarding a complaint received from an Adullam tenant relating to staff behaviour, the level of support offered, rent arrears and service charge arrears. The complaint had previously been actioned following the Complaints Policy and Procedure with the tenant not satisfied with Adullam's response.

The Housing Ombudsman requested that we provide a response within 15 working days. This was complied with, and a response was sent 23<sup>rd</sup> November 2024.

Following the response, the Housing Ombudsman informed us on 13<sup>th</sup> February 2025 that the case has now been placed in a queue and is awaiting allocation to a member of the Triage and Mediation team. Adullam were also asked to provide further documentation relating to the original complaint by 27<sup>th</sup> February. We responded to this request on 4<sup>th</sup> March 2025. We have received no further communication from the Housing Ombudsman regarding this complaint as of 23<sup>rd</sup> April 2025.

**6. RSM Complaints Audit**

RSM carried out a Complaints Audit in January/February 2025. Overall, there were 2 recommendations, all with a Low Priority (shown below).

Ref	Action	Priority	Responsible Owner	Date
1	The Complaints and Feedback Policy and supporting Complaints Guidance will be updated to provide specific detail on how to manage complaints that have been referred to the Ombudsman. Additionally, it will be ensured that details regarding the approval of compensation payments are consistent across all Policy / Procedure documents.	Low	TBC	TBC
2	The following will be considered <u>in regard to</u> the content / format of the quarterly Complaints reports: <ul style="list-style-type: none"> <li>Listing all complaint categories, even those with no complaints, to provide a comprehensive and consistent view of the <u>data</u>;</li> <li>Incorporating trend comparisons between quarters to track changes in complaint types and volumes over <u>time</u>;</li> <li>Structuring the report with sub-headings for easier navigation and summarising key insights <u>effectively</u>;</li> <li>Presenting data on how complaints were received using visual aids like charts and graphs; and</li> <li>Capturing lessons learned and actions taken to address complaints, to help ensure continuous improvement and accountability.</li> </ul>	Low	TBC	TBC

The Complaints Policy & Guidance have been updated to include details on how Adullam manage complaints that have been referred to the Housing Ombudsman.

The Compensation Policy is currently under review. Once this has been approved and published processes adhering to compensation will be added to the Complaints Policy and Guidance.

Consideration will be given to the recommendations listed in item 2 of the Audit that refer to the quality of the quarterly complaints reports, and we will be incorporating some of these recommendations in the coming reporting periods for 2025/26.

**RSM conclusion** - An appropriately designed control framework is in place. Our work has highlighted exceptions relating to consistency across policies / procedures in relation to compensation as well as details on the complaints

process wherever the Ombudsman is involved. We have also outlined some suggestions aimed at enhancing the content and format of reports presented to management and the Board. We have agreed a total of two low priority management actions to address the issues identified.





## 7. Conclusion & recommendations

- 7.1 There were a large increase of compliments from the previous year. Expansion of services, introduction of the website and the promotion of complaints/compliments across the association was having positive effect increasing numbers. Exit & Entrance satisfaction survey completion was improving, with positive results due to higher engagement under co-production and support. Complaints capture through poor exit reviews have increased which is a positive indicator.
- 7.2 Compliments received were up on 2023/24 logging positive interactions was much improved this year. Consideration to remove compliments out of the complaints module in pyramid was needed. Staff find this confusing and reporting was awkward. It also impacts on data quality and reporting efficiency.
- 7.3 Data suggests access to making a complaint was well promoted by the range of methods used and touch points evidenced.
- 7.4 Central services have seen a decrease in complaints received on the year 23/24. However, awareness and understanding is improving but the administration of central complaints has been identified as a concern and needs to be holistic in compliance timeframes. (Repairs and ICT Wi-Fi main themes.) Long delays identified are when litigation is apparent e.g. solicitor
- 7.5 A high proportion of complaints received were recorded as being from the West Midlands service. However, there has been an increase in compliments for the service compared to 23/24.
- 7.6 Complaint's data suggested a high proportion of complaints are unfounded. Understanding themes for this need's further investigation. This will be tasked to the quarterly working group and tenant engagement & satisfaction lead.
- 7.8 All staff are now required to complete the Complaints Handling Code Training that is available through the Housing Ombudsman Centre for Learning. Currently 222 have added the training to their PDP's on Cascade, and 156 are showing as having completed the training. Although there has been an improvement in these figures during 24/25, the training still need promoting within the services.

**Service Improvement** - Follow on work for 2024/25 completed/under way:

- Complaints Tracker Group – consists of lead officers throughout Adullam Homes who meet every quarter to review and monitor performance
- Complaints policy and guidance reviewed per new code
- Introduction of new code January/February 2024 – RSM review compliance against code from April 2024 with action plan
- Appointment of dedicated Complaints officer role with administrative

- review of data / complaint stages established.
- Completed new “Complaints Self-Assessment” and submitted to the Senior leadership Team.
  - The Complaints Officer, along with Omniledger has begun the process of exploring options to introduce capturing Complaints Satisfaction. This will be further investigated once Pyramid G2 has been implemented.
  - Compliments have shown a significant increase during the 2024/25 period, evidencing the excellent work carried out across all Adullam services.
  - Compliments are still recorded alongside Complaints within Pyramid. However, they are now reported separately and not included in the overall complaints data. This ensures the figures are now accurate and no longer skewed due to the compliments data no longer being included.
  - Complaints Handling Code Training added to Virtual College.
  - Complaints Audit carried out by RSM with positive results and an outcome of Substantial Assurance.

				Taking account of the issues identified, the board can take substantial assurance that the controls upon which the organisation relies to manage this risk are suitably designed, consistently applied and effective.
Minimal Assurance	Partial Assurance	Reasonable Assurance	Substantial Assurance	

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In the event of any queries please contact the report author prior to the meeting.

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