

Annual complaints performance and service improvement report



**Islington & Shoreditch
Housing Association**

Annual complaints performance and service improvement report

Landlords must produce an annual complaints performance and service improvement report for scrutiny and challenge, which must include:

- The annual self-assessment against this Code to ensure their complaint handling policy remains in line with its requirements.
- A qualitative and quantitative analysis of the landlord's complaint handling performance. This must also include a summary of the types of complaints the landlord has refused to accept;
- Any findings of non-compliance with this Code by the Ombudsman;
- The service improvements made as a result of the learning from complaints;
- Any annual report about the landlord's performance from the Ombudsman; and
- Any other relevant reports or publications produced by the Ombudsman in relation to the work of the landlord.

Complaints self-assessment

In 2023-24, we updated our complaints policy to be fully compliant with the Complaints Handling Code. We received confirmation of our compliance from the Housing Ombudsman in July 2023.

We subsequently updated our complaints policy in line with the updated complaint handling code, which became statutory requirement on 1 April 2024. Our updated complaints policy also came into effect on 1 April 2024. We have completed the complaints self-assessment against the new code, which can be found in full at Appendix 1, and believe that we are compliant.

An all-staff briefing was held in April 2024 on the new Complaints Handling Code and ISHA's updated complaints policy to ensure all staff understand the new statutory requirements.

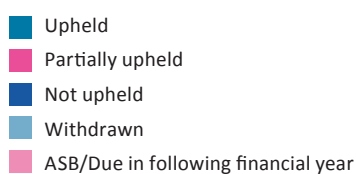
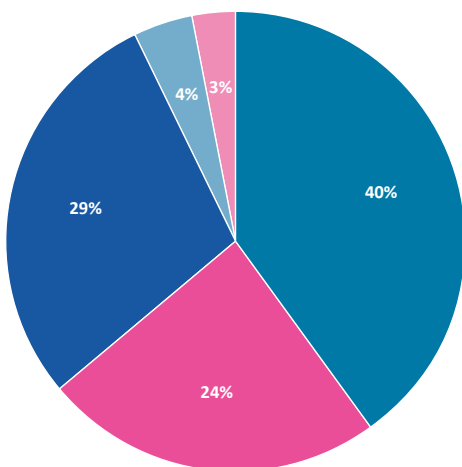
Analysis of ISHA's complaint handling performance

Stage 1 complaints

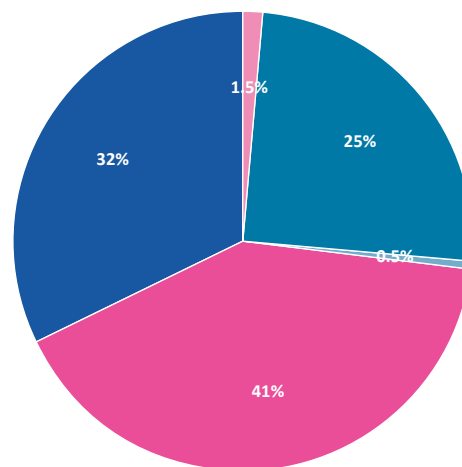
In 2023/24, ISHA had 242 total complaints, of which:

- 81% were responded to in policy timeframes
- 64% were upheld or partially upheld
- 29% were not upheld

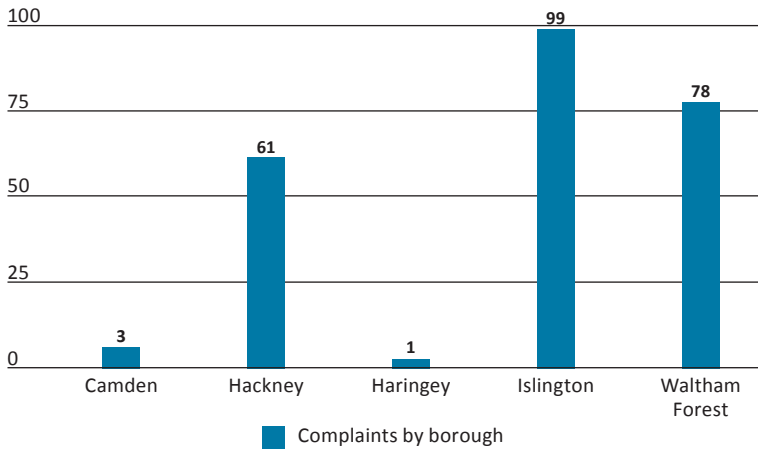
Stage 1 complaints findings



Stage 1 complaints by borough



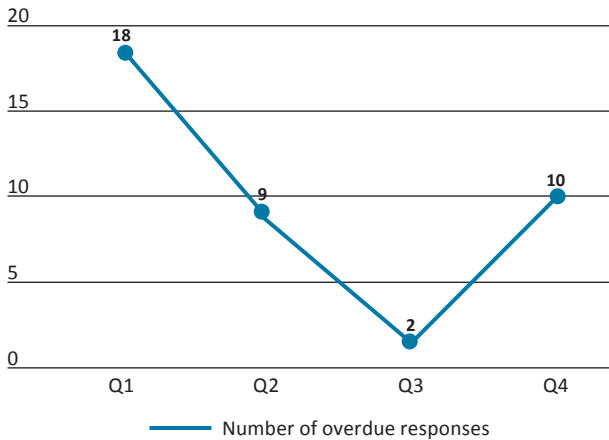
Stage 1 complaints by borough



Timeliness

Forty-five (19%) stage 1 complaints were closed outside policy timeframes during the year. Timeliness was a key focus during the year and the complaints team made a concerted effort to deliver improvements each quarter. Due to sickness and annual leave affecting resourcing in Q4, with both complaints officers off at the same time for periods, we lost some of these gains. We acted swiftly to address the decline and at the beginning of the new financial year, performance improved again.

Number of overdue responses



We focused on response times initially and quickly learned that we needed to balance that with the quality of our responses, as we saw an uptick of complaints escalating to Stage 2 due to issues not being fully addressed at Stage 1. We have introduced a number of checks and balances to ensure that complaints are fully addressing each complaint point at Stage 1, while still meeting deadlines. For complex complaints that involve multiple departments, we gather relevant team members to discuss all the issues at once and coordinate the response through the complaints team. This also ensures the complexities are understood by relevant staff. The complaints team also meets weekly with the repairs team, who have the highest number of complaints and therefore the highest demand on their time for both complaint responses and commitments. The team ensures responses are reviewed by another team member, or if complex, a manager, before they are sent.

A live complaints report is circulated to managers each week, who then follow up any outstanding questions with their teams to ensure timely and high-quality responses.

The commitment log is also circulated weekly to ensure that teams are aware of outstanding commitments and the deadlines for delivery.

This has resulted in staff across the business having greater awareness of and engagement with our complaints process, which in turn has improved response times and the quality of complaint responses. Staff also appreciate the impetus for the service improvement actions that have come about as a result of complaints.

Stage 2 complaints

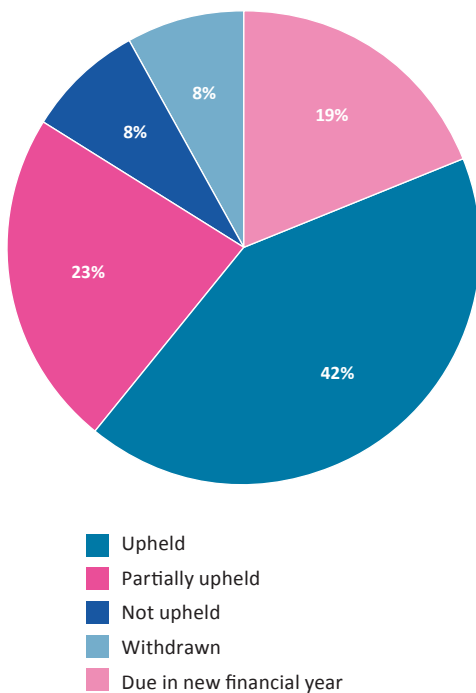
Just over 10% of our 242 Stage 1 complaints were escalated to Stage 2, with 26 complaints moving to Stage 2 in total. Of these:

- 88% were responded to in policy timeframe
- 65% were upheld or partially upheld
- 8% were not upheld

Timeliness

Three of the 26 Stage 2 complaints were closed slightly outside the policy timeframes, one in Q2 and 2 in Q4. One was a single day late and the other two were two days late. One of these was attributed to human error as the case handler recorded the wrong date in their diary and did not realise until sending the response. The complainant was contacted with an apology, and they confirmed they were happy with the Stage 2 outcome. The other two were delayed due to not having received required information from colleagues, and we have now changed our processes to ensure we escalate sooner to avoid this in future.

Stage 2 complaints findings



In general, Stage 2 responses consistently maintained Stage 1 findings, with only 15% (4 of 26 cases) resulting in a changed outcome at Stage 2. However, we did identify trends of escalations due to Stage 1 complaint points only being partially addressed or compensation being considered inadequate.

Stage 1 findings compared with Stage 2 findings

Of the 26 complaints escalated to Stage 2 during 2023/24:

- 13 were upheld at stage 1 – all of these were upheld at stage 2 as well
- 5 were partially upheld at stage 1 – one was revised to upheld
- 8 were not upheld at stage 1 – two were revised to partially upheld and one was revised to upheld.

MP and Councillor enquiries

We received 33 MP and councillor enquiries. These are quite often raised with the MP or Councillor at the same time as a complaint is raised with ISHA, and we can advise on the status of the complaint and provide assurance that we are taking the complaint seriously. Sometimes, an MP or Councillor enquiry would alert us to a complaint that had not been forwarded to the complaints team for acknowledgement. An all-staff briefing on the complaints requirements and regular internal communications has improved our performance in this area but as we are conscious of new staff and keeping our knowledge up, this is an area of continued focus. Complaints handling will be included in our corporate induction going forward. We also include regular updates in team meetings as well as on our internal communication channels.

Ombudsman cases

We received four determinations from the Housing Ombudsman in 2023/24, all of which were submitted in previous financial years. The findings across the four cases included:

- 4 findings of maladministration (across three determinations)
- 1 finding of service failure
- 2 findings of adequate redress (separate cases)

We met all the orders and recommendations for these determinations. In most cases, we had implemented learnings and updated our processes ahead of receiving the determinations.

Ombudsman determinations in 2023/24

Case 1

Two counts of maladministration relating to handling of damp and mould reports and how ISHA handled the formal complaint. We were ordered to apologise in writing, pay increased compensation, arrange for a qualified surveyor to post-inspect the work. We were also recommended to carry out a review of our handling of the repairs and complaint in the case and provide a copy of the review to the Ombudsman.

Service improvements: this case was from 2021, before a complete overhaul of both our damp and mould handling and our complaints handling approach.

- **Damp and mould** – We now have a dedicated damp and mould reporting process in place, which is monitored weekly and reported to the Leadership Team at their fortnightly meetings. All reports of damp and mould are investigated and categorised according to severity, and actions prioritised accordingly. Works orders and progress are monitored until completion and residents are contacted again after six months to catch any returning issues and be assured that the root cause has been rectified.
- **Complaints handling** – An internal review of this complaint highlighted several failures in our approach at the time. We have increased our complaint handling resources and overhauled our approach to fully comply with the Housing Ombudsman's Complaint Handling Code since this complaint. We start from the perspective that something has gone wrong, and the investigation concentrates on how to resolve the issues that have been raised.

Case 2

One count of service failure on handling of reports of damage and subsequent compensation. One count of adequate redress for complaint handling. Increased the compensation amount by £100 and recommended a review of our complaints handling and record keeping processes.

Service improvements: this case was also from before we overhauled our complaints handling approach and added additional resources to ensure the team had capacity to respond to complaints in compliance with the Complaint Handling Code. An internal review of this complaint highlighted several failures in our approach at the time, including a failure to follow up on commitments made as part of the complaint resolution and gaps in our record keeping. We have procured a new housing management data base, with specific complaints handling capability, which will be implemented in the coming year. In the meantime, we maintain a dedicated complaints handling log, which contains key information of every complaint we receive, including dates, correspondence and decisions. We also maintain a dedicated commitments log, which is reviewed weekly with responsible parties to ensure that commitments made to resolve a complaint are met within a reasonable timeframe.

Case 3

One count of reasonable redress regarding handling of repairs, one count of maladministration regarding record keeping.

Service improvements: this was an historic complaint case and we have changed our record keeping approach since the case, which was demonstrated to the Ombudsman. We have also procured a new housing management database, which will be implemented in the coming year, and we expect will make a significant difference to our ability to manage complex issues across ISHA.

Case 4

One count of maladministration regarding handling of repairs. The resident confirmed in writing that they were happy with the outcome at Stage 2, however, the Ombudsman found maladministration in handling of repairs and ordered increased compensation.

Service improvements: an internal review of this complaint highlighted that this was a particularly complex case regarding repairs to a boundary wall where ownership and responsibility was unclear. Progress was stalled due to busy staff failing to follow up with involved third parties to obtain the necessary agreement for works. We now maintain a dedicated commitment log to monitor progress of commitments made to resolve complaints, with weekly progress meetings ensuring oversight.

Ombudsman submissions in 2023/24

We had five cases and two enquiries submitted to the Housing Ombudsman in the period. We provided the required information for the enquiries and several of the cases and at the end of the 2023/24 financial year, we had not received determinations.

Complaints we do not accept

We rarely refuse a complaint, but we have included the types of complaints we may not accept in our updated complaints policy:

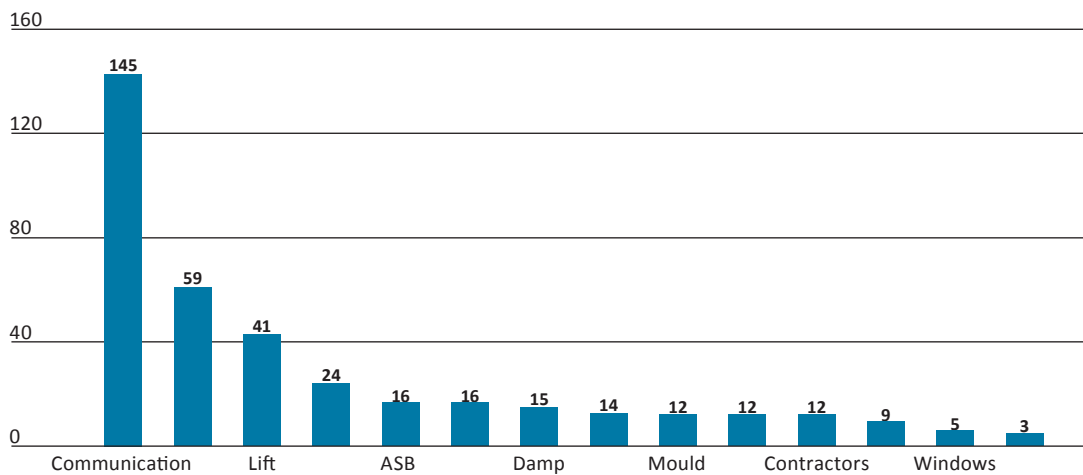
- The issue giving rise to the complaint occurred more than 12 months ago.
- Matters are being taken through ISHA's insurance claims procedure
- The complaint is made by one ISHA resident against another resident. ISHA has a separate Anti-Social Behaviour policy to investigate such claims. However, we will investigate a complaint about how an ASB case or service request has been handled
- A complaint is already being dealt with as a complaint (unless there is new evidence/information provided regarding a closed complaint)
- The complainant is unreasonable, in line with our 'Dealing with unreasonable or unreasonably persistent customers' guidance.
- The issue is part of an ongoing legal matter, which has been initiated by the resident or ISHA
- It is a complaint about an outcome or judgment made by a court or tribunal
- If we receive legal instruction or correspondence during the handling of a complaint, we reserve the right to hand over the case to our legal representative and write to inform the resident the complaint is closed.

In 2023-24, three complaints were raised as Anti-social behaviour (ASB) cases rather than as complaints. Prior to the new code going live in April 2024, we also refused a small number of Stage 2 escalations as the commitments made in Stage 1 were progressing and therefore on their way to resolution. Where cases become formal disrepair or other legal concerns, we reserve the right to refer the case to our legal representatives and in this case will close the complaint. We had one case that was also raised as a disrepair case but in the end the disrepair case was closed, and the matter was addressed through the complaints process.

Complaint themes

Throughout the year, we have monitored terms that frequently appear in our complaints, and drawn broad themes based on the frequency of their appearance. Poor communication is frequently raised as the main reason or as a secondary reason for a complaint and has therefore been a key area of focus for our service improvement work.

Frequently mentioned complaints terms



Through analysis of the complaint themes that emerged from our own complaints process and from determinations from the Housing Ombudsman, we identified further key areas for service improvement.

- Poor communication - particularly in relation to communal repairs
- Lack of responsiveness to resident enquiries
- Repairs taking a long time
- Poor performance from contractors
- Record keeping
- Complaints handling

Findings of non-compliance with the code

In 2023-24, we had 45 (19%) stage 1 complaints and three stage 2 complaints that did not meet timescale requirements.

Learnings and service improvement

Based on learnings from complaints, feedback from residents and getting our staff out and about, we have made concerted efforts to develop a positive complaints culture and improve our complaints approach over the past 12 months, including shifting to a common goal of learning from the feedback and seeing complaints as a learning opportunity. With more staff awareness of service failures and input into solutions, we have much more traction on service improvement initiatives. Where previously, we were able to identify learnings but not implement them consistently, it now feels that we are all pulling in the same direction, with a common goal of learning from complaints and improving our service to residents.

We reintroduced regular face to face resident events, Neighbourhood Nights, which bring many of our staff out to meet directly with residents and hear about their experiences, as well as their thoughts on how we could improve. Our Board members also make the effort to attend these events when possible. Our strengthened Resident Scrutiny Panel has provided a strong steer on service improvement priorities, meeting with the Board and senior ISHA staff to discuss their concerns and ambitions for ISHA.

Leading by example, the ISHA Board begins meetings with a 'Residents' Voice' standing agenda item, to discuss resident feedback and emerging themes. Both Board and Leadership Team conduct site visits, planned and spontaneous, to hear from residents and see first-hand how homes are repaired and maintained. It has brought the complaints to life for staff, leadership and the Board and strengthened our overall focus and cultural understanding of the issues raised. We are better able to take lessons from the themes of the complaints coming in and from reviewing the reasons for complaints escalation. Setting up the conditions for taking action and delivering service improvement has been the step change we've achieved this year.

Identified themes and areas for improvement

Poor communication is the most raised issue and is often either the primary complaint or included in a complaint about another service failure. It is also an area we have been discussing with our Resident Scrutiny Panel.

We recognised we were particularly poor at communicating when a communal repair was required. We were not informing residents that the repair had been raised and next steps, which meant multiple residents would raise the same issue. We were also only communicating with the specific resident who had raised the repair, so other residents did not receive updates as the repair progressed. This approach has been particularly problematic in the case of lift repairs, which are already highly emotive as so many people rely on them, and they can take a long time to repair if replacement parts are required. We have reactively communicated with residents rather than being proactive and often failed to provide support and compassion.

We have taken steps to improve our processes and to template communication tools for common communal issues, including lift repairs. We now have a process in place to send out regular communication by text message and email throughout a lift repair – with specific stages identified and templated to ensure consistency. This includes offering assistance to carry items up and down stairs if the sole lift is out of service for more than two weeks and a lift service charge refund if the sole lift is out of service for more than a month. We also provide a minimum of weekly updates with additional information provided as we receive it from our lift contractors. Additionally, we are providing more communication via our newsletters and website about the process for lift repairs and why they can take a long time. We are seeing the benefits of this more proactive approach and continue to refine the process as we receive feedback from residents. We have identified other communal repair types for a similar process of templating communication and support offered.

Lack of responsiveness is another common theme and has been more difficult to identify the root causes for, as we know our staff are dedicated and want to provide good service. We have explored the following probable causes, in the knowledge there is more to do:

- Our current housing management database is no longer fit for purpose, and does not capture resident interactions in the way we need it to. We have implemented additional processes to address this until our new Housing management database is implemented, but as it requires the use of separate systems and spreadsheets, it takes additional resources to maintain and is less than ideal for busy staff. We eagerly anticipate the benefits of our new system going live and being able to handle all our interactions seamlessly.
- We have also identified confusion on who should respond when multiple staff are included in an email from a resident. It can result in the resident receiving multiple responses or none at all, and neither of these approaches is helpful. We have

implemented an inbound email process to address this, and we continue to review its effectiveness, based on feedback from residents and staff.

- Lack of ownership of an issue. We have also identified that our processes can be siloed, which means that once a staff member has completed their part of the process, it is handed to another team to pick up the next part of the process. This means that no one is responsible from the beginning to the end and therefore things can be missed if there is a deviation or interruption. This will be helped with the implementation of the new housing management database, as it will include workflows and escalations. We are working with residents and staff to find interim solutions until the database is live. When issues are raised to a complaint, the complaints team takes responsibility for maintaining communicating until the matter is resolved fully. This often includes weekly updates to the complainant to advise of progress or to maintain contact in the absence of an update.

Repairs taking a long time

Our repairs policy states that emergency repairs must be attended within 4 hours and all other repairs offer an appointment at the resident's convenience. We monitor our rates of 'first time fix' to assure ourselves that repairs are being completed in a timely fashion. However, we still receive relatively high numbers of complaints about repairs taking a long time to complete. Through analysis of these cases, we have identified where issues are complex and we cannot achieve first time fix, the follow-on process can let us down. In some cases, the follow-on appointments are not communicated back to ISHA by the contractors, or appropriately raised and approved internally and this causes delays. Now that this has been identified the assets and repairs team is reviewing their processes to ensure that follow up works are scheduled when required.

Poor performance from contractors

Contractors are often 'the face of ISHA' for our residents and therefore, we expect them to operate in line with our values and service level agreements. Complaints from residents have variously raised issues of poor workmanship, poor attitude and poor attendance from the various contractors who deliver our repairs and maintenance services.

This is also an area highlighted by our Resident Scrutiny Panel for additional scrutiny and we will be working with residents to better understand their experience of our contractors, who are often the face of ISHA.

We include residents as part of the procurement process and are working with our Repairs and Resident Scrutiny Panel members to raise the profile of resident involvement in this area. We have tightened our contract management processes internally, including specifically raising concerns from residents as soon as we are made aware of them and applying penalties for non-compliance. We have recently developed a contractor code of conduct, which was also reviewed by the Resident Scrutiny Panel, and all contractors will be required to sign up to it in future. We will continue to work with our Resident Scrutiny Panel members to scrutinise contractor performance and implement service improvements based on resident feedback.

Record keeping

Record keeping has come up several times in Ombudsman determinations and we know it is currently an area of weakness. There are two key reasons for this:

- Old housing management system – our current housing management system is no longer fit for our needs and we have procured a modern Housing Management and Finance database to better support our requirements. This is a live project, and we expect to have the first phase live in Spring 2025. In the meantime, several of our key services – including complaints are logged on separate systems, which means staff have to access multiple systems when talking with residents. We know it is disjointed experience for both staff and residents and we all look forward to the new customer-focused system when it goes live.
- Cybersecurity attack – In early 2022, ISHA experienced a criminal cyberattack that shut down our entire network for several months. We were well supported by cyber experts who worked tirelessly to restore as much as possible, but there were some records we were never able to recover, and we also had limited record keeping capacity in the aftermath of the attack when we were providing services with limited systems access. This has been particularly problematic in providing evidence to the Ombudsman for complaints prior to the attack. The majority of those cases have now concluded and remaining cases are from complaints raised after the attack. We have all had significant data protection and records management training since that time so all staff are more aware of what records should be kept and how.

Complaints handling

A review of the reasons for escalation to Stage 2 highlighted that the quality of our stage 1 complaint responses needed to be improved. Most notably, not addressing all the issues raised in the complaint, taking a defensive stance and failing to show compassion for the experience of our residents. The reasons for escalation to the Ombudsman are less clear. We have had 7 cases submitted to the Housing Ombudsman and two enquiries, compared with 2 cases in the previous financial year. This is a large increase and may be due to the increased public visibility of the Ombudsman's work. We have had four determinations delivered in the same period, with a mix of findings including maladministration, service failure and adequate redress.

We expect the number of cases going to the Ombudsman will be higher under the updated code requirements and therefore, our focus will continue to be on improving our complaints resolution and redress to assure the Ombudsman we are responding to resident complaints as we should be and learning from the feedback.

We have therefore completely changed our approach in the past six months and now start from the perspective that something has most likely gone wrong with our service and focus our investigation on how we can make it right. We have updated our templates to ensure that responses include key information so that even when timeliness is the priority, quality is not reduced.

For complex complaints that involve multiple departments, we gather relevant team members to discuss all the issues at once and coordinate the response through the complaints team. This also ensures the complexities are understood and can be catered for by relevant staff.

A live complaints report is circulated to managers each week, who then follow up any outstanding questions with their teams to ensure timely and high-quality responses. The commitment log is also circulated weekly to ensure that teams are aware of outstanding commitments and the deadlines for delivery.

The Senior Executive responsible for complaints meets with the Complaints team weekly and has live access to the complaints and commitment logs. The Leadership Team and the ISHA Board receive quarterly updates on complaints handling performance and service improvement areas. The Leadership Team is actively engaged with complaints handling and directors are involved with Stage 2 complaints and providing guidance on service standards where relevant. With the introduction of the requirement for a Board level Member Responsible for Complaints, we are fortunate to have a Board Member with direct customer experience and complaints handling experience at a senior level, to add additional scrutiny and, most importantly, support in making important improvements.

Policy

Significant work went into updating the Complaints policy after further changes to the Ombudsman's complaint code in 2023. The updated policy and self-assessment were both confirmed as compliant by the Ombudsman in July 2023. The Ombudsman subsequently consulted on further updates to the code, and we provided a response, which highlighted some concerns, while proceeding on the assumption that the changes would be implemented.

The revised statutory code was published in February and enforceable from 1 April 2024. Our updated policy was approved by the ISHA Board in March 2024.

An all-staff briefing on the updated code and ISHA's updated complaints policy, was held in early April 2024. The new code and policy were communicated in resident communications – online, in our digital newsletter and our printed resident magazine. The new reporting requirements include an annual complaints report, self- assessment and Board's response to both to be published on our website by 30 June 2024 and submitted by form to the Housing Ombudsman.

Looking forward

Complaint themes have contributed to the identification of two key areas of focus and we have large improvement projects underway.

Improving our record keeping

We have procured a new housing management and finance database to streamline to better manage our resident and property data and ensure a resident-focused approach to our work. The new system includes complaints management capability, which will streamline complaints administration and tracking, which currently requires the use of three separate systems to manage. It will also provide a more joined-up view of resident conversations which will help colleagues provide a more seamless experience. This will significantly improve resident experience overall as they will not have to repeat their questions and concerns every time they call in. The system also includes workflows and escalation prompts so that we can track calls through to resolution.

Improving our communication

We know that communication is an area of weakness and we identified that residents had a different experience depending on who they were liaising with. In early 2024, we established an ISHA-wide initiative to identify our approach to communication and how that translates into resident experience. Resident and staff interviews, staff workshops and a review of our written and verbal communication informed a comprehensive report on our current communications approach, with recommendations for improvement.

From this work, we are developing a communication framework and templates for an ISHA tone of voice and communications approach. This is intended to raise our communication standard and provide consistency across the organisation. This will include communication toolkits for frequent communication needs – including lift repairs and planned works, which often suffer from an inconsistent approach.

We are also redeveloping our website to better support resident information needs. We are working with resident representatives to inform the redevelopment process and understand their communication needs and preferences. The communication framework will be instrumental in redeveloping the content that goes into the new website.

We are introducing a resident self-service portal as part of the new housing management system, which will support rent queries and reporting and tracking of repairs. This will significantly improve transparency and accessibility for our residents. We know that self-service is not for everyone and we will continue to support resident queries as we currently do. But we do recognise that self-service options are now an expected norm and it is important that residents have the option to access rent and repairs information easily and when it suits them.

Annual landlord performance report produced by the Ombudsman in relation to ISHA's complaints handling

Ombudsman's Landlord Annual Report for 2022/23

In 2023, the Housing Ombudsman published a 2022-23 individual landlord performance report for ISHA, based on ISHA receiving **5 or more findings** determined between 1 April 2022 and March 2023. On the basis of 2 cases that included 6 findings, the Housing Ombudsman stated we have a maladministration rate of 67%, which is higher than the national average of 55%.

We missed the deadline for commenting before the report was published, but we believe that a single case with poor outcomes for the resident has skewed the figures significantly. Another way to look at it would be 50% of our cases (1 of 2 cases) had no maladministration findings and 50% of our cases (1 of 2 cases) did have maladministration findings.

In the case with 'maladministration' findings, we agree we fell well short of the service standard we strive for and let down a vulnerable resident. Since this case, and before the Ombudsman's determination, we applied the learnings from this case and made improvements to our approach to planned works and how we support vulnerable residents who are impacted by them. The Ombudsman's investigator acknowledged in their case report, the lengths that ISHA went to resolve the issues once the complaint had been raised.

The Housing Ombudsman's annual complaints review for 2022- 23 also revealed that the number of severe maladministration findings increased by 323% overall. ISHA had no severe maladministration findings for the period, which also supports our case that we are responding to service failures and complaints in accordance with the code.