

Purpose

CHADD welcomes complaints and looks upon them as an opportunity to learn, adapt, improve and provide better services. Complaints help us to know if our services are getting something wrong and we can put it right, learn from mistakes and ensure it does not happen again.

CHADD's Governance arrangement is to delegate to the P&S (People & Standards) Committee oversight of our Complaints process and cases.

The aim of this report is to provide an annual summary of complaints received during the financial year as per the new Complaint Handling Code.

The new Complaint Handling Code from the Housing Ombudsman service became statutory on 1 April 2024, meaning that registered providers are obliged by law to follow its requirements. The Code aims to achieve best practice in complaint handling and ultimately to provide a better service, and greater agency to residents.

The Housing Ombudsman requirements include that we submit an annual report to the board and to the Ombudsman on all complaint's activity, including an annual review of the self-assessment process. We need to submit and publish the annual report and self-assessment on our website for within 6 months after their financial year-end (being a landlord with less than 1,000 homes).

The board, and delegated committee, are to provide oversight and accountability, a focus on improvements and ensure compliance with the Code. The board should provide an official response as part of the reporting requirement and space is provided at the end of the report for this.

For Approval: Annual Report.

Financial Year	2024-2025
Reporting on	April 2024- March 2025
Written by	Suki Kaur (SK)

Updates

Number of cases for this financial year (last financial year = 15)	15
Open	0
Service Requests (informal) CHADD recognises a service request is when a customer is unhappy with a situation that they want to have resolved. CHADD works on the basis that wherever possible, complaints are best resolved directly with the complainant and those providing the service at a local level. There were no complaints as part of the service request category or they escalated to stage 1.	0
Stage 1 If the complainant has spoken to their Support/Care Worker or Housing Officer and their Manager informally about issues and feel these have not been resolved locally, they can escalate their complaint to a more senior manager using any method they are most comfortable using. They can also go directly to stage 1, for example the complainant requests for a Head of Service to investigate.	15

There were 15 instances where this escalation was triggered or they went directly to stage 1, and 100% of the cases were resolved at Stage 1 within the timescales.	
Stage 2 is where complaints are not resolved at local resolution or stage 1 and they are escalated to the CEO. No complaints were escalated to Stage 2.	
Timescales are to: • Acknowledge any stage complaint within 5 days • Stage 1 - aim to investigate and respond in 10 working days from acknowledgement • Stage 2 - aim to investigate and respond within 20 working days from acknowledgement	
Closed	
All cases closed without going further than stage 1, and all within the allotted timescales. Therefore 100% of cases were closed within the target timescales.	
Cases still open	0
All cases have been resolved.	

Cases broken down by team:			
Service	Informal Service Request	Stage 1	Total
Sheltered (97)	0	7	7
Care (41 + Outreach)	0	2	2
Domestic Abuse (38 + Outreach)	0	3	3
Young People/Families (46)	0	3	3

Complaints categories and cases by services					
Complaint category	Sheltered	Care	Domestic Abuse	Young People/Fams	Total
Anti-Social Behaviour or Neighbour issues	3				3
Process			1		1
Service delivery, quality of service		2	2		4
Repairs or Facilities	4			3	7
					15

Complaints received and any lessons learnt
There were no complaints relating to our handling of mould, damp or condensation during the year.
Anti-social Behaviour/Neighbour Complaints 20% 20% of all complaints related to neighbour disputes or minor anti-social behaviour between residents living in our sheltered housing schemes. These were minor issues raised about neighbours' actions. Two of the cases were reported anonymously relating to the same thing. Both two anonymous cases named a specific flat having moved their son in, and on direct conversation with the tenant no evidence was apparent to support the complaint that they had moved in their family member permanently. Due to the anonymity these were addressed with complainants through tenant meetings, refreshing on complaints process, tenancy obligations and reminding all tenants that this is their home and they have rights to visitors and family staying.

Process 7%

This one complaint was a former tenant, who requested significant compensation for items that were disposed of once she had moved on, the tenant contacted us after six months of leaving the scheme. A full investigation was carried out, a home visit was carried out by JR and SK as the individual is unable to communicate on phone or leave her home and email was becoming inefficient. We were unable to find evidence for the items ever being there or disposed of, however, a £50 gift card was given as a good will gesture to acknowledge the incident.

Lessons learnt – we did not have robust evidence about whether the items were there or not, and whether we had attempted to contact the individual to arrange collection. The Move on Policy and procedure has been amended to include a process around disposing of personal items left by a former tenant, this includes taking an itinerary, photos where possible, logging contact made with former tenant to arrange collection of items. It is important to have this evidence to safeguard the individual's belongings and prevent any accusations against CHADD and complaints.

Service Delivery & Quality 26%

One of the 4 cases was a significant complaint about how a service users' concerns regarding a support Worker (conduct, taking advantage of donations, breaching professional and confidentiality boundaries) was dealt with by their Manager, at local resolution stage. The complaint was escalated to Brindley House and initial investigation revealed there were safeguarding concerns as well as the complaint being handled poorly. The two colleagues (manager and support worker) were suspended whilst a full investigation was carried out and the findings and outcome resulted in dismissal for both posts.

Lessons learnt – following the above at the Leaders forum refresher training was delivered by Kelly Joynes (using the above as a case study), covering complaints and safeguarding crossover, impartiality and best practice. A Donations process was put in place as we did not have one and it now includes a central log of items donated and how and who they are allocated to.

Lessons Learnt - In care the family's expectations exceeded what we are there to deliver, we also underestimated the impact of being late to an appointment or making last minute changes to a rota has on an individual with autism.

Lessons Learnt – in care some mutual understanding about roles, responsibilities and expectations was required and was resolved by compromise.

Lessons Learnt - in the Care team a need for training was identified so that the team better understand Autism and be adaptable to individuals service user needs when delivering care and support.

Repairs or Facilities 47%

These were minor issues such as Wi-Fi reliability, heater or CCTV not working (young people), water leaks gardening or window cleaning services being late to be completed (Sheltered), these were all resolved with the support of the Asset Team, in some cases such as CCTV not working other members of the team worked flexibly and based themselves from the scheme so that the tenants felt safer until the repair was completed.

In one case the storage heater was not working and it was due to the Electricians working in the flat and they contributed towards vouchers, it was also rectified immediately as we had another contractor on site who could resolve the issue with the heater.

Lessons Learnt – in the previous year the foyer had some major works happening at the same time (refurbishments, new bathrooms and electrical work), different contractors were completing different jobs and communication and coordination could have been better.

Tenants Survey – summary of results on complaints

- Full results provided in pack
- The survey was reviewed to only include the mandatory questions required by the regulatory standards to meet Tenant Satisfaction Measures.
- Overall there was a decrease in responses of 6% from 2023/2024. We feel this is due to a new approach we have used (a digital QR code), some tenants may not have felt comfortable using this

approach. For the next survey we will use a hybrid approach of digital and paper versions of the survey and we will remove the option of a 0 score.

- 79% of respondents were satisfied with CHADD's approach to complaint handling (this is an increase from last year's 58%).

Summary

Overall, we have a low number of complaints and most issues are resolved at a local level or at most stage 1 very quickly as we provide specialist supported housing with a significant number of services staffed 24/7 therefore we are in a position to have ongoing and efficient dialogue with our tenants and service users.

Governance

- The complaints procedure continues to be picked up during scheme audits where the team are questioned on how they deal with a complaint and how they would support a service user/tenant to do so.
- As the Board Complaints Lead Sue Haywood continues to monitor complaints informally as they happen and formally through quarterly meeting with CHADD's complaint lead and reports back to the wider Board.
- Complaints Policy & Procedure is live and up to date.
- Self-assessment forms are in place and 2025-26 to be completed, approved by Board, submitted to the Ombudsman, approved and published on CHADD website by September/October 2025.
- On approval of this internal report by Board it will be published on the CHADD website.
- Complaints data reported to P&S Committee on a quarterly basis.
- All complaints information made available on the CHADD website.

Complaints Policy Updates

The following section was added to the complaints Policy and procedure, following the complaint where the outcome was dismissal of two colleagues:

- Complaint about a member of the team - In the event of a complaint raised about a member of the team, it should be considered whether other procedures need to be implemented alongside the complaints procedure. Are there any safeguarding concerns? Has there been a breach of code of conduct or professional boundaries? Disciplinary – suspending if complaint serious. This is keeping both parties safe and we can investigate with fairness and impartiality when hearing the complaint. Consider another colleague from another team to hear the complaint to ensure impartiality.

Embedding Complaints as a Positive Culture

Our Complaints policy states 'CHADD welcomes complaints and look upon them as an opportunity to learn, adapt, improve and provide better services. Complaints help us to know if our services are getting something wrong and then we can put it right, learn from mistakes and ensure it does not happen again'.

To achieve this:

- We have provided regular training to Leaders, equipping them to cascade this down to teams. We aim to have this as an ongoing agenda item
- We have a leaflet and service standard readily available and displayed for tenants and service users
- We have an easy read version of our complaints policy
- We have been transparent by meeting the Housing Ombudsman expectation and publishing our annual complaints report and self assessment on our website
- We have allocated an internal independent (from the services) complaints lead to monitor complaints who in their role is able to make changes to processes and training from lessons learnt
- We have ensured we have a dedicated complaints lead on our board to hold us accountable
- We thank tenants and service users for their feedback and acknowledge it supports us to improve

- The Sheltered team held tenants meetings at all schemes in October 2024 and March 2025 to highlight the policy and how important it is to report complaints to enable us to improve our service. All tenants were given a Chadd's 'how to complain about a Chadd service' leaflet and the complaints process was explained and understood by tenants. During team meeting we discuss any complaints that have been received within the reporting quarter and try and resolve the complaint before stage 1
- The Care team use the easy read complaints policy and other visuals to discuss complaints.
- Domestic Abuse Refuges display the leaflet in communal areas and have these on the house meeting agenda
- Head of Care audits include asking if a service knows how to make a complaint, whether the team know how to deal with a complaint and how they would support a service user/tenant to do so

Focus for 2025-26

- Tenant satisfaction measures – implement a hybrid approach of paper survey and digital form
- Further training and refresher and awareness raising for any updates and changes
- Completion of 2024-25 self-assessment and submit to Housing Ombudsman within 6 months from end of financial year (September/October 2025)
- Update and review Complaints Policy and Procedure if required following completion of self-assessment or lessons learnt
- Embedding a positive complaints culture
- Benchmarking our performance with the supported housing benchmark club with Acuity
- Resident's Committee Launch – focus on complaints and improvements
- Explore having a complaints month to raise awareness, could link this to the residents committee and have them lead on it

Board/Committee Response:

The People & Standards Committee and Complaint Lead on the Board were happy with the contents of the Annual Complaints Report for 2024-25 when reviewed at their meeting on 14th July 2025. The Report was commended to the Board for approval at the Board Meeting held on 22nd July, 2025. The Board noted the contents of the Report and appreciated the work that goes into the timely investigation and resolution of complaints. The Board approved the Report unanimously.

Date of Meeting: 22.07.25