Nehemiah Housing Annual Complaints Handling Self-Assessment 2026

(Complaint handling briefing (aligned to the Housing Ombudsman Complaint Handling Code)

This self-assessment sets out how Nehemiah Housing's complaints policy and practice align with the Housing Ombudsman's Complaint Handling Code. It is intended to support internal briefing and assurance by summarising the Code requirements, stating whether we comply, and signposting the evidence (including templates, training materials, governance reporting and learning) used to demonstrate fair, timely and resident-focused complaint handling.

	Code Requirement	Comply	Evidence	Commentary / Explanation
Section 1 Definition of a Complaint				
1.2	Definition of a complaint.	**Yes**	Policy 2026 Sec 6; Complaints Process	Nehemiah has adopted the Housing Ombudsman definition verbatim: "an expression of dissatisfaction, however made...".
1.3	Third-party handling/Advocates.	**Yes**	Policy 2026 Sec 6 & 11; Staff briefing (March 2026) covering third-party authority; Internal shared drive: Complaints \ Evidence \ Training & Briefings	Complainants do not need to use the word "complaint". Where a third party (e.g., MP, relative, advocate) raises an issue, the complaint is accepted and progressed once authority/consent to act is confirmed and recorded.
1.4	Service Request vs. Complaint.	**Yes**	Policy 2026 Sec 10; Service request vs complaint guidance included in staff briefing (March 2026); Internal shared drive: Complaints \ Evidence \ Training & Briefings	A service request is a request for action to put something right. A complaint is an expression of dissatisfaction about the service received and/or the response to a service request. This distinction is set out in the policy and reinforced through the March staff briefing and tenant information used by frontline teams.

1.5	Complaint during ongoing request.	**Yes**	Policy 2026 Sec 10; HomeMaster case notes (sample with sensitive information removed showing service request progressed alongside complaint); Internal shared drive: Complaints \\ Evidence \\ Case Studies	Efforts to address the service request do not stop just because a formal complaint is raised.
1.6	Surveys and wider feedback.	**Yes**	Policy 2026 Sec 10 & 21; Tenant satisfaction/complaints perception (Mel Research); Complaint closure review notes by Customer Service/Assistant Engagement; Internal shared drive: Complaints \ Evidence \ Satisfaction & QA	Tenant feedback is captured through surveys and third-party research (Mel Research) on satisfaction with services received. Survey dissatisfaction is not automatically logged as a complaint; however, staff signpost the complaints process where appropriate. Once a complaint is closed, it is reviewed by the Customer Service / Assistant Engagement team to check the outcome, learning and any follow-on actions are recorded.
Section 2: Exclusions				
2.1	Consider merits of each case.	**Yes**	Policy 2026 Sec 9; 2025 Self-Assessment	Each complaint is reviewed on its own merits by the investigating officer before refusal.
2.2	Fair and reasonable exclusions.	**Yes**	Policy 2026 Sec 9; Refusal letter template (includes reasons + Ombudsman signposting); Refusal decision checklist/QA prompt; Internal shared drive: Complaints \\ Evidence \\ Templates	Exclusions are limited to issues >12 months old, matters in court (Claim Form filed), or previously considered cases.
2.3	12-month limit and discretion.	**Yes**	Policy 2026 Sec 9; Discretion decision record (including rationale/approval; Internal shared drive: Complaints \\ Evidence \\ Discretion)	Complaints within 12 months are accepted; discretion is used for older cases if there are valid reasons for delay.

2.4	Refusal and Ombudsman rights.	**Yes**	Policy 2026 Sec 12; Complaints Process	Refusal letters explain why a case is unsuitable and provide the right to take the decision to the Ombudsman.
2.5	No blanket approach.	**Yes**	Policy 2026 Sec 16 & 17	Nehemiah considers individual circumstances and reasonable adjustments before applying exclusions.
Section 3: Accessibility and Awareness				
3.1	Easy to complain / Equality Act.	**Yes**	Policy 2026 Sec 11 & 17; Tenant Handbook	Multiple channels provided (social media, internet, phone). Website features **Userway** and translation tools.
3.2	Tenants must be able to raise complaints in any way and with any member of staff. All staff must understand the complaints process and pass complaint details to the appropriate person.	**Yes**	Policy 2026 Sec 6 & 11; complaints procedure and staff briefing materials; internal shared drive: Complaints \ Evidence \ Training & Briefings.	Tenants may raise a complaint through any available channel or with any member of staff. Staff are briefed to recognise expressions of dissatisfaction, record the details and promptly refer them to the responsible complaints officer.
3.3	High volumes as a positive.	**Yes**	Dashboard Report 2025/26; Board/Operations Committee performance presentation (internal); Internal shared drive: Complaints \\ Evidence \\ Governance Reporting	Complaints rose to **77 (25/26)** from 37. The Board views this as a sign of "improved awareness and confidence".
3.4	Clear, published policy.	**Yes**	Policy 2026 Sec 25; Complaints Process Link; Winter Nehemiah Newsletter; Spring/Summer Newsletter Published; Have you seen our latest newsletter?	The two-stage process and timeframes are published on the website in multiple languages.
3.5	The policy must explain how the landlord will publicise details of the complaints policy, including information about the Ombudsman and the Complaint Handling Code.	**Yes**	Policy 2026 Sec 12 & 25; complaints process webpage; Tenant Handbook; tenant newsletters and complaints information.	The policy explains how Nehemiah publicises the complaints process. Information about the Housing Ombudsman and Complaint Handling Code is available through the website, tenant information and periodic communications.
3.6	Landlords must give tenants the opportunity to have a representative deal with their complaint on their behalf, and to be represented or accompanied at any meeting with the landlord.	**Yes**	Policy 2026 Sec 6 & 11; representative/third-party authority process; staff briefing materials; complaint case records with sensitive information removed.	Tenants may appoint a representative to act on their behalf and may be accompanied or represented at meetings. Authority or consent is confirmed and recorded before information is shared or the representative acts for the tenant.

3.7	Access to Ombudsman Service.	**Yes**	Policy 2026 Sec 12; Policy Link	The policy and complaint leaflet inform tenants of their right to access the Ombudsman at any stage.
Section 4: Complaint Handling Staff				
4.1	Assigned staff and MRC.	**Yes**	Policy 2026 Sec 4; Operations Committee Terms of Reference and/or minutes confirming the MRC role-holder; Internal email (Apr 2025) MRC role description shared for implementation (sensitive information removed); Internal shared drive: Complaints \ Evidence \ Governance	**Director of Operations** is lead officer. **Chair of Operations Committee** is the Member Responsible for Complaints (MRC).
4.2	The complaints officer must have access to staff at all levels to facilitate the prompt resolution of complaints. They must also have the authority and autonomy to act to resolve disputes promptly and fairly.	**Yes**	Policy 2026 Sec 4; complaints roles and responsibilities; senior management and cross-service escalation arrangements; governance reporting records.	The complaints officer has direct access to colleagues and managers across the organisation and can obtain information, coordinate actions and escalate barriers. The role has sufficient authority and autonomy to agree fair and timely resolutions.

4.3	Culture of learning/Training.	**Yes**	Policy 2026 Sec 22; Staff training materials (incl. 2024 Code updates); Training attendance/completion record (or briefing register, March 2026); Internal email (Mar 2026) briefing materials/slide deck circulated (sensitive information removed); Internal shared drive: Complaints \ Evidence \ Training & Briefings.	Mandatory complaint handling training is provided to all staff, including the 2024 Code updates
4.4	Use of Housing Ombudsman Spotlight reports (learning).	**Yes**	Housing Ombudsman Spotlight reports (highlighted extracts used for learning); *Severe Maladministration: Aids and Adaptations – Staff Learning Report*; Briefing/training materials referencing Spotlight themes; Internal shared drive: Complaints \\ Evidence \\ Ombudsman Spotlight.	Spotlight reports are summarised into staff learning reports and shared through briefings/training to reinforce good practice, highlight risks, and inform service improvements.
Section 5: Complaint Handling Process				
5.2	Strictly two stages (no Stage 0).	**Yes**	Policy 2026 Sec 14 & 15	Nehemiah uses only Stage 1 (Investigation) and Stage 2 (Review) for staff and contractors.
5.10	Records of adjustments.	**Yes**	Policy 2026 Sec 11 & 17; HomeMaster 'reasonable adjustments' field (screenshot with sensitive information removed) and/or adjustments report extract; Internal shared drive: Complaints \\ Evidence \\ HomeMaster.	Reasonable adjustments (e.g., large print, home visits) are recorded on the **HomeMaster** management system.
5.12	Full records kept of outcomes.	**Yes**	Policy 2026 Sec 20; HomeMaster audit trail/report extract showing correspondence, outcomes and remedies recorded; Internal shared drive: Complaints \\ Evidence \\ HomeMaster.	All correspondence, definition, and outcomes are logged in the **HomeMaster** system for an audit trail.
5.13	Managing unreasonable/unacceptable behaviour.	**Yes**	Unreasonable Behaviour procedure; Staff guidance on applying contact restrictions fairly; Template letters (if applicable); Internal shared drive: Complaints \\ Evidence \\ Unreasonable Behaviour	A separate procedure sets out how we manage unreasonable behaviour in a fair and proportionate way, while ensuring tenants can still access the complaints process and any reasonable adjustments are considered and recorded.

5.14	Responding to Housing Ombudsman requests and determinations.	**Yes**	Procedure for responding to Housing Ombudsman requests and determinations (roles/responsibilities, deadlines, approvals); Internal email trail (as required) Ombudsman request allocation and response sign-off (sensitive information removed); Internal shared drive: Complaints \ Evidence \ Ombudsman Requests & Determinations	A structured procedure sets out how we respond to Housing Ombudsman enquiries, information requests and determinations. It clarifies ownership across relevant teams, required evidence, internal sign-off, and escalation routes to ensure responses are timely, consistent and accountable.
Section 6: Complaint Stages				
6.3	Stage 1: 10 working days.	**Yes**	Policy 2026 Sec 15; Dashboard 2025/26	Full-year average for Stage 1 was **7.2 days**, better than the 10-working-day target.
6.14	Stage 2: 20 working days.	**Yes**	Policy 2026 Sec 15; Dashboard 2025/26	Full-year average for Stage 2 was **18.4 days**, within the 20-day target.
6.18	Addressing all points raised.	**Yes**	Stage 1 acknowledgement letter template; Stage 2 acknowledgement letter template; Stage 1 response letter template; Stage 2 response letter template; Internal email (Jan 2026) complaint templates/procedures shared (sensitive information removed); Policy 2026 (templates aligned to Code); Internal shared drive: Complaints \ Evidence \ Templates	Nehemiah uses Ombudsman-aligned templates to ensure all parts of the definition are addressed with reasons.
Section 7: Putting Things Right				
7.1	Actions to put things right.	**Yes**	Policy 2026 Sec 1, 18 & 19; Compensation Policy	Remedies include apologies, financial remedy (per revised June 2024 policy), and changing practices.

7.2	Remedy reflects impact.	**Yes**	Policy 2026 Sec 18; Compensation policy (bands/matrix extract); Internal shared drive: Complaints \\ Evidence \\ Remedies & Compensation	Compensation offers reflect categorized impact: minor, medium, or high impact on the resident.
Section 8: Self-Assessment & Reporting				
8.1	Produce annual report.	**Yes**	Dashboard Report 2025/26; Annual Complaint Performance Report (published as part of the annual reporting suite); Annual Reports Page	Nehemiah produces a quarterly dashboard and an **Annual Complaint Performance Report** for scrutiny.
8.2	Report to governing body.	**Yes**	Policy 2026 Sec 20; Operations Report Feb 2026 (Board/Operations Committee pack agenda item/minute reference); Internal shared drive: Complaints \\ Evidence \\ Governance Reporting	Performance reports are an agenda item for the Board and Operations Committee. Supporting evidence (presentations, briefing notes and internal QA logs) is held on the internal shared drive and is not externally accessible.
8.3	Assessment after restructure.	**Yes**	Policy 2026 Sec 25; Policy approval presentation (March/April 2026); Staff briefing (March 2026); Internal email (Mar 2026) policy changes and briefing materials confirmed (sensitive information removed); Internal shared drive: Complaints \ Evidence \ Policy Review & Approval	The complaints policy introduced in April was reviewed and updated using learning and performance from the previous year (including themes, compliance against targets, and outcomes from the prior self-assessment). The approved policy was supported by an internal presentation and a staff briefing (briefing delivered in March) to embed key changes such as the service request vs complaint distinction and third-party handling.
Section 9: Scrutiny and Oversight				
9.1	Learning from complaints.	**Yes**	Dashboard Report 2025/26; You Said We Did; You Said, We Did: Turning Your Feedback into Action; Complaint closure review (Customer Service/Assistant Engagement); Internal shared drive: Complaints \\ Evidence \\ Learning	Improvements include **mandatory post-inspections** and **contractor vetting protocols**.

9.2	TSM Satisfaction data.	**Yes**	TSM Dashboard; Dashboard Report 2025/26	Satisfaction with complaint handling (TP09) reached **47%** annually, an improvement from 41%.
9.3	Reporting wider learning and improvements.	**Yes**	Dashboard Report 2025/26; You Said, We Did updates; tenant newsletters; staff briefings; Board and Operations Committee reports; internal shared drive: Complaints \ Evidence \ Learning & Governance Reporting.	Learning and service improvements from complaints are reported to tenants, staff, the Operations Committee and the Board through regular performance reporting and feedback communications.
9.4	Senior accountable lead and trend analysis.	**Yes**	Policy 2026 Sec 4; complaints roles and responsibilities; quarterly dashboard and trend analysis; senior management and governance reporting; internal shared drive: Complaints \ Evidence \ Governance.	The Director of Operations is the senior accountable lead for complaint handling. Complaint themes and trends are reviewed to identify systemic issues, risks and any policies or procedures requiring revision.
9.5	Appointment of the MRC.	**Yes**	Policy 2026 Sec 4; Operations Committee Terms of Reference and/or minutes confirming MRC appointment; Internal email (Apr 2025) MRC role description shared for implementation (sensitive information removed); Internal shared drive: Complaints \ Evidence \ Governance	The **Chair of the Operations Committee** is the designated MRC, ensuring a positive complaint culture.
9.6	MRC access to information and staff.	**Yes**	Operations Committee Terms of Reference; MRC role description; complaints dashboards and committee reports; access to the Director of Operations, Housing Services Manager and relevant staff.	The MRC receives suitable performance and case-level information and can engage with responsible officers and managers to scrutinise complaint handling and report findings to the governing body.
9.7	Minimum complaint information to the MRC and governing body.	**Yes**	Quarterly complaint dashboard; Operations Committee and Board reports; Ombudsman determination and order updates; annual complaints performance and service improvement report; meeting minutes.	Regular reporting covers complaint volumes, categories, outcomes, response performance, trends, Ombudsman findings and progress against orders. The annual report is presented for scrutiny and approval.
9.8	Standard complaint-handling objective.	**Yes**	Staff appraisal objectives and competency framework; complaint handling training and briefings; contractor requirements where applicable; relevant professional standards and Code guidance.	Relevant staff are expected to work collaboratively, take collective responsibility for service failures and engage professionally with complainants. These expectations are reinforced through objectives, training and management oversight.