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Registered provider of social housing: H2452 | **Registered with Ofsted**: 2791302

Board

Meeting date: 21 May 2026

Item: Annual Complaints Report 2025/26

Title of paper:	Complaints report and Self-assessment
Status:	For Approval and Discussion
Responsible Officer:	Rebecca Pritchard, Director of Client Services
Author:	Rebecca Pritchard (rpritchard@transformhousing.org.uk)
Attachments:	Appendix 1: Transform Housing & Support Complaints Self-Assessment

1. Purpose of paper

1.1 Registered Providers are required to prepare and publish an annual self-assessment to evidence compliance with the Housing Ombudsman Service (HOS) complaints code. The self-assessment should also set out performance, learning and service improvements identified and implemented as a result of complaints received.

1.2 Transform's Board of Trustees is required to prepare and publish a response to the self-assessment.

1.3 The purpose of this report is to provide the Board with the information and assurance it needs to consider the self-assessment (**in Appendix 1**) and approve its publication.

2. Recommendations

2.1 The CEIC reviewed this report on 28 April 2026 and recommends the Board:

2.1.2 Note the report

2.1.3 Approves the self-assessment **(Appendix 1**) and response for publication

3. Complaints Performance 2025/26

3.1. The new Complaints Policy was launched on 1 April 2024 to comply with the updated HOS code and included supporting policies and procedures:

- Reasonable Adjustment Policy
- Compensation Policy
- Vulnerability Policy
- Unreasonable Behaviour [when making a complaint] Policy

3.2. We updated the Compensation Policy in March 2026 to reflect the latest HOS guidance.

3.3. In the summer of 2025, we identified an increase in the number of stage 2 complaint escalations and delivered Values-based Complaints Handling training for asset management colleagues. This saw a reduction in the number of stage 2 escalations.

3.4. Client Satisfaction with complaints handling decreased slightly from 63% to 61% as reported through the Client Satisfaction Surveys in 2024 and 2025. This remains an endorsement of the new approach, although we continue to seek to improve our performance in this area.

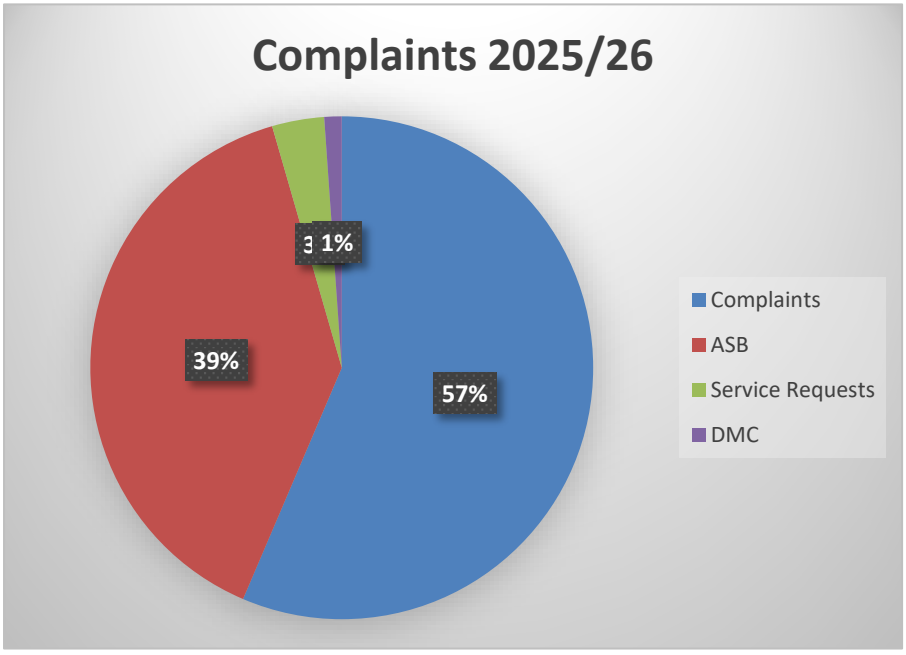
Our journey

Number of complaints
2023/24: 19
2024/25: 158
2025/26: 178 (37 related to one ASB situation – which has involved police and community safety officers: both the complainant and our client have been issued with ABCs)
Satisfaction with complaints handling
2023: 48.9%
2024: 62.5%
2025: 61%

Number and type of complaints

3.5. We received at total of 179 complaints during 2025/26. This compares to 158 complaints in 2024/25. One of the main reasons for the increases was a high number of complaints (37) related to a long standing ASB issue with a Transform client from their neighbour. Despite the involvement of community safety and the police, legal advice is that the type of incidents being reported would not be sufficient to secure possession through the courts. There have also been counter allegations made about the neighbour. There is ongoing support and engagement with all parties.

3.6. Complaints are further subdivided into complaints (101) with a further two for DMC concerns, ASB (70) concerns and service requests (6). There were also two Damp & Mould reports through the complaints process. We received one anonymous allegation about a client was received through this route, but we were unable to respond as there were no contact details: this has not been included in the analysis. Service requests and ASB concerns reported through the complaints form were responded to formally using the timescales in the complaints policy to ensure accountability and create a clear audit trail.



3.7. The high proportion of ASB issues is distorted by 37 ASB complaints regarding a single ongoing situation.

3.8. The largest category of the 101 complaints throughout the year was about maintenance and repairs (40 or 42 if the Damp & Mould Complaints are included). The second largest category was about service quality and communications (38). Of these, a number related to FRA actions being taken forwards without effective communication with the clients affected. A complex situation involving several clients in one service area also contributed to an increase in this category during Q4. We also had a number of “other” complaints from clients about rent and service charge increases during March.

3.9. The majority (158 or 88%) of all category of complaints (including ASB and service requests) were responded to within target timescales. This includes the 37 complaints about ASB, where we agreed with the complaintant to log them but not to instigate individual responses as this would not add value to our ongoing management of the situation. A further four were within timescale but pending responses at 31 March 2026. Nine per cent (16) complaints were not responded to within timescale. This includes five where the deadline was missed by one day. A further five were extended and clients kept informed about the progress of their complaint and the reasons for thedelay. One complaint was not responded to as it had been raised by a client who was unwell and was subsequently sectioned. It was agreed with their mental health worker that responding formally to the complaint would be inappropriate and exacerbate their situation. Two other complaints related to ASB concerns raised by neighbours of Transform clients, where input from other parties was required to respond effectively.

Of the 179 complaints, 19 (11%) were escalated to stage 2 and, of these all, all but one were resolved within the target timescale, with an agreed extension in place for the remaining one.

Housing Ombudsman Findings

3.10. We had two complaints that were escalated to the Housing Ombudsman Service (HOS) and/ or determined during 2025/26:

- The first (**Ref 2202217201**) resulted in a determination of maladministration in June 2025 for the poor handling of a service request and then series of complaints about noise insulation. This took several years to resolve. The client had a number of other complaints on their return to the property after the works. The handling of these was closely managed and fully responded to at stage 1 and stage 2 within our target timescales, and the stage 2 response was sent in August 2025. We believe the client may have escalated to the HOS but we have not heard anything from the HOS.

- The second (**Ref 202502003**) was regarding a lack of support that contributed to arrears accruing for a client who was working and the anxiety this created. The client was in receipt of specialist advice from the CAB, but his rent arrears were not treated as a priorty debt. The stage 1 and stage 2 responses were completed within timescales and apologies were made for the low level of support provided. At stage 2 we agreed to reduce his arrears by 50% (c. £5,000). Although warnings were issued, no formal action to seek possession was taken and the client was aware they could remain in the property as long as some steps to commence payments and redcue the arrears were made. However, the client decided to return to live at the family home. His mother escalated the complaint to the HOS. A full response was submitted in December 2025 to the HOS, and we have heard nothing further.

Complaints handling

3.11. The complaints management system is well structured and logical but relies on manual processing and co-ordination to set-up complaints on the central spreadsheet, co-ordinate and progress chase to maintain timescales and maintenance to collate correspondence and update the central log. The Client Services Team Administrator is an essential resource to proactively manage the complaints procedure.

3.12. The Complaints Handlers’ Forum brings complaint handlers together and is a forum for them to share experience and learning. We meet quarterly.

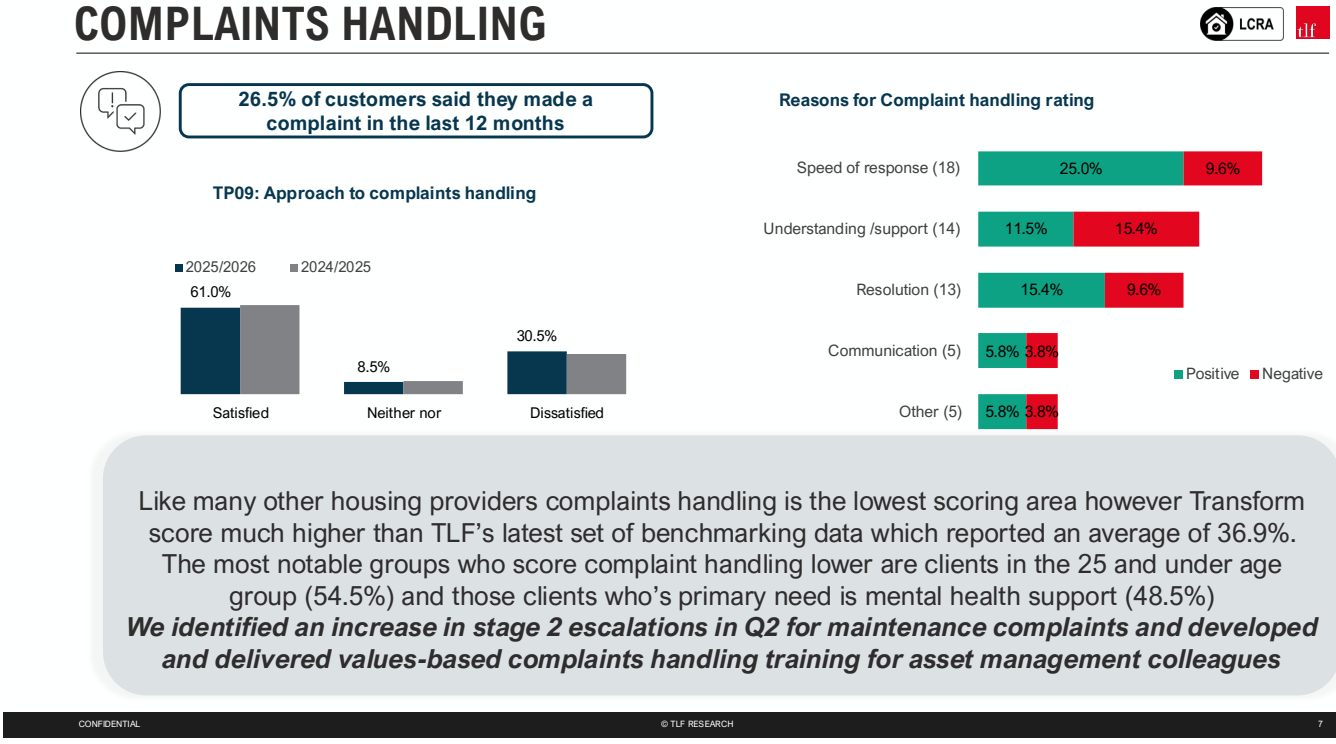
3.13. Where complaints involve more than one department, inter-departmental reviews of complaints are important so that learning can be captured and disseminated across the organisation.

3.14 More use of extensions to enable fuller investigations of complex complaints have been overseen by the Client Services Team Administrator and this improves the client experience, as they are aware we are actively looking into their complaints and understand the reasons for extensions.

Client Experience

3.14. Complaints handling has improved with a focus on the client experience. This ensures clients feel heard, taken seriously and valued. The improved client experience was reflected in the sustained improvement in satisfaction levels with complaints handling, although we are not complacent.

3.15. Clients feeling understood and supported was the main driver of rating given – and further reinforced the need to provide values-based complaints handling training, which we had identified by the increase in stage two escalations during Quarter 2 of 2025/26.



4. Complaints Policy Review

4.1 During 2025/26 we have reviewed our Compensation Policy to reflect changes in the regulatory environment. The Compensation Policy includes the latest Housing Ombudsman Service guidance on calculating compensation.

4.2 The main changes were reported to the Client Forum on 23 April and to the CEIC on 28 April. The amendments were approved.

5.1.1 **Anti-Social Behaviour**

- Developing a new Anti Social Behaviour Policy – with input from the Client Forum. We also developed a Good Neighbours Policy with them, and reviewed the House Rules for living safely and comfortably in shared housing, to make them more strengths-based.

- We also invested in external "expert" training for all managers on responding to and managing ASB. This has improved our confidence in partnership working with the police and community safety, where necessary.

For 2026/27:

- We will report on (1) ASB issues raised for the first time through the complaints process and (2) Complaints about our handling of ASB cases to support analysis and learning.

5.1.2 **Access to Tenant's Flats**

- We finalised and launched our updated policy on Access to Tenant's Properties during 2025/26. This was informed by complaints from clients where communications about access arrangements had not been clear and client's privacy had been impacted.

- Training was provided to colleagues to support understanding and the implementation of the policy.

For 2026/27:

- We will continue to work with Asset Management colleagues to ensure good communications with clients about access arrangements and appointments.

5.1.3 **Trauma informed practice and values-based complaints handling**

- A number of complaints identified the need to improve our trauma-informed practices, especially with clients with complex trauma (or diagnoses of personality disorders). We recognised the importance of empowering teams to resolve issues and avoid unnecessary and potentially overwhelming interventions from managers.

- We also noted a rise in stage two escalations, as a result of people not feeling heard during the stage 1 investigation into their complaints.

- We have accessed training provided by Surrey & Borders Partnership Trust that is co-delivered with someone with lived experience of a personality disorder, which has improved our understanding and confidence in communicating with people with complex trauma.

- We provided values-based complaints handling for colleagues, which saw a reduction in the number of stage two escalations.

For 2026/27:

- We will continue to monitor stage two escalations and draw out insights and learning from complaints – especially about interactions with staff – to continually develop and improve our practice.

- We have commissioned a series of skills-based modules that are rooted in the underpinning evidence-based models of our Ways of Working.

5.1.4 **Communications with clients**

- We received a number of complaints as a result of action being taken to address Fire Risk Assessment actions, where this involved removing items from communal areas or communal storage, and installing additional fire signage. Some clients' personal belongings were moved without taking the time to notify them or check on ownership of items, and some residents felt the additional fire signage was intrusive. There had been inadequate time taken to meet and explain the reasons for the signage prior to it being installed.

For 2026/27:

- Teams will ensure that we build in time to communicate with clients prior to actions being taken, unless they are identified as emergency/ needed to address immediate unacceptable risks.

5.1.5 **Complaints investigations**

- We generally seek to have managers from other services investigating complaints – to provide some independence. However, following a stage 2 escalation review, we noted that where managers identify practice concerns with their peers, albeit in other services, this can impact appropriate challenge and recommendations.

For 2026/27:

- We have agreed that wherever a manager identifies concerns with a peer's practice, they will escalate their findings to their manager to complete the investigation.