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## **YMCA Fairthorne Housing**

# **Complaints Performance and Service Improvement Report 2023/4**

Registered Provider of Social Housing 4875  
Registered Charity 1146415

## **YMCA Fairthorne Housing's Board response to the Complaints Performance and Service Improvement Report 2023/4**

The Board of Fairthorne Housing welcomed the annual complaints report and self-assessment against the Housing Ombudsman's revised Complaint Handling Code. It noted the low number of complaints in the year, that each had been resolved within required timescales and that each had been upheld with organisational learning acted upon.

The Board appointed a Member Responsible for Complaints (the Chair) and an Executive Responsible for Complaints (the Housing Director of YMCA Fairthorne Group's managing agent).

Throughout the year the Board placed emphasis on visiting housing schemes to speak with staff and residents, with a minimum of 2 trustees attending each visit and applying their subject expertise to support improvements to the facilities.

In July 2024 the Board participated in the Complaints Code Self-Assessment process and the charity's Complaints Policy was edited to ensure it was fully in line with the new requirements. The Board was pleased to note its existing Complaints Policy aligned closely, for example having a maximum 2-stage process and timelines that met the new requirements.

In the year the Board was pleased to have been accepted to participate in a pilot for small providers to undertake and report on the Tenant Satisfaction Measures (TSM), currently a requirement of large providers. A survey was carried out and the results reported, discussed and published on our website. The TSM identified areas for learning and systems improvement outside of complaints which are being implemented and the Board is pleased that the process has enabled them to improve services. The most significant learning from the TSM was that our vulnerable residents do not differentiate between service requests and complaints, leading to a higher number of complaints being reported via the TSM process than had been received into our complaints process. This was reported in our TSM submission so that learning could be applied from our participation in the pilot. All 3 housing sites of YMCA Fairthorne Housing have full time on-site maintenance teams who are able to respond to service requests very rapidly.

The Executive Responsible for Complaints monitors complaints on a monthly basis and the Board receives these reports at its quarterly meetings. In July 2024 the Board completed its required self-assessment against the Housing Ombudsman's Complaint Handling Code which

became statutory in April 2024. The Complaints Policy was reviewed alongside this self-assessment and changes were made to ensure its alignment. The revised Complaints Policy was distributed to all residents of YMCA Fairthorne Housing and posted in prominent places in all 3 of YMCA Fairthorne Housing's properties. The self-assessment is appended to this report.

**Peter West**  
**Chair of the Board**

## Complaints Reporting Summary

We received 6 complaints in the year 2023/24.

Complaints related to:

- Housing procedures and rules: 3 complaints
- ASB: 2 complaints
- Rent account charges: 1 complaint.

1 complaint related to Basingstoke, 5 to Southampton and none to Isle of Wight. All complaints were upheld at Stage 1. No complaints went to Stage 2. No complaints were refused. No findings were made by the Ombudsman on non-compliance with the Code.

Service improvements made were:

- Improving liaison with residents when developing new housing policies to ensure their views are considered.
- Improving support planning from the third-party company for residents receiving personal support
- Ensuring out of hours staff are able to tackle noise disturbances
- Establishing further systems for enabling young people to have their voices heard, including a young people's committee able to report directly into governance systems.

## TSM and Complaints Score

We participated in a pilot for small providers to undertake the Tenant Satisfaction Measures including a Tenant Satisfaction Survey. 52 residents reported in the TSM that they had made a complaint in the last 12 months, compared to 6 recorded on our complaints system. On investigation we found these were service requests rather than complaints and that our vulnerable young residents did not differentiate between the two. 72% of the 52 residents who reported in the TSM that they had made a complaint in the last 12 months said they were very satisfied or satisfied with their landlord's approach to complaints handling, with 10% neither satisfied nor dissatisfied and 18% unsatisfied or very unsatisfied.

## Appendix 1: Complaints Code Self Assessment

1<sup>st</sup> July 2024

This self-assessment must be completed and must be shared with the organisation's governing body (or equivalent) annually as part of the complaints performance and service improvement report. Evidence must be included to demonstrate compliance in practice as part of the other elements of the annual complaints performance and service improvement report with additional commentary as necessary. For example, this could include records of quality assurance checks on complaint responses, exclusions and feedback from relevant staff. If the failure to meet a requirement only relates to one service area or department this must be made clear in the commentary section. When completing the self-assessment, organisations should not focus on the number of complaints received. Recording a high number of complaints may be an indication that the organisation welcomes complaints and that individuals are able to access the complaints process easily. Organisations should focus on timescales for responding to complaints and complaint outcomes. Members of the Housing Ombudsman must submit a copy of their self-assessment as part of their annual complaints performance and service improvement report, following the guidance for submissions. The submissions will be used to assess the organisation's compliance with the Code in line with the Housing Ombudsman's duty to monitor against this. The Local Government and Social Care Ombudsman may consider the complaints performance and service improvement report as part of an investigation or its own annual review of complaints.

### Section 1 - Definition of a complaint

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
1.2/ 1.4	Complaints are defined in line with the Code and we recognise the difference between a service request and a complaint.	Yes	Staff are trained to advise Members about the complaints process, and to seek to resolve issues before the need for a formal complaint. We have a	Complaints policy. Staff communication records Records of copies of complaints process and contact details provided to Members routinely

			single complaints process which enables Members to raise issues relating to both landlord matters and personal support matters. Service requests are recorded on Inform or Comply dependent on nature.	Comply – eg repairs Inform – eg support
1.3	Complaints submitted via a third party or representative are handled in line with our complaints policy.	Yes	All complaints, regardless of source or communication techniques are sent to CEO's office, logged and managed as part of our complaints policy.	Complaints policy. Complaints log.
1.5	Individuals completing surveys are made aware of how to complain.	Yes	Surveys contain information about how to complain.	Complaints policy section 4.

## Section 2 – Exclusions

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
2.1	Our policy clearly states that complaints will be accepted unless there is a valid reason not to do so.	Yes	Set out in the complaints policy.	Complaints policy section 5
2.2	Complaints are accepted when referred to us within 12 months of the issue occurring, or the individual becoming aware of the issue.	Yes	Set out in the complaints policy.	Complaints policy section 5
2.3	We do not exclude complaints about safeguarding, or health and safety issues.	Yes	Complaints about these matters are included in our complaints policy and process, however a suitably qualified person is allocated to safeguarding (eg a DSL) and health and safety (eg IOSH/NEBOSH).	Complaints policy section 5
2.4	Our policy sets out the circumstances in which a matter might not be considered or escalated.	Yes	All complaints are escalated to the CEO's office and allocated to a senior member of staff for investigation. There is a commitment to a contact with the complainant within a specific period of time and it is during that conversation and any investigation outcome that further escalations are considered.	Complaints policy section 6

2.5	Where we decline to consider a complaint we explain our reasons to the individual and signpost them to the relevant Ombudsman.	Yes	All complaints are accepted on first complaint received. We do not decline to consider a complaint except for vexatious complaints in which case we will signpost to external bodies including the relevant Ombudsman.	Complaints policy section 5
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## Section 3 - Accessibility and awareness

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
3.1	We provide different channels through which individuals can make a complaint. We have considered our duties under the Equality Act 2010 and anticipated the needs of individuals who may need to access the complaints process.	Yes	Our policy makes clear that we accept complaints using any channel and any communication method. Residents receive personal support from dedicated staff with their day to day activities.	Complaints policy section 6. Complaints Log records method of communication.
3.2	Individuals can raise their complaints in any way and with any member of staff. This includes complaints made directly to the organisation via social media. All staff are aware of the complaint process and able to pass details of the complaint to the appropriate person.	Yes	Our policy sets out that any staff member can be the initial point of contact for a complaint and describes how that member of staff can contribute to early positive resolution.	Copies of complaints policy on display in settings and provided to residents, including routes for anonymous complaints.
3.3	We do not view high volumes of complaints as a negative. We analyse areas where there are low volumes of complaints to ensure individuals are able to complaint.	Yes	All complaints are recorded and our complaints culture is that complaints are further sources of information, learning and ideas for improvements. Therefore they are an essential communication channel	Complaints Policy sections 8 and 9. Complaints reports. Complaints Log.

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
3.4	Our complaints policy is available in a clear and accessible format for all individuals. The policy is published on our website.	Yes	The customer-facing element of the policy is written in plain English and is provided in pdf or electronic format. Where the policy requires further adaptation eg translation we commission this on a case by case basis	Website. Complaints policy on display.
3.5	Our complaints policy explains how we will publicise details of the complaints policy and information about the relevant Ombudsman schemes.	Yes	Identified in the policy	Complaints policy: cited multiple times throughout.
3.6	We give individuals the opportunity to have a suitable representative deal with their complaint on their behalf, and to be represented or accompanied at any meeting with us.	Yes	There are no exclusionary elements in how customers are represented, accompanied or supported.	Complaints policy section 6.
3.7	We provide individuals with information on their right to access the relevant Ombudsman service and how the individual can engage with the relevant Ombudsman about their complaint.	Yes	This is described in the policy.	Complaints policy section 6.

## Section 4 - Complaint handling staff

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
4.1	We have a person or team assigned to take responsibility for the complaint handling process, including liaison with the relevant Ombudsman and ensuring that complaints are reported to our governing body (or equivalent).	Yes	The policy outlines the escalation/sharing of information of relevant complaints to the relevant director responsible for reporting to external bodies, including the Ombudsman.	Complaints Policy section 6.
4.2	The complaints officer has access to staff at all levels to facilitate the quick resolution of complaints and report on complaint handling performance. They have the authority and autonomy to act to resolve disputes quickly and fairly.	Yes	All complaints are handled by the Executive Assistant on behalf of the CEO's office, they have the mandate to assign tasks to any person.	Complaints Policy section 6.
4.3	We prioritise complaint handling and a culture of learning from complaints.  All staff are suitably trained in the importance of complaint handling.  Complaints teams are seen as a core service and not given additional roles that impact their ability to handle complaints effectively.	Yes	Our complaints culture is that complaints are further sources of information, learning and ideas for improvements. Therefore they are an essential communication channel.	Complaints policy section 9. Minutes of director, board and sub-committee meetings. Complaints reports to Programme Committee.

## Section 5 - Complaint handling process

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
5.1	We have a single policy for dealing with complaints covered by the Code.	Yes	We have a single complaints policy which covers all aspects of our work.	Complaints Policy.
5.2	We do not have extra named stages (such as 'stage 0' or 'informal complaint').	Yes	There are 2 complaints stages in our policy named Stage 1 and Stage 2 in line with the Code.	Complaints Policy section 6. Complaints Log.
5.3	We register complaints when an individual expresses dissatisfaction.  We then set out our understanding of the complaint and the outcomes the individual is seeking.  We seek clarification from individuals if the complaint is unclear.	Yes	This is clearly set out in the Complaints Policy.	Complaints Policy section 6. Complaints Log.

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
5.4	<p>Our complaint handlers:</p> <ul style="list-style-type: none"> <li>a) clarify with the individual any aspects of the complaint they are unclear about;</li> <li>b) deal with complaints on their merits, act independently, and have an open mind;</li> <li>c) give individuals a fair chance to set out their position;</li> <li>d) take measures to address any actual or perceived conflict of interest; and</li> <li>e) consider all relevant information and evidence carefully.</li> </ul>	Yes	This guidance is set out in our Complaints Policy.	Complaints Policy section 6.
5.5	We are clear with individuals about which aspects of the complaint we are not responsible for.	Yes	The lead investigator will engage other parties as needed in an investigation, including liaison and signposting to third parties.	Complaints Policy and flowchart.

5.6	Our communication with individuals does not generally identify individual members of staff or contractors.	Yes	We abide by our Data Protection Policy and personal data is redacted in correspondence.	Complaints Policy. Data Protection Policy.
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<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
5.7	Where a response to a complaint will fall outside the timescales set out in the Code we agree with individual suitable intervals for keeping them informed about their complaint.	Yes	Our initial response deadlines are 7 days which is shorter than the Codes's 10 days. The policy sets out how conversations with the complainant will agree further timescales as needed.	Complaints Policy section 6.
5.8	We make reasonable adjustments for individuals where appropriate under the Equality Act 2010. We keep a record of agreed reasonable adjustments and keep these under review.	Yes	This is set out in the policy and in Member's support notes. Our housing residents are all in receipt of personal support.	Complaints Policy. Equal Opportunities Policy.
5.9	We do not refuse to escalate complaints unless there are valid reasons for doing so.	Yes	We have no exclusion policy for complaint escalation.	Complaints Policy section 5 and 6.
5.10	We keep a full record of the complaint, and the outcomes at each stage. This includes the original complaint and the date received, all correspondence with the individual, correspondence with other parties and any relevant supporting documentation such as reports or surveys.	Yes	Out this is set out is defined in the Complaints Policy and a Complaints Log along with complaints files including all correspondence is maintained.	Complaints Log. Complaints Policy section 6. Complaints filing system.

5.11	We have systems in place to ensure that a complaint can be remedied at any stage of our complaints process.	Yes	The Complaints Policy sets out how any member of staff can seek to resolve matters, plus the requirement to discuss with a complainant what a positive resolution would look like for them.	Complaints Policy section 6.
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<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
5.12	We have a policy and procedure in place for managing unacceptable behaviour from individuals and/or their representatives. We are able to evidence reasons for putting any restrictions in place and keep these restrictions under review. Restrictions are subject to an annual review as a minimum.	Yes	In housing policies and procedures.	Housing policies and procedures. Complaints policy section 5.
5.13	Any restrictions placed on an individual's contact due to unacceptable behaviour are proportionate and have regard to the provisions of the Equality Act 2010.	Yes	In housing policies and procedures. Each Member has a support worker who advocates for them.	Housing policies and procedures.

## Section 6 - Complaint stages

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
Stage 1				
6.1	We have processes in place that allow us to identify whether complaints can be responded to quickly or whether they require further consideration.	Yes	This is set out in the Complaints Policy.	Complaints Policy section 5 and 6.
6.1	We take account of the complexity of the complaint and whether individuals are vulnerable or at risk when deciding how quickly we should respond to a complaint.	Yes	Housing policies and procedures. Every Member has a support worker and where there are further complexities their support worker is involved.	Housing policies and procedures. Complaints Policy section 5 and 6.
6.2	Complaints are acknowledged and logged within five working days of receipt.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy section 6. Complaints Reporting.
6.3	We issue a final response to stage 1 complaints <u>within 10 working days</u> of the complaint being received.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy section 6.

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
6.4	Any extension to this timescale is taken in line with the "comply or explain" principles set out in the Code and clearly communicated to the complainant.  Extensions to timescales for responding do not exceed 10 days.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy section 6.
6.5	When we inform an individual about an extension to these timescales we provide them with the contact details of the relevant Ombudsman.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy section 6.
6.6	A complaint response is sent to individuals when the answer to the complaint is known, not when the outstanding actions required to address the issue are completed. Outstanding actions are tracked and actioned promptly with appropriate updates provided to the individual.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy section 6.

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
6.7	We address all points raised in the complaint definition and provide clear reasons for any decisions, referencing the relevant policy, law and good practice where appropriate.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.8	Where we have got something wrong we record the complaint as "upheld" even if there are elements of the complaint which are not "upheld". We do not record complaints as being "partially upheld".	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.9	We deal with additional complaints raised during the investigation or after a stage 1 response has been issued in line with the requirements of the Code.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
6.10	<p>We confirm the following in writing to individuals at the completion of stage 1 in clear, plain language:</p> <ul style="list-style-type: none"> <li>a. the complaint stage;</li> <li>b. the complaint definition</li> <li>c. the decision on the complaint;</li> <li>d. the reasons for any decisions made;</li> <li>e. the details of any remedy offered to put things right;</li> <li>f. details of any outstanding actions; and</li> <li>g. details of how to escalate the matter to stage 2 if the individual is not satisfied with the response.</li> </ul>	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.

6.11	We have systems in place to ensure that a complaint can be remedied at any stage of our complaints process.	Yes	Set out in Complaints Policy section 6.	Complaints Policy.
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Stage 2 Review				
6.12	We progress complaints to stage 2 where all or part of the complaint has not been resolved to the individual's satisfaction. This is sent by a staff-member authorised to speak on behalf of the organisation.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.13	Requests for stage 2 are acknowledged and logged at stage 2 of the complaints procedure within five working days of receipt.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.14	Individuals do not have to explain their reasons for wanting a stage 2, simply that they remain unhappy.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.15	Stage 2 consideration is a review of the adequacy of the stage 1 response as well as any new and relevant information not previously considered. Stage 2 is not a more thorough, detailed investigation of the complaint.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.

6.16	<p>If any aspect of the complaint is unclear, we ask the individual for clarification.</p> <p>On receipt of the escalation request, we set out our understanding of any outstanding issues and the outcomes the individual is seeking.</p>	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.17	The person considering the complaint at stage 2 is never the same person that considered the complaint at stage 1.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.18	We respond to the stage 2 reviews <u>within 20 working days</u> of the complaint being escalated by the individual.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.19	Extensions to the stage 2 timescale are taken in line with the "comply or explain" principles set out in the Code and clearly communicated to the complainant.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.19	Extensions to the timescale for a response do not exceed 20 working days.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.



6.20	When we inform an individual about an extension to stage 2 timescales they are provided with the contact details of the relevant Ombudsman.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.21	<p>We confirm the following in writing to the individual at the completion of stage 2 in clear, plain language:</p> <ul style="list-style-type: none"> <li>a. the complaint stage;</li> <li>b. the complaint definition;</li> <li>c. the decision on the complaint;</li> <li>d. the reasons for any decisions made;</li> <li>e. the details of any remedy offered to put things right;</li> <li>f. details of any outstanding actions; and</li> <li>g. details of how to escalate the matter to the relevant Ombudsman Service if the individual remains dissatisfied.</li> </ul>	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.

6.22	If a complaint is upheld at stage 1, and the stage 2 response agrees with those findings, we record the complaint as upheld. This is the case even if the stage 2 response finds no fault in the way the stage 1 complaint was handled.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
Further stages				
6.24	Our complaint process has no more than two stages.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
6.25	Complaints handled by third parties on our behalf (e.g contractors) follow the two stage process set out in the code. Individuals are not expected to go through two complaints processes.	Yes	This is set out in the Complaints Policy section 3.	Complaints Policy.
6.26	We ensure that any third parties handle complaints in line with the Code	Yes	This is set out in the Complaints Policy.	Complaints Policy.

## Section 7 - Putting things right

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
7.1	Where something has gone wrong we acknowledge this and set out the actions we have already taken, or intend to take, to put things right.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.
7.2	Remedies offered reflect the impact on the individual as a result of any fault identified.	Yes	This is set out in the Complaints Policy section 7.	Complaints Policy.
7.3	Remedies offered clearly set out what will happen and by when, in agreement with the individual where appropriate. Any remedy proposed is followed through to completion.	Yes	This is set out in the Complaints Policy in section 7.	Complaints Policy.
7.4	Remedies take account of the guidance on remedies issued by the relevant Ombudsman when deciding on appropriate remedies.	Yes	This is set out in the Complaints Policy section 7.	Complaints Policy.

Code section	Code requirement	Comply Yes/No	Explanations and Commentary	Evidence
8.1	<p>We produce an annual complaints performance and service improvement report for scrutiny and challenge, which include:</p> <ul style="list-style-type: none"> <li>a) the annual self-assessment against this Code to ensure their complaint handling policy remains in line with its requirements.</li> <li>b) a qualitative and quantitative analysis of the organisation's complaint handling performance. This must also include a summary of the types of complaints the organisation has refused to accept;</li> <li>c) any findings of non-compliance with this Code;</li> <li>d) the service</li> </ul>	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.

	<p>improvements made as a result of the learning from complaints;</p> <p>e) any annual report about the organisation's performance</p>			
	<p>from the relevant Ombudsman; and</p> <p>f) any other relevant reports or publications produced by the relevant Ombudsman in relation to the work of the organisation.</p>	Yes	This is set out in the Complaints Policy.	Complaints Policy.
8.2	<p>Our annual complaints performance and service improvement report is reported to our governing body (or equivalent) and published to residents.</p> <p>The governing body's response to the report is published alongside this.</p>	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.

## Section 8 - Self-assessment, reporting and compliance

## Section 9 – Scrutiny &amp; oversight: Continuous learning and improvement

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
9.1	We look beyond the circumstances of the individual complaint and consider whether any service improvements should be made as a result of any learning.	Yes	This is set out in the Complaints Policy section 9.	Complaints Policy.
9.2	We use complaints as a source of intelligence to identify issues and introduce positive changes in service delivery.	Yes	This is set out in the Complaints Policy section 8.	Complaints Policy.
9.3	We report back on wider learning and improvements from complaints in an annual report and more frequently to other stakeholders, such as individuals, staff and relevant committees or panels.	Yes	This is set out in the Complaints Policy section 8.	Complaints Policy.
9.4	A suitably senior executive oversees our complaint handling performance. They assess any themes or trends to identify potential systemic issues, serious risks or policies and procedures that require revision.	Yes	This is set out in the Complaints Policy section 8.	Complaints Policy.

<b>Code section</b>	<b>Code requirement</b>	<b>Comply Yes/No</b>	<b>Explanations and Commentary</b>	<b>Evidence</b>
9.5	A member of the governing body (or equivalent) has been appointed to have lead responsibility for complaints to support a positive complaint handling culture.	Yes	This is set out in the Complaints Policy section 6 (Director).	Complaints Policy.
9.6	The appointed person ensures the governing body (or equivalent) receives regular information on complaints that provides insight on the organisation's complaint handling performance. This person has access to suitable information and staff to perform this role and report on their findings.	Yes	This is set out in the Complaints Policy section 6 and section 8.	Complaints Policy.
9.7	Our governing body (or equivalent) receives the information required under this section of the Code.	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.

Code section	Code requirement	Comply Yes/No	Explanations and Commentary	Evidence
9.8	<p>We have a standard objective in relation to complaint handling for all employees that reflects the need to:</p> <ul style="list-style-type: none"> <li>• have a collaborative and co- operative approach towards resolving complaints, working with colleagues across teams and departments;</li> <li>• take collective responsibility for any shortfalls identified through complaints rather than blaming others; and</li> <li>• act within the professional standards for engaging with complaints as set by any relevant professional body.</li> </ul>	Yes	This is set out in the Complaints Policy section 6.	Complaints Policy.