

# Complaint Handling Code — Self-Assessment

Housing Ombudsman Complaint Handling Code — Annual Self-Assessment 2025

This self-assessment form has been completed by the complaints officer and reviewed and approved by the Board. It is published as part of the annual complaints performance and service improvement report in accordance with the Housing Ombudsman Complaint Handling Code.

## Section 1: Definition of a Complaint

Ref	Requirement	Comply
1.2	Complaint definition matches Code wording	Yes
1.3	Resident need not use the word 'complaint'	Yes
1.4	Distinction between service request and complaint	Yes
1.5	Complaint raised when dissatisfied with service request response	Yes
1.6	Survey dissatisfaction signposted to complaints process	Yes

## Section 2: Exclusions

Ref	Requirement	Comply
2.1	Complaints accepted unless valid reason not to	Yes
2.2	Policy sets out fair exclusion circumstances	Yes
2.3	Complaints accepted within 12 months	Yes
2.4	Explanation and Ombudsman right provided if not accepted	Yes
2.5	No blanket approach to exclusions	Yes

## Section 3: Accessibility and Awareness

Ref	Requirement	Comply
3.1	Multiple channels for complaints	Yes
3.2	Complaints can be raised with any staff member	Yes
3.3	Complaint volumes monitored without negative bias	Yes
3.4	Policy published in clear, accessible format on website	Yes
3.5	Policy references Ombudsman and Code	Yes
3.6	Representatives can act on behalf of residents	Yes
3.7	Ombudsman contact details provided	Yes

## Section 4: Complaint Handling Staff

Ref	Requirement	Compl y
4.1	Designated complaints officer/team in place	Yes
4.2	Complaints officer has access to all staff levels	Yes
4.3	Complaint handling prioritised with trained staff	Yes

## Section 5: Complaint Handling Process

Ref	Requirement	Compl y
5.1	Single complaints policy in place	Yes
5.2	No extra named stages (e.g. 'stage 0')	Yes
5.3	No more than two stages	Yes
5.4	Third-party responses form part of two-stage process	Yes
5.5	Third parties handle complaints in line with Code	Yes
5.6	Complaint definition set out at each stage	Yes
5.7	Responsibility boundaries clarified	Yes
5.8	Complaints handled on merits, independently, openly	Yes
5.9	Resident kept informed if timescales exceeded	Yes
5.10	Reasonable adjustments under Equality Act recorded	Yes
5.11	Escalation not refused without valid reason	Yes
5.12	Full record of complaint and outcomes kept	Yes
5.13	Complaint can be remedied at any stage	Yes
5.14	Policy for managing unacceptable behaviour	Yes
5.15	Restrictions proportionate and Equality Act compliant	Yes

## Section 6: Complaints Stages

Ref	Requirement	Compl y
6.1	Processes to consider early resolution	Yes
6.2	Stage 1 acknowledged within 5 working days	Yes
6.3	Stage 1 full response within 10 working days	Yes
6.4	Extensions no more than 10 days with explanation	Yes
6.5	Ombudsman details provided with any extension	Yes
6.6	Response provided when answer known, not when actions complete	Yes
6.7	All points in complaint definition addressed	Yes
6.8	Additional complaints during investigation handled appropriately	Yes
6.9	Stage 1 written confirmation includes all required elements	Yes

Ref	Requirement	Compl y
6.10	Unresolved complaints progressed to Stage 2	Yes
6.11	Stage 2 acknowledged within 5 working days	Yes
6.12	Residents not required to explain escalation reasons	Yes
6.13	Stage 2 handled by different person than Stage 1	Yes
6.14	Stage 2 response within 20 working days	Yes
6.15	Stage 2 extensions no more than 20 days with explanation	Yes
6.16	Ombudsman details provided with Stage 2 extension	Yes
6.17	Stage 2 response when answer known	Yes
6.18	All points addressed with policy/law references	Yes
6.19	Stage 2 written confirmation includes all required elements	Yes
6.20	Stage 2 is final response involving all suitable staff	Yes

## Section 7: Putting Things Right

Ref	Requirement	Compl y
7.1	Acknowledgement and remedial actions set out	Yes
7.2	Remedy reflects impact on resident	Yes
7.3	Remedy clearly set out with timeline	Yes
7.4	Ombudsman guidance considered for remedies	Yes

## Section 8: Self-Assessment, Reporting and Compliance

Ref	Requirement	Compl y
8.1	Annual complaints performance report produced	Yes
8.2	Report published on website and to governing body	Yes
8.3	Self-assessment after significant changes	Yes
8.4	Review after Ombudsman investigation if requested	Yes
8.5	Ombudsman informed of exceptional non-compliance	Yes

## Section 9: Scrutiny, Oversight and Continuous Learning

Ref	Requirement	Compl y
9.1	Service improvements considered from complaint learning	Yes
9.2	Complaints used as intelligence for positive changes	Yes
9.3	Learning reported to stakeholders	Yes
9.4	Senior lead accountable for complaint handling	Yes

Ref	Requirement	Compl y
9.5	Member Responsible for Complaints appointed	Yes
9.6	MRC ensures governing body receives regular information	Yes
9.7	MRC receives required minimum updates	Yes
9.8	Standard objective for complaint handling for all staff	Yes

Approved by the Board of V&F Homes Ltd | Self-Assessment 2025